

Mali: WHO and UNICEF estimates of immunization coverage: 2023 revision

BACKGROUND NOTE: Each year WHO and UNICEF jointly review reports submitted by Member States regarding national immunization coverage, finalized survey reports as well as data from published and grey literature. Based on these data, with due consideration to potential biases and the views of local experts, WHO and UNICEF attempt to distinguish between situations where available empirical data accurately reflect immunization system performance and those where the data are likely compromised and present a misleading view of coverage.

WHO and UNICEF estimates are country-specific; that is to say, each country's data are reviewed individually, and data are not borrowed from other countries in the absence of data. Estimates are not based on ad hoc adjustments to reported data; in some instances empirical data are available from a single source, usually the nationally reported coverage data. In cases where no data are available for a given country/vaccine/year combination, data are considered from earlier and later years and interpolated to estimate coverage for the missing year(s). In cases where data sources are mixed and show large variation, an attempt is made to identify the most likely estimate with consideration of the possible biases in available data. For methods see:

*Burton et al. 2009. Bull World Health Organ.

*Burton et al. 2012. PLoS One.

*Danovaro-Holliday et al. 2021. Gates Open Res.

DATA SOURCES.

ADMINISTRATIVE coverage: Reported by national authorities and based on aggregated administrative reports from health service providers on the number of vaccinations administered during a given period (numerator data) and reported target population data (denominator data). May be biased by inaccurate numerator and/or denominator data.

OFFICIAL coverage: Estimated coverage reported by national authorities that reflects their assessment of the most likely coverage based on any combination of administrative coverage, survey-based estimates or other data sources or adjustments. Approaches to determine OFFICIAL coverage may differ across countries.

SURVEY coverage: Based on estimated coverage from population-based household surveys among children aged 12-23 or 24-35 months following a review of survey methods and results. Information is based on the combination of vaccination history from documented evidence or caregiver recall. Survey results are considered for the appropriate birth cohort based on data collection period.

ABBREVIATIONS

BCG: percentage of births who received one dose of Bacillus Calmette Guerin vaccine.

DTP1 / DTP3: percentage of surviving infants who received the 1st / 3rd dose, respectively, of diphtheria and tetanus toxoid with pertussis containing vaccine.

Pol3: percentage of surviving infants who received the 3rd dose of polio containing vaccine. May be either oral or inactivated polio vaccine.

IPV1: percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age. For countries utilizing IPV containing vaccine only, i.e., no recommended dose of OPV, WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

Production of IPV coverage estimates, which begins in 2015, results in no change of the estimated coverage levels for the 3rd dose of polio (Pol3). For countries recommending routine immunization with a primary series of three doses of IPV alone, WHO and UNICEF estimated Pol3 coverage is equivalent to estimated coverage with three doses of IPV. For countries with a sequential schedule, estimated Pol3 coverage is based on that for the 3rd dose of polio vaccine regardless of vaccine type.

IPV2: percentage of surviving infants who received a 2nd dose of inactivated polio vaccine. IPV2 coverage estimates produced for OPV using countries.

MCV1: percentage of surviving infants who received the 1st dose of measles containing vaccine. In countries where the national schedule recommends the 1st dose of MCV at 12 months or later based on the epidemiology of disease in the country, coverage estimates reflect the percentage of children who received the 1st dose of MCV as recommended.

MCV2: percentage of children who received the 2nd dose of measles containing vaccine according to the nationally recommended schedule.

RCV1: percentage of surviving infants who received the 1st dose of rubella containing vaccine. 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.

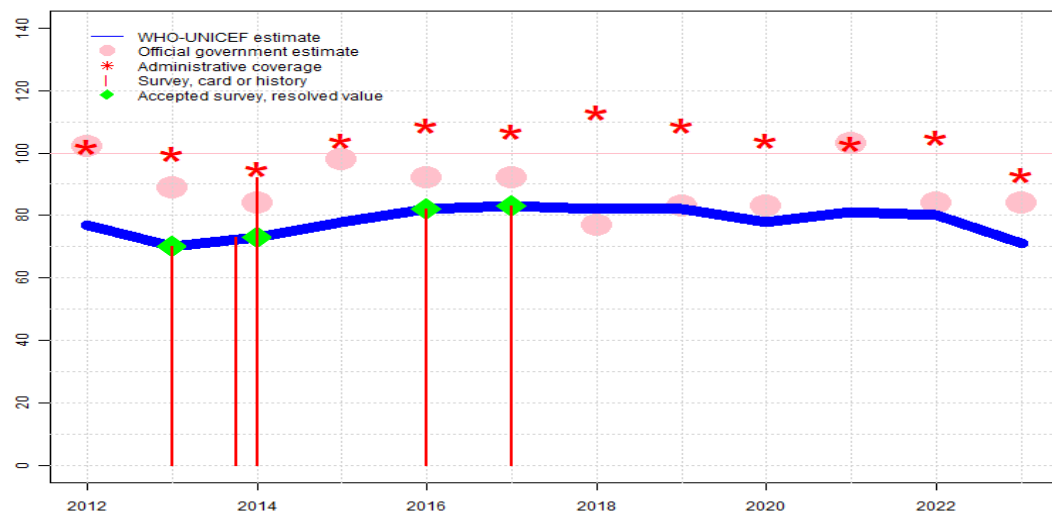
YFV: percentage of surviving infants who received one dose of yellow fever vaccine in countries where YFV is part of the national immunization schedule for children or is recommended in at risk areas; coverage estimates are annualized for the entire cohort of surviving infants.

MengA: percentage of children who received one dose of meningococcal A conjugate vaccine. MengA coverage estimates produced for countries in the meningitis belt of sub-Saharan Africa.

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Mali - BCG

MLI - BCG



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	77	70	73	78	82	83	82	82	78	81	80	71
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	102	89	84	98	92	92	77	83	83	103	84	84
Administrative	102	100	95	104	109	107	113	109	104	103	105	93
Survey	NA	70	*	NA	82	83	NA	NA	NA	NA	NA	NA

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

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

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

Description:

- 2023: Estimate exceptionally based on the difference between estimated and reported administrative coverage for 2022 applied to reported administrative coverage for 2023. Programme reported three months vaccine stockout at the national and subnational levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2017 levels. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Programme reports a vaccine stockout at subnational level. Estimate of 80 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2017 levels. Reported data excluded because 103 percent greater than 100 percent. Reported data excluded due to an increase from 83 percent to 103 percent with decrease 84 percent. Estimate of 81 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Programme reports a national and subnational level vaccine stockout of less than a month. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate of 82 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate of 82 percent changed from previous revision value of 83 percent. Estimate challenged by: D-R-
- 2017: Estimate of 83 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2016: Estimate of 82 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-
- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey

Mali - BCG

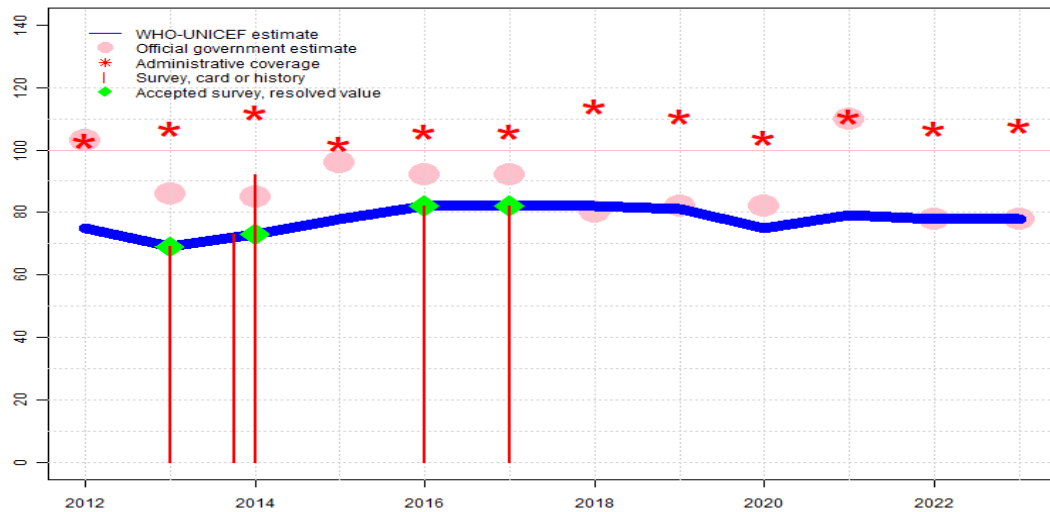
evidence of 73 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsistent with MICS for the same cohort and previous surveys. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 70 percent based on 1 survey(s). Estimate challenged by: D-R-S-

2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Reported data excluded because 102 percent greater than 100 percent. Estimate challenged by: D-R-

Mali - DTP1

MLI - DTP1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	75	69	73	78	82	82	82	81	75	79	78	78
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	103	86	85	96	92	92	80	82	82	110	78	78
Administrative	103	107	112	102	106	106	114	111	104	111	107	108
Survey	NA	69	*	NA	82	82	NA	NA	NA	NA	NA	NA

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

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

Description:

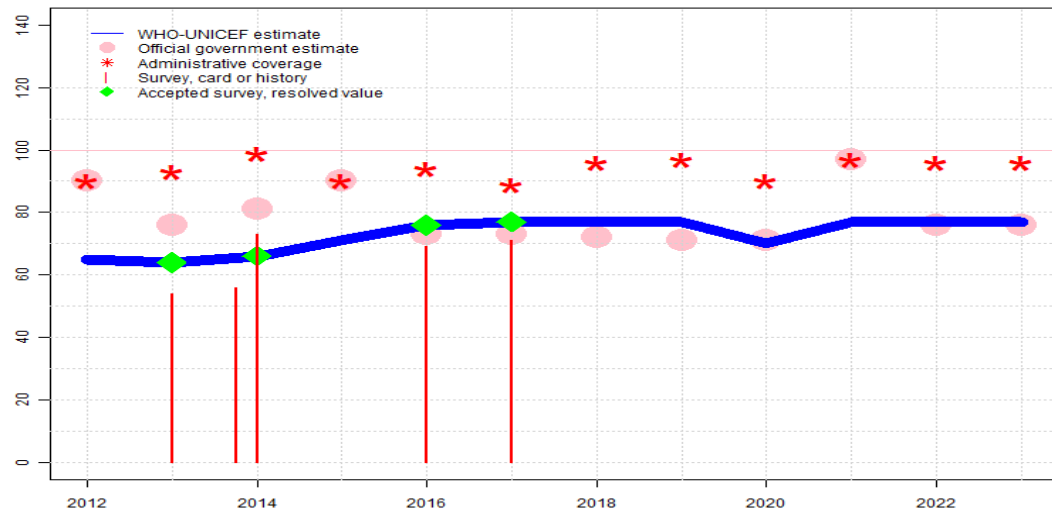
- 2023: Estimate informed by reported data. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-
- 2022: Estimate informed by reported data. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate of 78 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2021: Estimate informed by interpolation between reported data. Reported data excluded because 110 percent greater than 100 percent. Reported data excluded due to an increase from 82 percent to 110 percent with decrease 78 percent. Estimate of 79 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Estimate informed by interpolation between reported data. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate of 81 percent changed from previous revision value of 82 percent. Estimate challenged by: D-
- 2018: Estimate informed by interpolation between reported data. Reported data excluded. . Estimate challenged by: D-
- 2017: Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-
- 2016: Estimate of 82 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Programme reports one month vaccine stockout. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-
- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 73 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsistent with MICS for the same cohort and previous surveys. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

Mali - DTP1

- 2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 69 percent based on 1 survey(s). Estimate challenged by: D-R-S-
- 2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Reported data excluded because 103 percent greater than 100 percent. Estimate challenged by: D-R-

Mali - DTP3

MLI - DTP3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	65	64	66	71	76	77	77	77	70	77	77	77
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	90	76	81	90	73	73	72	71	71	97	76	76
Administrative	90	93	99	90	94	89	96	97	90	97	96	96
Survey	NA	54	*	NA	69	71	NA	NA	NA	NA	NA	NA

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

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

Description:

- 2023: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2017 levels. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 71 percent to 97 percent with decrease 76 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate challenged by: D-R-
- 2017: Estimate of 77 percent assigned by working group. Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 71 percent modified for recall bias to 77 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 54 percent and 3rd dose card only coverage of 51 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-
- 2016: Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 69 percent modified for recall bias to 76 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 43 percent and 3rd dose card only coverage of 40 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Programme reports one month vaccine stockout. Estimate challenged by: D-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-
- 2014: Estimate of 66 percent assigned by working group. Estimate based on survey results. Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsis-

Mali - DTP3

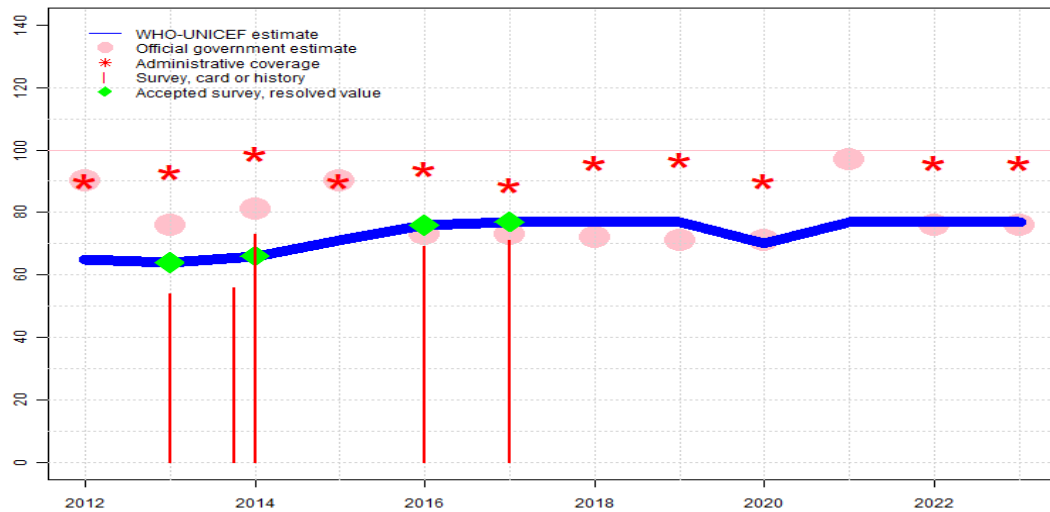
tent with MICS for the same cohort and previous surveys. Mali Multiple Indicator Cluster Survey 2015 card or history results of 56 percent modified for recall bias to 66 percent based on 1st dose card or history coverage of 73 percent, 1st dose card only coverage of 41 percent and 3rd dose card only coverage of 37 percent. Programme Elargi de Vaccination Revue Externe 2016 card or history results of 73 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 36 percent and 3rd dose card only coverage of 45 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 64 percent based on 1 survey(s). Mali Multiple Indicator Cluster Survey 2015 card or history results of 54 percent modified for recall bias to 64 percent based on 1st dose card or history coverage of 69 percent, 1st dose card only coverage of 29 percent and 3rd dose card only coverage of 27 percent. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Estimate challenged by: D-R-

Mali - HepB3

MLI - HepB3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	65	64	66	71	76	77	77	77	70	77	77	77
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	90	76	81	90	73	73	72	71	71	97	76	76
Administrative	90	93	99	90	94	89	96	97	90	NA	96	96
Survey	NA	54	*	NA	69	71	NA	NA	NA	NA	NA	NA

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- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 71 percent to 97 percent with decrease 76 percent. Estimate challenged by: R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
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Mali - HepB3

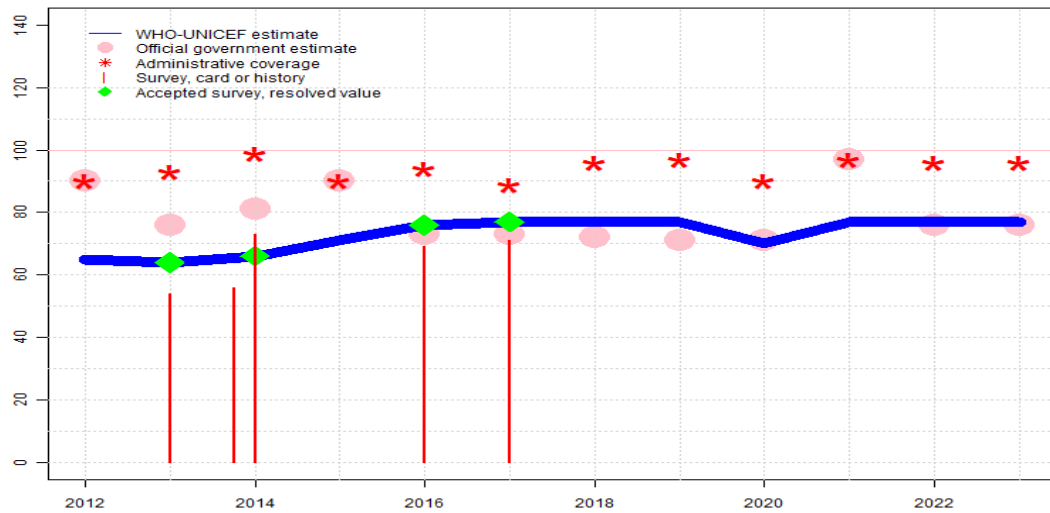
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2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Estimate challenged by: D-R-

Mali - Hib3

MLI - Hib3



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Administrative	90	93	99	90	94	89	96	97	90	97	96	96
Survey	NA	54	*	NA	69	71	NA	NA	NA	NA	NA	NA

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- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 71 percent to 97 percent with decrease 76 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate challenged by: D-R-
- 2017: Estimate of 77 percent assigned by working group. Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 71 percent modified for recall bias to 77 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 54 percent and 3rd dose card only coverage of 51 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-
- 2016: Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 69 percent modified for recall bias to 76 percent based on 1st dose card or history coverage of 82 percent, 1st dose card only coverage of 43 percent and 3rd dose card only coverage of 40 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Programme reports one month vaccine stockout. Estimate challenged by: D-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-
- 2014: Estimate of 66 percent assigned by working group. Estimate based on survey results. Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsis-

Mali - Hib3

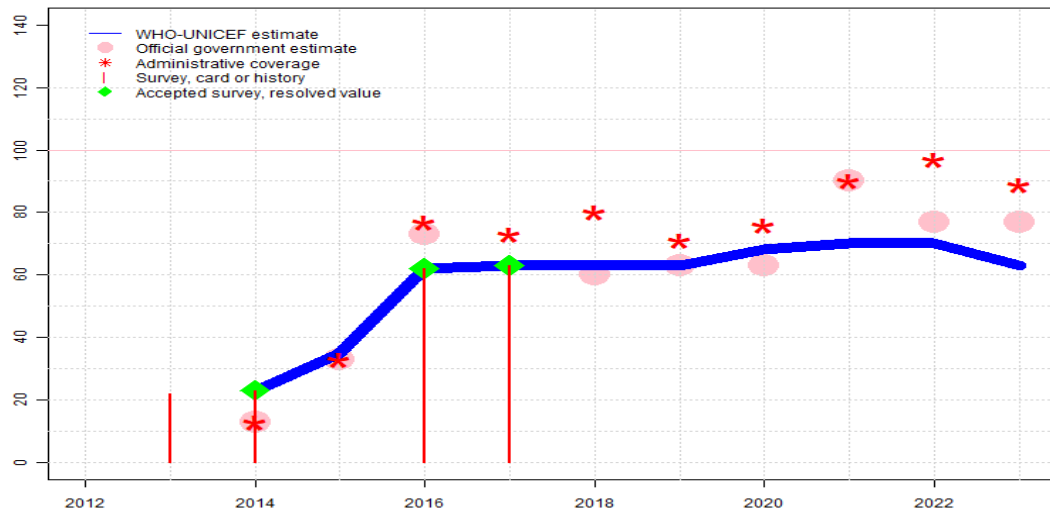
tent with MICS for the same cohort and previous surveys. Mali Multiple Indicator Cluster Survey 2015 card or history results of 56 percent modified for recall bias to 66 percent based on 1st dose card or history coverage of 73 percent, 1st dose card only coverage of 41 percent and 3rd dose card only coverage of 37 percent. Programme Elargi de Vaccination Revue Externe 2016 card or history results of 73 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 36 percent and 3rd dose card only coverage of 45 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 64 percent based on 1 survey(s). Mali Multiple Indicator Cluster Survey 2015 card or history results of 54 percent modified for recall bias to 64 percent based on 1st dose card or history coverage of 69 percent, 1st dose card only coverage of 29 percent and 3rd dose card only coverage of 27 percent. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Estimate challenged by: D-R-

Mali - RotaC

MLI - RotaC



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	23	35	62	63	63	63	68	70	70	63
Estimate GoC	NA	NA	•	•	•	•	•	•	•	•	•	•
Official	NA	NA	13	33	73	NA	60	63	63	90	77	77
Administrative	NA	NA	13	33	77	73	80	71	76	90	97	89
Survey	NA	22	23	NA	62	63	NA	NA	NA	NA	NA	NA

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

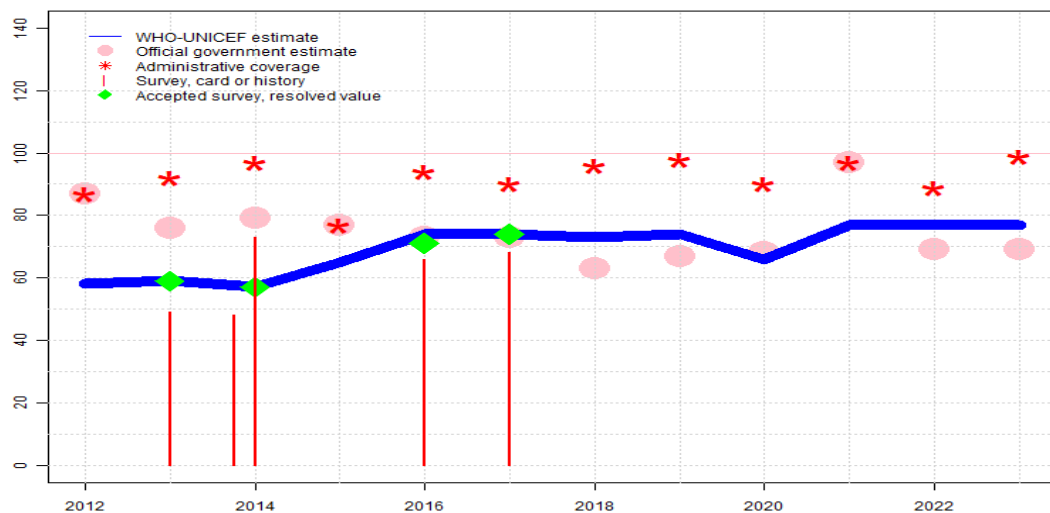
- Estimate is supported by reported data [R+], coverage recalculated with an independent denominator from the World Population Prospects: 2022 revision from the UN Population Division (D+), and at least one supporting survey within 2 years [S+]. While well supported, the estimate still carries a risk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

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

Description:

- 2023: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Programme reported three months vaccine stockout at the national and subnational levels. Estimate challenged by: D-R-
- 2022: Estimate informed by the difference in reported administrative coverage for DTP3 and RotaC applied to the estimated coverage level for DTP3. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-
- 2021: Estimate informed by the difference in reported administrative coverage for DTP3 and RotaC applied to the estimated coverage level for DTP3. Reported data excluded due to an increase from 63 percent to 90 percent with decrease 77 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: R-
- 2019: Estimate is based on survey result. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: R-
- 2018: Estimate is based on survey result. Reported data excluded. . Estimate challenged by: D-R-
- 2017: Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-
- 2016: Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-S-
- 2015: Estimate based on interpolation between estimate for 2014 and 2017. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.
- 2014: Estimate based on survey results. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Rotavirus vaccine was introduced during 2014. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

MLI - PcV3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	58	59	57	65	74	74	73	74	66	77	77	77
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	87	76	79	77	73	73	63	67	68	97	69	69
Administrative	87	92	97	77	94	90	96	98	90	97	89	99
Survey	NA	49	*	NA	66	68	NA	NA	NA	NA	NA	NA

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

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

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

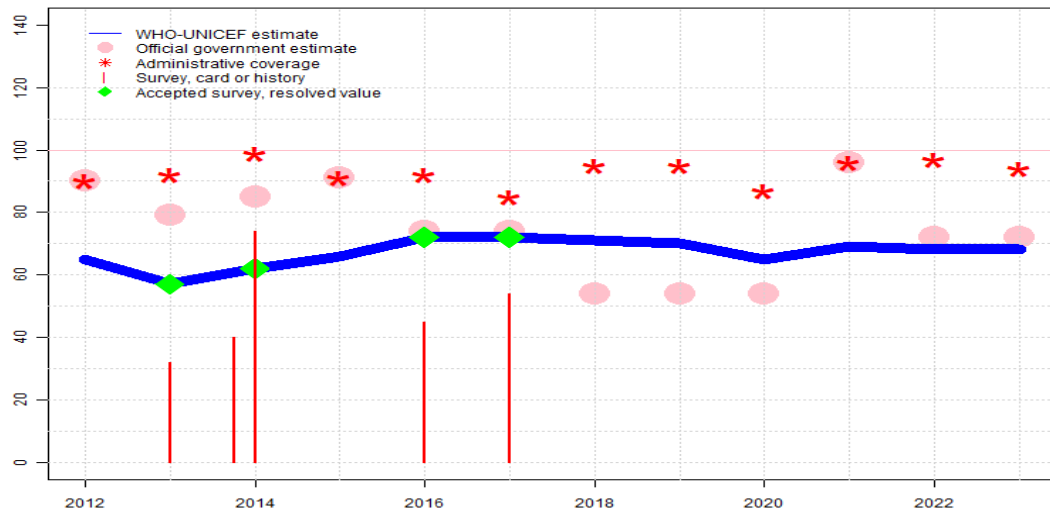
Description:

- 2023: Estimate informed by estimated DTP3 coverage. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Estimate informed by estimated coverage for DTP3. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-
- 2021: Estimate informed by estimated coverage for DTP3. Reported data excluded due to an increase from 68 percent to 97 percent with decrease 69 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Estimate is based on extrapolation from estimated coverage for 2017. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate of 73 percent changed from previous revision value of 74 percent. Estimate challenged by: D-R-
- 2017: Estimate of 74 percent assigned by working group. Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 68 percent modified for recall bias to 74 percent based on 1st dose card or history coverage of 80 percent, 1st dose card only coverage of 53 percent and 3rd dose card only coverage of 49 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-
- 2016: Estimate informed by interpolation between reported data supported by survey. Survey evidence of 71 percent based on 1 survey(s). Mali Enquête Démographique et de Santé 2018 card or history results of 66 percent modified for recall bias to 71 percent based on 1st dose card or history coverage of 79 percent, 1st dose card only coverage of 42 percent and 3rd dose card only coverage of 38 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate of 74 percent changed from previous revision value of 76 percent. Estimate challenged by: D-S-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate of 65 percent changed from previous revision value of 67 percent. Estimate challenged by: R-

- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 57 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsistent with MICS for the same cohort and previous surveys. Mali Multiple Indicator Cluster Survey 2015 card or history results of 48 percent modified for recall bias to 57 percent based on 1st dose card or history coverage of 65 percent, 1st dose card only coverage of 34 percent and 3rd dose card only coverage of 30 percent. Programme Elargi de Vaccination Revue Externe 2016 card or history results of 73 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 91 percent, 1st dose card only coverage of 36 percent and 3rd dose card only coverage of 45 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-S-
- 2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 59 percent based on 1 survey(s). Mali Multiple Indicator Cluster Survey 2015 card or history results of 49 percent modified for recall bias to 59 percent based on 1st dose card or history coverage of 64 percent, 1st dose card only coverage of 25 percent and 3rd dose card only coverage of 23 percent. Estimate challenged by: D-R-
- 2012: Reported data calibrated to 2011 and 2013 levels. Reported data excluded due to an increase from 56 percent to 87 percent with decrease 76 percent. Estimate challenged by: D-R-

Mali - Pol3

MLI - Pol3



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	65	57	62	66	72	72	71	70	65	69	68	68
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	90	79	85	91	74	74	54	54	54	96	72	72
Administrative	90	92	99	91	92	85	95	95	87	96	97	94
Survey	NA	32	*	NA	45	54	NA	NA	NA	NA	NA	NA

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

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

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

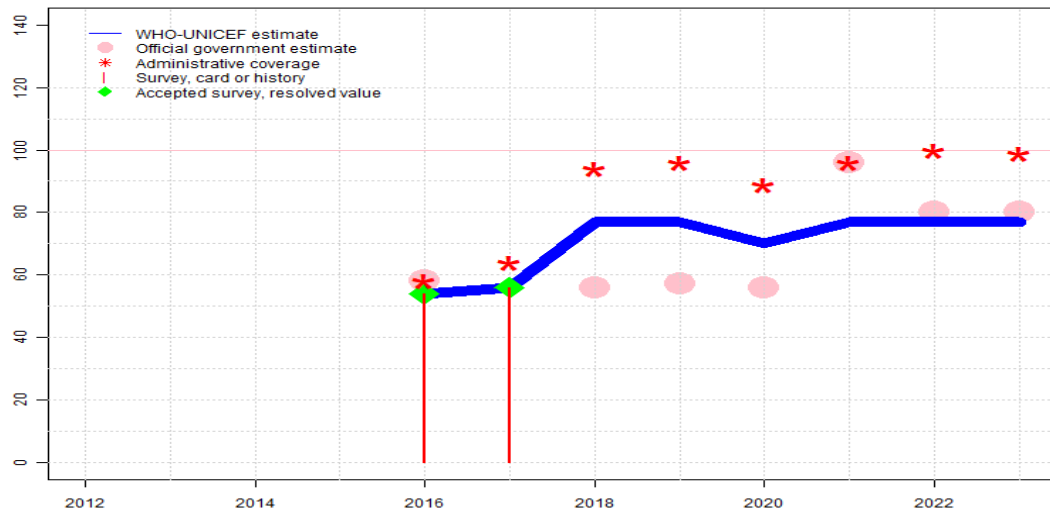
Description:

- 2023: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2017 levels. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate of 68 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 54 percent to 96 percent with decrease 72 percent. Estimate of 69 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate of 70 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate of 71 percent changed from previous revision value of 72 percent. Estimate challenged by: D-R-
- 2017: Estimate of 72 percent assigned by working group. Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 54 percent modified for recall bias to 72 percent based on 1st dose card or history coverage of 78 percent, 1st dose card only coverage of 54 percent and 3rd dose card only coverage of 50 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: R-
- 2016: Estimate of 72 percent assigned by working group. Estimate is based on survey result. Mali Enquête Démographique et de Santé 2018 card or history results of 45 percent modified for recall bias to 72 percent based on 1st dose card or history coverage of 77 percent, 1st dose card only coverage of 43 percent and 3rd dose card only coverage of 40 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate of 66 percent changed from previous revision value of 67 percent. Estimate challenged by: D-R-

- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 62 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsistent with MICS for the same cohort and previous surveys. Mali Multiple Indicator Cluster Survey 2015 card or history results of 40 percent modified for recall bias to 62 percent based on 1st dose card or history coverage of 69 percent, 1st dose card only coverage of 40 percent and 3rd dose card only coverage of 36 percent. Programme Elargi de Vaccination Revue Externe 2016 card or history results of 74 percent modified for recall bias to 99 percent based on 1st dose card or history coverage of 92 percent, 1st dose card only coverage of 36 percent and 3rd dose card only coverage of 45 percent. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-
- 2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 57 percent based on 1 survey(s). Mali Multiple Indicator Cluster Survey 2015 card or history results of 32 percent modified for recall bias to 57 percent based on 1st dose card or history coverage of 64 percent, 1st dose card only coverage of 29 percent and 3rd dose card only coverage of 26 percent. Estimate challenged by: D-R-S-
- 2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Estimate challenged by: D-R-

Mali - IPV1

MLI - IPV1



Description:

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

- 2023: Estimate informed by estimated DTP3 coverage. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Estimate informed by estimated DTP3 coverage. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate challenged by: D-R-
- 2021: Estimate informed by estimated DTP3 coverage. Reported data excluded due to an increase from 56 percent to 96 percent with decrease 80 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Estimate based on estimated DTP3 coverage. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: D-R-S-
- 2018: Estimate based on estimated DTP3 coverage. Reported data excluded. . Estimate challenged by: D-R-S-
- 2017: Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Programme reports stockout of IPV of unclear duration. Estimate challenged by: R-
- 2016: Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Inactivated polio vaccine (IPV) introduced prior to 2015. Reporting began during 2016. GoC=Assigned by working group. GoC assigned to maintain consistency across vaccines.

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	54	56	77	77	70	77	77	77
Estimate GoC	NA	NA	NA	NA	•	•	•	•	•	•	•	•
Official	NA	NA	NA	NA	58	NA	56	57	56	96	80	80
Administrative	NA	NA	NA	NA	58	64	94	96	89	96	100	99
Survey	NA	NA	NA	NA	54	56	NA	NA	NA	NA	NA	NA

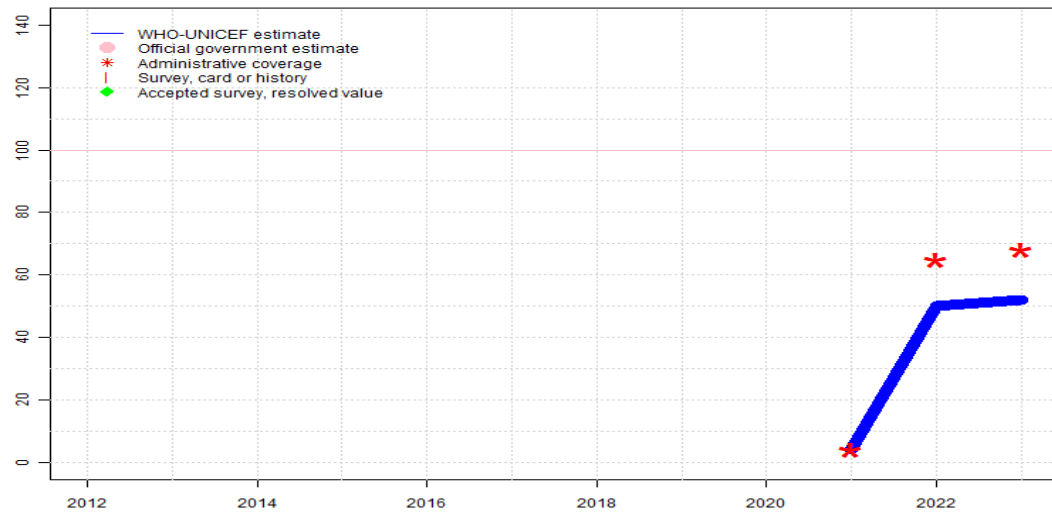
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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.

Mali - IPV2

MLI - IPV2



Description:

Estimates for a second dose of inactivated polio vaccine (IPV) begin in 2021 following a Strategic Advisory Group of Experts on Immunization (SAGE) recommendation in October 2020 that a second IPV dose increases protection against all polioviruses, including protection against paralysis caused by vaccine derived polio virus (type 2) (VDPV2). The addition of IPV2 is the next step towards complete OPV withdrawal. IPV2 coverage estimates produced for OPV using countries.

2023: Estimate informed by the relative relationship between estimated and reported coverage for IPV1 applied to reported coverage for IPV2. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-

2022: Estimate is based on relative relationship between estimated and reported coverage for IPV1 applied to reported coverage for IPV2. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate challenged by: D-R-

2021: Estimate informed by reported administrative data. Second dose of inactivated polio vaccine introduced during 2021. GoC=R+ D+

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	4	50	52
Estimate GoC	NA	NA	NA	NA	NA	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	4	65	68
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

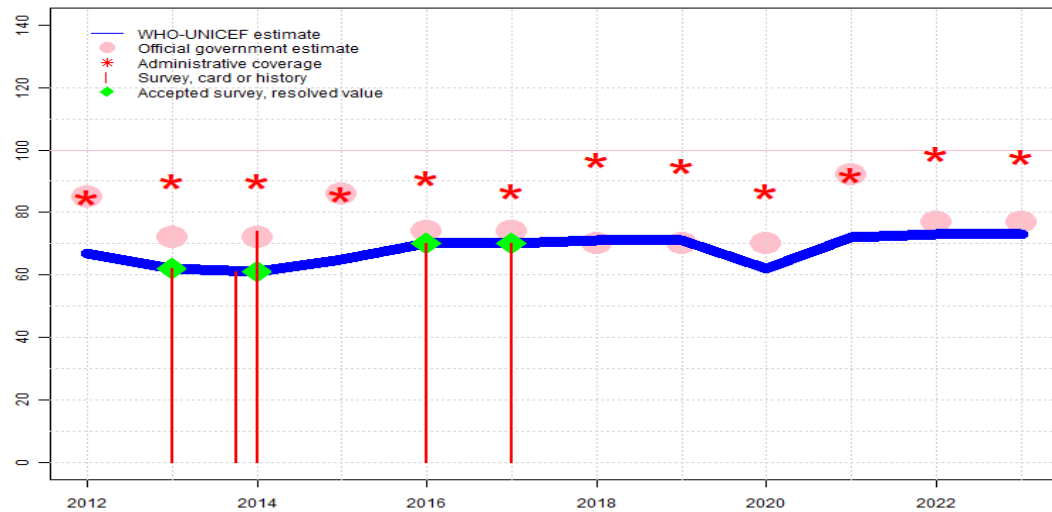
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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.

Mali - MCV1

MLI - MCV1



Description:

- 2023: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2017 levels. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Increase in the number of reported vaccine doses is not reflected in the estimated coverage. Estimate of 73 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 70 percent to 92 percent with decrease 77 percent. Estimate of 72 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate of 71 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate of 71 percent changed from previous revision value of 70 percent. Estimate challenged by: D-R-
- 2017: Estimate of 70 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2016: Estimate of 70 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Reported data excluded due to an increase from 72 percent to 86 percent with decrease 74 percent. Estimate of 65 percent changed from previous revision value of 66 percent. Estimate challenged by: D-R-
- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 61 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	67	62	61	65	70	70	71	71	62	72	73	73
Estimate GoC	•	•	•	•	•	•	•	•	•	•	•	•
Official	85	72	72	86	74	74	70	70	70	92	77	77
Administrative	85	90	90	86	91	87	97	95	87	92	99	98
Survey	NA	62	*	NA	70	70	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.

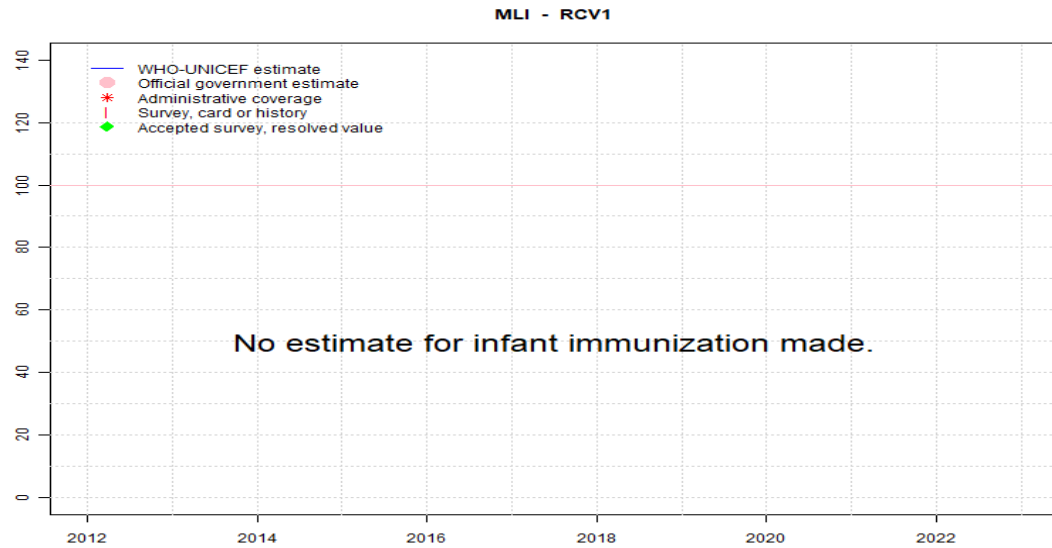
Mali - MCV1

series. Also, EPI survey results inconsistent with MICS for the same cohort and previous surveys. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

2013: Estimate of 62 percent assigned by working group. Estimate based on survey results. Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2011 and 2013 levels. Estimates based on survey results. Estimate challenged by: R-

Mali - RCV1



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	NA	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	NA	NA	NA	NA	NA	NA

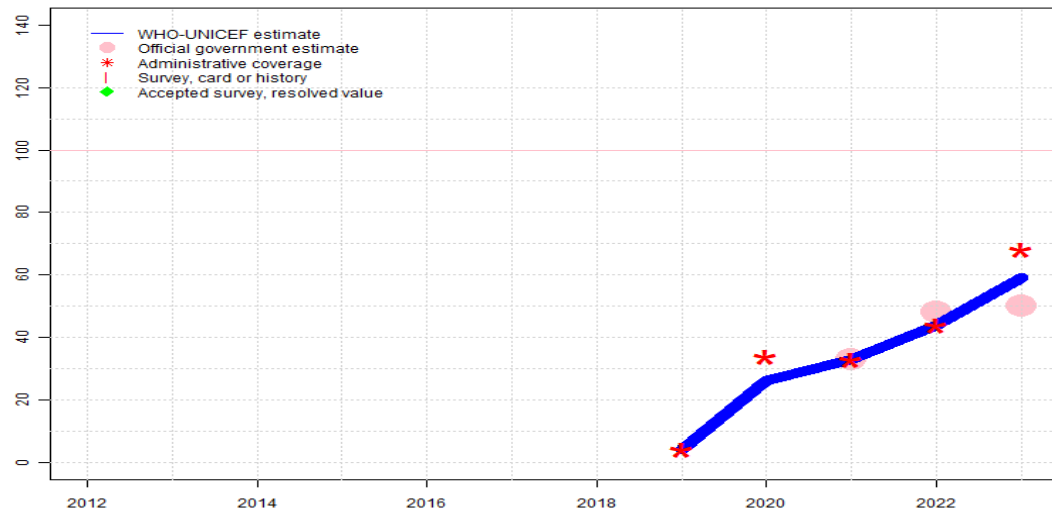
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability 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.

Mali - MCV2

MLI - MCV2



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	NA	NA	4	26	33	44	59
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	•	•	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	NA	NA	33	48	50
Administrative	NA	NA	NA	NA	NA	NA	NA	4	34	33	44	68
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.

2023: Estimate informed by the relative relationship between estimated coverage and reported number of MCV1 doses administered applied to reported number of MCV2 doses. Unexplained decline of 23 percent in the reported target population for MCV2 between 2022 and 2023. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: R-

2022: Estimate informed by reported administrative data. Vaccination coverage survey conducted in 2022 for two districts in the capital city.. Estimate is exceptionally based on the reported administrative coverage level following recent introduction. GoC=Assigned by working group. Consistency across antigens.

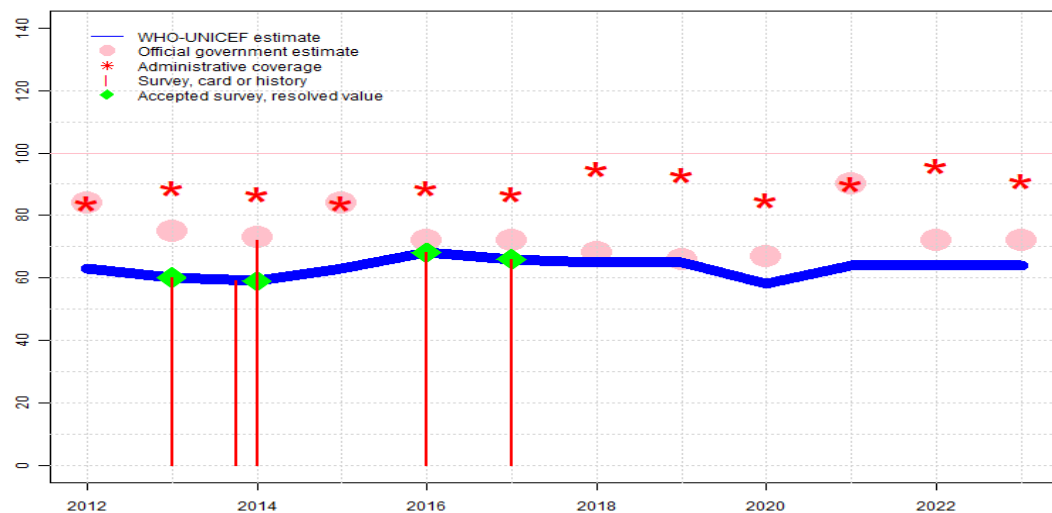
2021: Estimate informed by reported data. GoC=Assigned by working group. Consistency across antigens.

2020: Estimate exceptionally based on reported coverage. 34 percent reported for 75 of the target population of surviving infants. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: R-

2019: Estimate informed by reported administrative data. Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Second dose of measles containing vaccine introduced during December 2019. GoC=Assigned by working group. Consistency across vaccines.

Mali - YFV

MLI - YFV



	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	63	60	59	63	68	66	65	65	58	64	64	64
Estimate GoC	●	●	●	●	●	●	●	●	●	●	●	●
Official	84	75	73	84	72	72	68	66	67	90	72	72
Administrative	84	89	87	84	89	87	95	93	85	90	96	91
Survey	NA	60	*	NA	68	66	NA	NA	NA	NA	NA	NA

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

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

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

Description:

- 2023: Reported data calibrated to 2017 levels. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-
- 2022: Reported data calibrated to 2017 levels. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Estimate of 64 percent changed from previous revision value of 66 percent. Estimate challenged by: D-R-
- 2021: Reported data calibrated to 2017 levels. Reported data excluded due to an increase from 67 percent to 90 percent with decrease 72 percent. Estimate of 64 percent changed from previous revision value of 66 percent. Estimate challenged by: D-R-
- 2020: Estimate exceptionally based on the difference between administrative coverage 2019 to 2020 applied to the 2019 WUENIC estimate. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Estimate challenged by: D-R-
- 2019: Reported data calibrated to 2017 levels. Reported data excluded. . Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate of 65 percent changed from previous revision value of 66 percent. Estimate challenged by: D-R-
- 2018: Reported data calibrated to 2017 levels. Reported data excluded. . Estimate of 65 percent changed from previous revision value of 66 percent. Estimate challenged by: D-R-
- 2017: Estimate of 66 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2016: Estimate of 68 percent assigned by working group. Estimate is based on survey result. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. Estimate challenged by: D-R-
- 2015: Reported data calibrated to 2014 and 2016 levels. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Reported data excluded due to an increase from 73 percent to 84 percent with decrease 72 percent. Estimate of 63 percent changed from previous revision value of 64 percent. Estimate challenged by: D-R-
- 2014: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 59 percent based on 1 survey(s). Programme Elargi de Vaccination Revue Externe 2016 results ignored by working group. Coverage by card is higher than cards seen and other inconsistencies such as coverage with final doses higher than earlier doses in the series. Also, EPI survey results inconsistent with MICS for the same cohort and previous

Mali - YFV

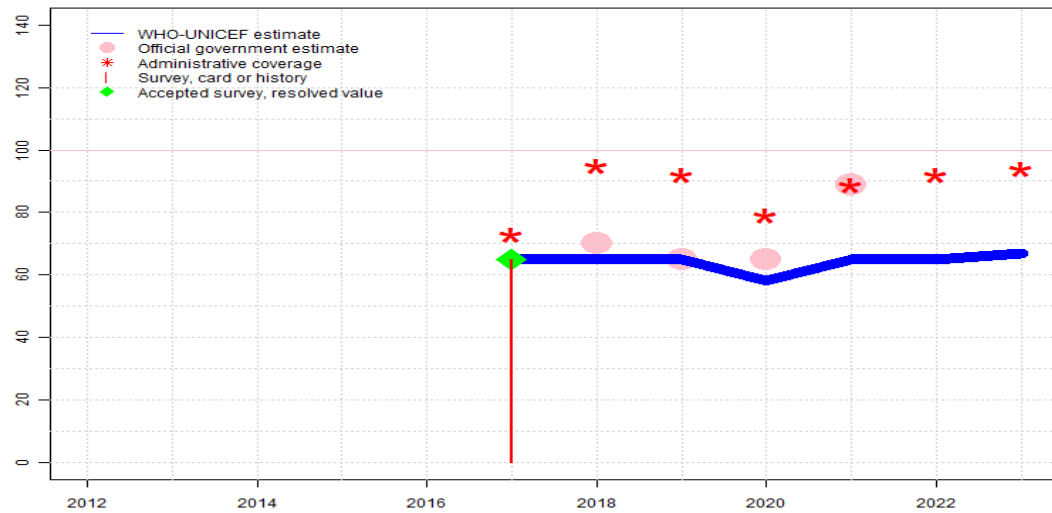
surveys. Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Estimate challenged by: D-R-

2013: Survey evidence does not support reported data. Estimate based on survey results. Survey evidence of 60 percent based on 1 survey(s). Estimate challenged by: D-R-

2012: Estimate informed by interpolation between 2009 and 2013 levels. Estimate based on interpolation between survey coverage. Estimate challenged by: D-R-

Mali - MengA

MLI - MengA



Description:

Estimates for one dose of meningococcal A conjugate (MengA) vaccine begin with the year that the vaccine was first delivered through routine immunization services and data were reported among countries in the meningitis belt of sub-Saharan Africa.

2023: Estimate informed by relative relationship between estimated and reported coverage for MCV1 applied to reported coverage for MenA. WHO and UNICEF are aware of a 2024 DHS and await final results. Estimate challenged by: D-R-

2022: Estimate is based on extrapolation from prior year estimate. Increase in reported number of doses administered from 2021 to 2022 is not reflected in estimated coverage. Vaccination coverage survey conducted in 2022 for two districts in the capital city. Programme reports a vaccine stockout at subnational level. Estimate challenged by: D-R-

2021: Estimate is informed by estimated coverage in 2019. Reported coverage suggests coverage has nearly returned to levels prior to 2020 disruptions. Estimate challenged by: D-R-

2020: Estimate is based on relative relationship between estimated and reported coverage for MCV1 applied to reported coverage for MenA given that the vaccines are recommended for administration at the same age. Reported data excluded. Programme reports disruptions in performance related to insecurity and reductions in attendance to vaccination sessions related to the COVID-19 pandemic, especially in urban areas. Also issues with incomplete reporting linked to problems with connectivity. Meningitis A vaccine introduced during 2020. Estimate challenged by: D-R-

2019: Estimate informed by reported data. Programme notes that official estimates are based on the results of the 2018 Demographic and Health Survey. Programme reports subnational vaccine stockouts for most antigens. Estimate challenged by: D-

2018: Estimate based on extrapolation from data reported by national government. Reported data excluded. Estimate challenged by: D-

2017: Estimate based on extrapolation from data reported by national government supported by survey. Survey evidence of 65 percent based on 1 survey(s). Reported data excluded. Programme reports data quality issues affecting both coverage denominator and numerator. Official estimates based on January-February 2016 vaccination coverage survey for 2014 cohort, which has internal inconsistencies in the results. GoC=R+ S+ D+

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Estimate	NA	NA	NA	NA	NA	65	65	65	58	65	65	67
Estimate GoC	NA	NA	NA	NA	NA	•••	•	•	•	•	•	•
Official	NA	NA	NA	NA	NA	NA	70	65	65	89	NA	NA
Administrative	NA	NA	NA	NA	NA	73	95	92	79	89	92	94
Survey	NA	NA	NA	NA	NA	65	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.

Mali - survey details

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0-11 months) will sample children aged 12-23 months at the time of survey to capture the youngest annual cohort of children who should have completed the vaccination schedule. Because WUENIC are for infant vaccinations, survey data in this report are presented to reflect the birth year of the youngest survey cohort. For example, results for a survey conducted during December 2020 among children aged 12-23 months at the time of the survey reflect the immunization experience of children born in 2019. Depending on the timing of survey field work, results may reflect the immunization experience of children born and vaccinated 1 or 2 years prior to the survey field work.

2017 Mali Enquête Démographique et de Santé 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	82.6	12-23 m	2048	56
BCG	Card	54.1	12-23 m	1139	56
BCG	Card or History	83.4	12-23 m	2048	56
BCG	History	29.3	12-23 m	909	56
DTP1	C or H <12 months	81.3	12-23 m	2048	56
DTP1	Card	54.1	12-23 m	1139	56
DTP1	Card or History	82.1	12-23 m	2048	56
DTP1	History	28	12-23 m	909	56
DTP3	C or H <12 months	68.8	12-23 m	2048	56
DTP3	Card	50.7	12-23 m	1139	56
DTP3	Card or History	70.7	12-23 m	2048	56
DTP3	History	20	12-23 m	909	56
HepB1	C or H <12 months	81.3	12-23 m	2048	56
HepB1	Card	54.1	12-23 m	1139	56
HepB1	Card or History	82.1	12-23 m	2048	56
HepB1	History	28	12-23 m	909	56
HepB3	C or H <12 months	68.8	12-23 m	2048	56
HepB3	Card	50.7	12-23 m	1139	56
HepB3	Card or History	70.7	12-23 m	2048	56
HepB3	History	20	12-23 m	909	56
Hib1	C or H <12 months	81.3	12-23 m	2048	56
Hib1	Card	54.1	12-23 m	1139	56
Hib1	Card or History	82.1	12-23 m	2048	56
Hib1	History	28	12-23 m	909	56
Hib3	C or H <12 months	68.8	12-23 m	2048	56
Hib3	Card	50.7	12-23 m	1139	56
Hib3	Card or History	70.7	12-23 m	2048	56
Hib3	History	20	12-23 m	909	56
IPV1	C or H <12 months	54.8	12-23 m	2048	56
IPV1	Card	28.4	12-23 m	1139	56
IPV1	Card or History	55.7	12-23 m	2048	56
IPV1	History	27.4	12-23 m	909	56
MCV1	C or H <12 months	64.4	12-23 m	2048	56
MCV1	Card	44.6	12-23 m	1139	56
MCV1	Card or History	69.8	12-23 m	2048	56
MCV1	History	25.2	12-23 m	909	56
MengA	C or H <12 months	59.8	12-23 m	2048	56
MengA	Card	41.2	12-23 m	1139	56
MengA	Card or History	64.9	12-23 m	2048	56
MengA	History	23.7	12-23 m	909	56
PcV1	C or H <12 months	79.4	12-23 m	2048	56
PcV1	Card	52.9	12-23 m	1139	56
PcV1	Card or History	80	12-23 m	2048	56
PcV1	History	27.1	12-23 m	909	56
PcV3	C or H <12 months	65.8	12-23 m	2048	56
PcV3	Card	48.9	12-23 m	1139	56
PcV3	Card or History	67.7	12-23 m	2048	56
PcV3	History	18.9	12-23 m	909	56
Pol1	C or H <12 months	77.8	12-23 m	2048	56
Pol1	Card	53.9	12-23 m	1139	56
Pol1	Card or History	78.5	12-23 m	2048	56
Pol1	History	24.6	12-23 m	909	56
Pol3	C or H <12 months	53.2	12-23 m	2048	56
Pol3	Card	50.1	12-23 m	1139	56
Pol3	Card or History	54.3	12-23 m	2048	56
Pol3	History	4.2	12-23 m	909	56
RotaC	C or H <12 months	61.5	12-23 m	2048	56
RotaC	Card	44.5	12-23 m	1139	56
RotaC	Card or History	63.1	12-23 m	2048	56
RotaC	History	18.6	12-23 m	909	56
YFV	C or H <12 months	60.4	12-23 m	2048	56
YFV	Card	43	12-23 m	1139	56
YFV	Card or History	66.5	12-23 m	2048	56
YFV	History	23.5	12-23 m	909	56

Mali - survey details

2016 Mali Enquête Démographique et de Santé 2018

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	81.5	24-35 m	1748	-
BCG	Card	42.6	24-35 m	778	-
BCG	Card or History	82.3	24-35 m	1748	-
BCG	History	39.7	24-35 m	970	-
DTP1	C or H <12 months	80.5	24-35 m	1748	-
DTP1	Card	43.1	24-35 m	778	-
DTP1	Card or History	81.6	24-35 m	1748	-
DTP1	History	38.4	24-35 m	970	-
DTP3	C or H <12 months	65	24-35 m	1748	-
DTP3	Card	39.5	24-35 m	778	-
DTP3	Card or History	68.9	24-35 m	1748	-
DTP3	History	29.4	24-35 m	970	-
HepB1	C or H <12 months	80.5	24-35 m	1748	-
HepB1	Card	43.1	24-35 m	778	-
HepB1	Card or History	81.6	24-35 m	1748	-
HepB1	History	38.4	24-35 m	970	-
HepB3	C or H <12 months	65	24-35 m	1748	-
HepB3	Card	39.5	24-35 m	778	-
HepB3	Card or History	68.9	24-35 m	1748	-
HepB3	History	29.4	24-35 m	970	-
Hib1	C or H <12 months	80.5	24-35 m	1748	-
Hib1	Card	43.1	24-35 m	778	-
Hib1	Card or History	81.6	24-35 m	1748	-
Hib1	History	38.4	24-35 m	970	-
Hib3	C or H <12 months	65	24-35 m	1748	-
Hib3	Card	39.5	24-35 m	778	-
Hib3	Card or History	68.9	24-35 m	1748	-
Hib3	History	29.4	24-35 m	970	-
IPV1	C or H <12 months	51.4	24-35 m	1748	-
IPV1	Card	16.2	24-35 m	778	-
IPV1	Card or History	54.3	24-35 m	1748	-
IPV1	History	38.1	24-35 m	970	-
MCV1	C or H <12 months	60.3	24-35 m	1748	-
MCV1	Card	34.9	24-35 m	778	-
MCV1	Card or History	69.8	24-35 m	1748	-

MCV1	History	34.9	24-35 m	970	-
PcV1	C or H <12 months	78.1	24-35 m	1748	-
PcV1	Card	42	24-35 m	778	-
PcV1	Card or History	79.4	24-35 m	1748	-
PcV1	History	37.4	24-35 m	970	-
PcV3	C or H <12 months	62.2	24-35 m	1748	-
PcV3	Card	37.9	24-35 m	778	-
PcV3	Card or History	65.5	24-35 m	1748	-
PcV3	History	27.7	24-35 m	970	-
Pol1	C or H <12 months	75.7	24-35 m	1748	-
Pol1	Card	42.9	24-35 m	778	-
Pol1	Card or History	76.7	24-35 m	1748	-
Pol1	History	33.8	24-35 m	970	-
Pol3	C or H <12 months	42.5	24-35 m	1748	-
Pol3	Card	39.6	24-35 m	778	-
Pol3	Card or History	45.2	24-35 m	1748	-
Pol3	History	5.6	24-35 m	970	-
RotaC	C or H <12 months	57.8	24-35 m	1748	-
RotaC	Card	34.8	24-35 m	778	-
RotaC	Card or History	61.8	24-35 m	1748	-
RotaC	History	27	24-35 m	970	-
YFV	C or H <12 months	58	24-35 m	1748	-
YFV	Card	34.6	24-35 m	778	-
YFV	Card or History	67.8	24-35 m	1748	-
YFV	History	33.2	24-35 m	970	-

2014 Mali Multiple Indicator Cluster Survey 2015

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	71.9	12-23 m	3303	44
BCG	Card	39.9	12-23 m	3303	44
BCG	Card or History	72.6	12-23 m	3303	44
BCG	History	32.7	12-23 m	3303	44
DTP1	C or H <12 months	71.8	12-23 m	3303	44
DTP1	Card	40.7	12-23 m	3303	44
DTP1	Card or History	72.6	12-23 m	3303	44
DTP1	History	31.9	12-23 m	3303	44
DTP3	C or H <12 months	54.5	12-23 m	3303	44
DTP3	Card	37.2	12-23 m	3303	44

Mali - survey details

DTP3	Card or History	55.5	12-23 m	3303	44
DTP3	History	18.4	12-23 m	3303	44
HepB1	C or H <12 months	71.8	12-23 m	3303	44
HepB1	Card	40.7	12-23 m	3303	44
HepB1	Card or History	72.6	12-23 m	3303	44
HepB1	History	31.9	12-23 m	3303	44
HepB3	C or H <12 months	54.5	12-23 m	3303	44
HepB3	Card	37.2	12-23 m	3303	44
HepB3	Card or History	55.5	12-23 m	3303	44
HepB3	History	18.4	12-23 m	3303	44
Hib1	C or H <12 months	71.8	12-23 m	3303	44
Hib1	Card	40.7	12-23 m	3303	44
Hib1	Card or History	72.6	12-23 m	3303	44
Hib1	History	31.9	12-23 m	3303	44
Hib3	C or H <12 months	54.5	12-23 m	3303	44
Hib3	Card	37.2	12-23 m	3303	44
Hib3	Card or History	55.5	12-23 m	3303	44
Hib3	History	18.4	12-23 m	3303	44
MCV1	C or H <12 months	56.9	12-23 m	3303	44
MCV1	Card	32.5	12-23 m	3303	44
MCV1	Card or History	60.8	12-23 m	3303	44
MCV1	History	28.4	12-23 m	3303	44
PcV1	C or H <12 months	63.9	12-23 m	3303	44
PcV1	Card	34.5	12-23 m	3303	44
PcV1	Card or History	64.9	12-23 m	3303	44
PcV1	History	30.4	12-23 m	3303	44
PcV3	C or H <12 months	47.1	12-23 m	3303	44
PcV3	Card	30.1	12-23 m	3303	44
PcV3	Card or History	47.8	12-23 m	3303	44
PcV3	History	17.7	12-23 m	3303	44
Pol1	C or H <12 months	68.3	12-23 m	3303	44
Pol1	Card	40.3	12-23 m	3303	44
Pol1	Card or History	68.9	12-23 m	3303	44
Pol1	History	28.6	12-23 m	3303	44
Pol3	C or H <12 months	39.2	12-23 m	3303	44
Pol3	Card	36.2	12-23 m	3303	44
Pol3	Card or History	40	12-23 m	3303	44
Pol3	History	3.8	12-23 m	3303	44
RotaC	C or H <12 months	22.6	12-23 m	3303	44
RotaC	Card	12.8	12-23 m	3303	44

RotaC	Card or History	23.4	12-23 m	3303	44
RotaC	History	10.6	12-23 m	3303	44
YFV	C or H <12 months	55.1	12-23 m	3303	44
YFV	Card	31.3	12-23 m	3303	44
YFV	Card or History	58.8	12-23 m	3303	44
YFV	History	27.5	12-23 m	3303	44

2014 Programme Elargi de Vaccination Revue Externe 2016

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	35.6	12-23 m	9402	34
BCG	Card or History	92	12-23 m	9402	34
DTP1	Card	35.7	12-23 m	9402	34
DTP1	Card or History	91.8	12-23 m	9402	34
DTP3	Card	45	12-23 m	9402	34
DTP3	Card or History	73	12-23 m	9402	34
HepB1	Card	35.7	12-23 m	9402	34
HepB1	Card or History	91.8	12-23 m	9402	34
HepB3	Card	45	12-23 m	9402	34
HepB3	Card or History	73	12-23 m	9402	34
Hib1	Card	35.7	12-23 m	9402	34
Hib1	Card or History	91.8	12-23 m	9402	34
Hib3	Card	45	12-23 m	9402	34
Hib3	Card or History	73	12-23 m	9402	34
MCV1	Card	44.3	12-23 m	9402	34
MCV1	Card or History	74	12-23 m	9402	34
PcV1	Card	35.9	12-23 m	9402	34
PcV1	Card or History	91.4	12-23 m	9402	34
PcV3	Card	45	12-23 m	9402	34
PcV3	Card or History	72.9	12-23 m	9402	34
Pol1	Card	35.5	12-23 m	9402	34
Pol1	Card or History	92.3	12-23 m	9402	34
Pol3	Card	44.5	12-23 m	9402	34
Pol3	Card or History	73.7	12-23 m	9402	34
YFV	Card	45.6	12-23 m	9402	34
YFV	Card or History	71.9	12-23 m	9402	34

2013 Mali Multiple Indicator Cluster Survey 2015

Mali - survey details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	68.6	24-35 m	3069	-
BCG	Card	28.8	24-35 m	3069	-
BCG	Card or History	70.1	24-35 m	3069	-
BCG	History	41.3	24-35 m	3069	-
DTP1	C or H <12 months	67	24-35 m	3069	-
DTP1	Card	29.3	24-35 m	3069	-
DTP1	Card or History	68.9	24-35 m	3069	-
DTP1	History	39.6	24-35 m	3069	-
DTP3	C or H <12 months	50.3	24-35 m	3069	-
DTP3	Card	27.3	24-35 m	3069	-
DTP3	Card or History	53.5	24-35 m	3069	-
DTP3	History	26.3	24-35 m	3069	-
HepB1	C or H <12 months	67	24-35 m	3069	-
HepB1	Card	29.3	24-35 m	3069	-
HepB1	Card or History	68.9	24-35 m	3069	-
HepB1	History	39.6	24-35 m	3069	-
HepB3	C or H <12 months	50.3	24-35 m	3069	-
HepB3	Card	27.3	24-35 m	3069	-
HepB3	Card or History	53.5	24-35 m	3069	-
HepB3	History	26.3	24-35 m	3069	-
Hib1	C or H <12 months	67	24-35 m	3069	-
Hib1	Card	29.3	24-35 m	3069	-
Hib1	Card or History	68.9	24-35 m	3069	-
Hib1	History	39.6	24-35 m	3069	-
Hib3	C or H <12 months	50.3	24-35 m	3069	-
Hib3	Card	27.3	24-35 m	3069	-
Hib3	Card or History	53.5	24-35 m	3069	-
Hib3	History	26.3	24-35 m	3069	-
MCV1	C or H <12 months	52.1	24-35 m	3069	-
MCV1	Card	24.6	24-35 m	3069	-
MCV1	Card or History	61.5	24-35 m	3069	-
MCV1	History	36.9	24-35 m	3069	-
PcV1	C or H <12 months	61.3	24-35 m	3069	-
PcV1	Card	25.4	24-35 m	3069	-
PcV1	Card or History	63.9	24-35 m	3069	-
PcV1	History	38.6	24-35 m	3069	-
PcV3	C or H <12 months	46	24-35 m	3069	-
PcV3	Card	23.3	24-35 m	3069	-
PcV3	Card or History	48.9	24-35 m	3069	-
PcV3	History	25.6	24-35 m	3069	-
Pol1	C or H <12 months	62.3	24-35 m	3069	-
Pol1	Card	28.8	24-35 m	3069	-
Pol1	Card or History	64.3	24-35 m	3069	-
Pol1	History	35.5	24-35 m	3069	-
Pol3	C or H <12 months	30.5	24-35 m	3069	-
Pol3	Card	26.4	24-35 m	3069	-
Pol3	Card or History	32.2	24-35 m	3069	-
Pol3	History	5.8	24-35 m	3069	-
RotaC	C or H <12 months	20.5	24-35 m	3069	-
RotaC	Card	8.2	24-35 m	3069	-
RotaC	Card or History	22.1	24-35 m	3069	-
RotaC	History	13.9	24-35 m	3069	-
YFV	C or H <12 months	52.1	24-35 m	3069	-
YFV	Card	24.5	24-35 m	3069	-
YFV	Card or History	60.3	24-35 m	3069	-
YFV	History	35.8	24-35 m	3069	-

2011 Mali Enquête Démographique et de Santé 2012-13

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	81.2	12-23 m	1846	38
BCG	Card	37	12-23 m	702	38
BCG	Card or History	83.6	12-23 m	1846	38
BCG	History	46.6	12-23 m	1145	38
DTP1	C or H <12 months	78.1	12-23 m	1846	38
DTP1	Card	34.9	12-23 m	702	38
DTP1	Card or History	80.3	12-23 m	1846	38
DTP1	History	45.4	12-23 m	1145	38
DTP3	C or H <12 months	57.1	12-23 m	1846	38
DTP3	Card	29.2	12-23 m	702	38
DTP3	Card or History	63.1	12-23 m	1846	38
DTP3	History	33.8	12-23 m	1145	38
HepB1	C or H <12 months	78.1	12-23 m	1846	38
HepB1	Card	34.9	12-23 m	702	38
HepB1	Card or History	80.3	12-23 m	1846	38
HepB1	History	45.4	12-23 m	1145	38
HepB3	C or H <12 months	57.1	12-23 m	1846	38

Mali - survey details

HepB3	Card	29.2	12-23 m	702	38
HepB3	Card or History	63.1	12-23 m	1846	38
HepB3	History	33.8	12-23 m	1145	38
Hib1	C or H <12 months	78.1	12-23 m	1846	38
Hib1	Card	34.9	12-23 m	702	38
Hib1	Card or History	80.3	12-23 m	1846	38
Hib1	History	45.4	12-23 m	1145	38
Hib3	C or H <12 months	57.1	12-23 m	1846	38
Hib3	Card	29.2	12-23 m	702	38
Hib3	Card or History	63.1	12-23 m	1846	38
Hib3	History	33.8	12-23 m	1145	38
MCV1	C or H <12 months	58.6	12-23 m	1846	38
MCV1	Card	29.8	12-23 m	702	38
MCV1	Card or History	71.7	12-23 m	1846	38
MCV1	History	42	12-23 m	1145	38
Pol1	C or H <12 months	81.6	12-23 m	1846	38
Pol1	Card	35	12-23 m	702	38
Pol1	Card or History	83.6	12-23 m	1846	38
Pol1	History	48.6	12-23 m	1145	38
Pol3	C or H <12 months	46.8	12-23 m	1846	38
Pol3	Card	29.7	12-23 m	702	38
Pol3	Card or History	50	12-23 m	1846	38
Pol3	History	20.4	12-23 m	1145	38
YFV	C or H <12 months	22.9	12-23 m	1846	38
YFV	Card	28.3	12-23 m	702	38
YFV	Card or History	28.3	12-23 m	1846	38
YFV	History	0	12-23 m	1145	38

2010 Mali Enquête Démographique et de Santé 2012-13

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	73.1	24-35 m	1798	-
DTP1	C or H <12 months	69.9	24-35 m	1798	-
DTP3	C or H <12 months	49.4	24-35 m	1798	-
HepB1	C or H <12 months	69.9	24-35 m	1798	-
HepB3	C or H <12 months	49.4	24-35 m	1798	-
Hib1	C or H <12 months	69.9	24-35 m	1798	-
Hib3	C or H <12 months	49.4	24-35 m	1798	-
MCV1	C or H <12 months	54.4	24-35 m	1798	-

Pol1	C or H <12 months	75.8	24-35 m	1798	-
Pol3	C or H <12 months	38.5	24-35 m	1798	-
YFV	C or H <12 months	14.5	24-35 m	1798	-

2009 Mali Enquête Démographique et de Santé 2012-13

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	71.1	36-47 m	2053	-
DTP1	C or H <12 months	70.1	36-47 m	2053	-
DTP3	C or H <12 months	52.5	36-47 m	2053	-
HepB1	C or H <12 months	70.1	36-47 m	2053	-
HepB3	C or H <12 months	52.5	36-47 m	2053	-
Hib1	C or H <12 months	70.1	36-47 m	2053	-
Hib3	C or H <12 months	52.5	36-47 m	2053	-
MCV1	C or H <12 months	52.9	36-47 m	2053	-
Pol1	C or H <12 months	74.3	36-47 m	2053	-
Pol3	C or H <12 months	39.1	36-47 m	2053	-
YFV	C or H <12 months	11.8	36-47 m	2053	-

2009 Mali Multiple Indicator Cluster Survey 2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	82.9	12-23 m	5122	59
BCG	Card	53.9	12-23 m	-	59
BCG	Card or History	83.6	12-23 m	5122	59
BCG	History	29.7	12-23 m	-	59
DTP1	C or H <12 months	81.1	12-23 m	5122	59
DTP1	Card	54.6	12-23 m	-	59
DTP1	Card or History	82.2	12-23 m	5122	59
DTP1	History	27.6	12-23 m	-	59
DTP3	C or H <12 months	69.4	12-23 m	5122	59
DTP3	Card	49.3	12-23 m	-	59
DTP3	Card or History	72.1	12-23 m	5122	59
DTP3	History	22.8	12-23 m	-	59
HepB1	C or H <12 months	45.9	12-23 m	5122	59
HepB1	Card	22.6	12-23 m	-	59
HepB1	Card or History	46.3	12-23 m	5122	59

Mali - survey details

HepB1	History	23.7	12-23 m	-	59	HepB3	History	28	12-23 m	11760	65
HepB3	C or H <12 months	25.8	12-23 m	5122	59	Hib1	Card	54	12-23 m	11760	65
HepB3	Card	22.9	12-23 m	-	59	Hib1	Card or History	85	12-23 m	11760	65
HepB3	Card or History	26.9	12-23 m	5122	59	Hib1	History	31	12-23 m	11760	65
HepB3	History	4	12-23 m	-	59	Hib3	Card	47	12-23 m	11760	65
MCV1	C or H <12 months	67.4	12-23 m	5122	59	Hib3	Card or History	75	12-23 m	11760	65
MCV1	Card	46.6	12-23 m	-	59	Hib3	History	28	12-23 m	11760	65
MCV1	Card or History	73	12-23 m	5122	59	MCV1	Card	46	12-23 m	11760	65
MCV1	History	26.4	12-23 m	-	59	MCV1	Card or History	71	12-23 m	11760	65
Pol1	C or H <12 months	83.7	12-23 m	5122	59	MCV1	History	26	12-23 m	11760	65
Pol1	Card	54.3	12-23 m	-	59	Pol1	Card	52	12-23 m	11760	65
Pol1	Card or History	84.9	12-23 m	5122	59	Pol1	Card or History	84	12-23 m	11760	65
Pol1	History	30.6	12-23 m	-	59	Pol1	History	33	12-23 m	11760	65
Pol3	C or H <12 months	59.9	12-23 m	5122	59	Pol3	Card	46	12-23 m	11760	65
Pol3	Card	49.1	12-23 m	-	59	Pol3	Card or History	76	12-23 m	11760	65
Pol3	Card or History	62.3	12-23 m	5122	59	Pol3	History	30	12-23 m	11760	65
Pol3	History	13.2	12-23 m	-	59	YFV	Card	43	12-23 m	11760	65
YFV	C or H <12 months	67	12-23 m	5122	59	YFV	Card or History	74	12-23 m	11760	65
YFV	Card	45.7	12-23 m	-	59	YFV	History	30	12-23 m	11760	65
YFV	Card or History	72.4	12-23 m	5122	59						
YFV	History	26.8	12-23 m	-	59						

2008 Mali Enquête Démographique et de Santé 2012-13

2008 Evaluation de la couverture vaccinale du PEV Mali, 2009-2010

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	54	12-23 m	11760	65
BCG	Card or History	86	12-23 m	11760	65
BCG	History	32	12-23 m	11760	65
DTP1	Card	54	12-23 m	11760	65
DTP1	Card or History	85	12-23 m	11760	65
DTP1	History	31	12-23 m	11760	65
DTP3	Card	47	12-23 m	11760	65
DTP3	Card or History	75	12-23 m	11760	65
DTP3	History	28	12-23 m	11760	65
HepB1	Card	54	12-23 m	11760	65
HepB1	Card or History	85	12-23 m	11760	65
HepB1	History	31	12-23 m	11760	65
HepB3	Card	47	12-23 m	11760	65
HepB3	Card or History	75	12-23 m	11760	65

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	66.9	48-59 m	1890	-
DTP1	C or H <12 months	64.4	48-59 m	1890	-
DTP3	C or H <12 months	46.6	48-59 m	1890	-
HepB1	C or H <12 months	64.4	48-59 m	1890	-
HepB3	C or H <12 months	46.6	48-59 m	1890	-
Hib1	C or H <12 months	64.4	48-59 m	1890	-
Hib3	C or H <12 months	46.6	48-59 m	1890	-
MCV1	C or H <12 months	48.4	48-59 m	1890	-
Pol1	C or H <12 months	68.2	48-59 m	1890	-
Pol3	C or H <12 months	35.9	48-59 m	1890	-
YFV	C or H <12 months	10.4	48-59 m	1890	-

2005 Enquête Démographique et de Santé du Mali, 2006

Mali - survey details

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	75.1	12-23 m	2626	61
BCG	Card	53.9	12-23 m	2626	61
BCG	Card or History	76.7	12-23 m	2626	61
BCG	History	22.8	12-23 m	2626	61
DTP1	C or H <12 months	80.2	12-23 m	2626	61
DTP1	Card	59.8	12-23 m	2626	61
DTP1	Card or History	83.1	12-23 m	2626	61
DTP1	History	23.3	12-23 m	2626	61
DTP3	C or H <12 months	61.9	12-23 m	2626	61
DTP3	Card	52.6	12-23 m	2626	61
DTP3	Card or History	67.6	12-23 m	2626	61
DTP3	History	15	12-23 m	2626	61
MCV1	C or H <12 months	59.1	12-23 m	2626	61
MCV1	Card	48.6	12-23 m	2626	61
MCV1	Card or History	68.4	12-23 m	2626	61
MCV1	History	19.8	12-23 m	2626	61
Pol1	C or H <12 months	82.1	12-23 m	2626	61
Pol1	Card	59.6	12-23 m	2626	61
Pol1	Card or History	85.1	12-23 m	2626	61
Pol1	History	25.5	12-23 m	2626	61
Pol3	C or H <12 months	56.6	12-23 m	2626	61
Pol3	Card	52.8	12-23 m	2626	61
Pol3	Card or History	61.9	12-23 m	2626	61
Pol3	History	9	12-23 m	2626	61

2005 République du Mali, Programme élargi du vaccination, Revue externe
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Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card or History	89	12-23 m	1710	78
DTP1	Card or History	91	12-23 m	1710	78
DTP3	Card or History	80	12-23 m	1710	78
HepB1	Card or History	87	12-23 m	1710	78
HepB3	Card or History	77	12-23 m	1710	78
MCV1	Card or History	77	12-23 m	1710	78
Pol1	Card or History	91	12-23 m	1710	78
Pol3	Card or History	81	12-23 m	1710	78
YFV	Card or History	76	12-23 m	1710	78

2000 Enquête Démographique et de Santé Mali 2001, 2002

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	63.7	12-23 m	2197	48
BCG	Card	47	12-23 m	2197	48
BCG	Card or History	69	12-23 m	2197	48
BCG	History	22	12-23 m	2197	48
DTP1	C or H <12 months	55.9	12-23 m	2197	48
DTP1	Card	43.6	12-23 m	2197	48
DTP1	Card or History	61	12-23 m	2197	48
DTP1	History	17.4	12-23 m	2197	48
DTP3	C or H <12 months	33.9	12-23 m	2197	48
DTP3	Card	31.3	12-23 m	2197	48
DTP3	Card or History	39.6	12-23 m	2197	48
DTP3	History	8.3	12-23 m	2197	48
MCV1	C or H <12 months	36.2	12-23 m	2197	48
MCV1	Card	35.7	12-23 m	2197	48
MCV1	Card or History	48.7	12-23 m	2197	48
MCV1	History	13	12-23 m	2197	48
Pol1	C or H <12 months	68	12-23 m	2197	48
Pol1	Card	46.2	12-23 m	2197	48
Pol1	Card or History	73.9	12-23 m	2197	48
Pol1	History	27.7	12-23 m	2197	48
Pol3	C or H <12 months	33.9	12-23 m	2197	48
Pol3	Card	32.9	12-23 m	2197	48
Pol3	Card or History	39.4	12-23 m	2197	48
Pol3	History	6.5	12-23 m	2197	48

1997 Enquete de couverture vaccinale au Mali 1998

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	62	12-23 m	1521	57
BCG	Card or History	84	12-23 m	1521	57
DTP1	Card	52	12-23 m	1521	57
DTP1	Card or History	79	12-23 m	1521	57
DTP3	Card	37	12-23 m	1521	57
DTP3	Card or History	52	12-23 m	1521	57

Mali - survey details

Further information and estimates for previous years are available at:

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

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