

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

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

*Burton et al. 2009. WHO and UNICEF estimates of national infant immunization coverage: methods and processes.

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

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

DATA SOURCES.

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

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

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

ABBREVIATIONS

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

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

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

IPV1: percentage of surviving infants who received at least one dose of inactivated polio vaccine. In countries utilizing an immunization schedule recommending either (i) a primary series of three doses of oral polio vaccine (OPV) plus at least one dose of IPV where OPV is included in routine

immunization and/or campaign or (ii) a sequential schedule of IPV followed by OPV, WHO and UNICEF estimates for IPV1 reflect coverage with at least one routine dose of IPV among infants <1 year of age among countries. For countries utilizing IPV containing vaccine use only, i.e., no recommended dose of OPV, the WHO and UNICEF estimate for IPV1 corresponds to coverage for the 1st dose of IPV.

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

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

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

RCV1: percentage of surviving infants who received the 1st dose of rubella containing vaccine. Coverage estimates are based on WHO and UNICEF estimates of coverage for the dose of measles containing vaccine that corresponds to the first measles-rubella combination vaccine. Nationally reported coverage of RCV is not taken into consideration nor are the data represented in the accompanying graph and data table.

HepBB: percentage of births which received a dose of hepatitis B vaccine within 24 hours of delivery. Estimates of hepatitis B birth dose coverage are produced only for countries with a universal birth dose policy. Estimates are not produced for countries that recommend a birth dose to infants born to HepB virus-infected mothers only or where there is insufficient information to determine whether vaccination is within 24 hours of birth.

HepB3: percentage of surviving infants who received the 3rd dose of hepatitis B containing vaccine following the birth dose.

Hib3: percentage of surviving infants who received the 3rd dose of Haemophilus influenzae type b containing vaccine.

RotaC: percentage of surviving infants who received the final recommended dose of rotavirus vaccine, which can be either the 2nd or the 3rd dose depending on the vaccine.

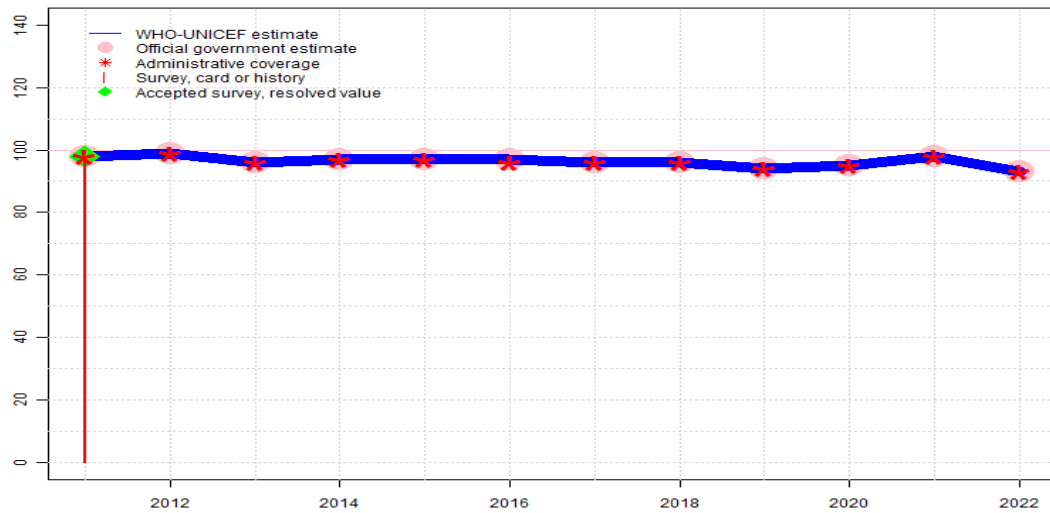
PcV3: percentage of surviving infants who received the 3rd dose of pneumococcal conjugate vaccine. In countries where the national schedule recommends two doses during infancy and a booster dose at 12 months or later based on the epidemiology of disease in the country, coverage estimates may reflect the percentage of surviving infants who received two doses of PcV prior to the 1st birthday.

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

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Republic of Moldova - BCG

MDA - BCG



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. Programme reports a 3-month vaccine stockout. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 98 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	98	99	96	97	97	97	96	96	94	95	98	93
Estimate GoC	•	•••	•••	••	••	••	••	••	••	••	•	•
Official	98	99	96	97	97	97	96	96	94	95	98	93
Administrative	98	99	96	97	97	96	96	96	94	95	98	93
Survey	98	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

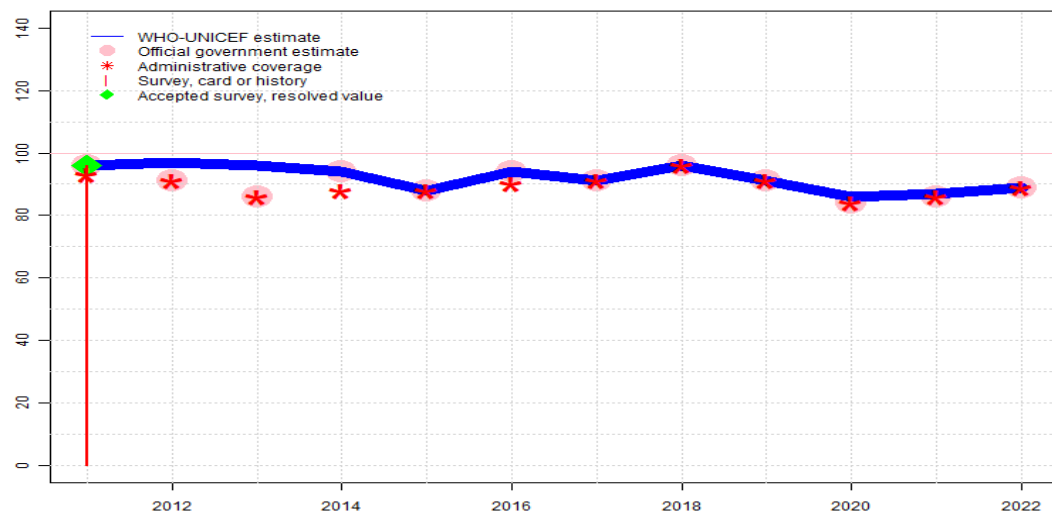
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - DTP1

MDA - DTP1



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate based on DTP3 estimate and no dropout. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-R-
- 2020: Estimate informed by estimated DTP3 and no dropout. A review of the number of doses administered suggests a decline from 2019 to 2020. Programme reports a vaccine stock-out of unknown duration at national and subnational levels. Estimate challenged by: R-
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-
- 2013: DTP1 coverage estimated based on DTP3 coverage of 90. Estimate challenged by: D-R-
- 2012: DTP1 coverage estimated based on DTP3 coverage of 92. Estimate challenged by: D-R-
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	97	96	94	88	94	91	96	91	86	87	89
Estimate GoC	•	•	•	•	••	••	••	••	••	•	•	•
Official	96	91	86	94	88	94	91	96	91	84	86	89
Administrative	93	91	86	88	88	90	91	96	91	84	86	89
Survey	96	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

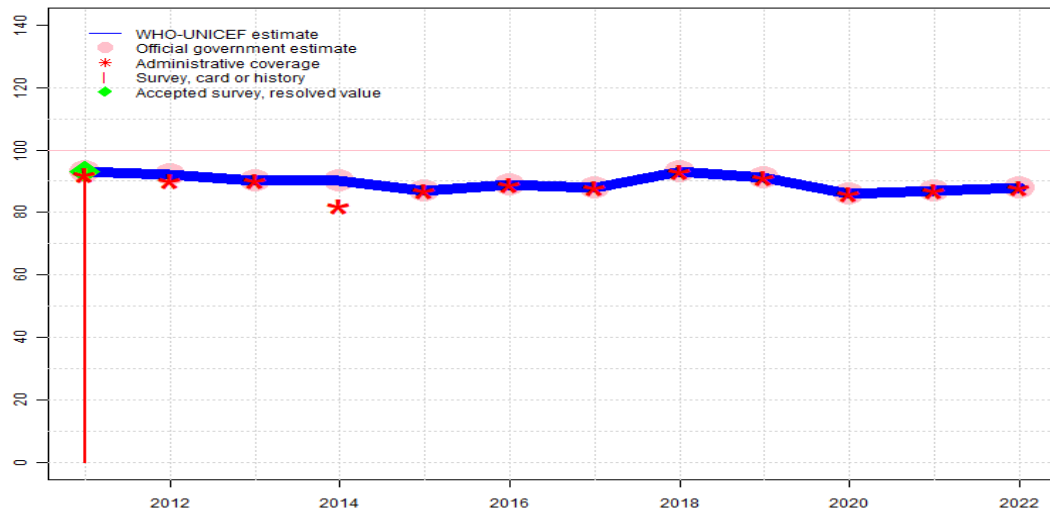
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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Republic of Moldova - DTP3

MDA - DTP3



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Programme reports a vaccine stockout of unknown duration at national and subnational levels. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	93	92	90	90	87	89	88	93	91	86	87	88
Estimate GoC	•	•••	•••	•	••	••	••	••	••	••	•	•
Official	93	92	90	90	87	89	88	93	91	86	87	88
Administrative	92	90	90	82	87	89	88	93	91	86	87	88
Survey	93	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

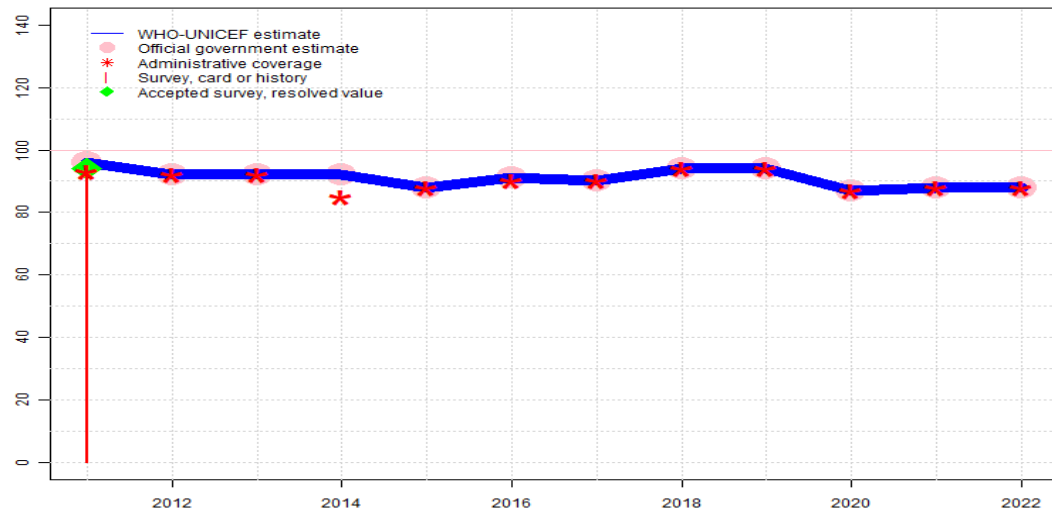
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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Republic of Moldova - Pol3

MDA - Pol3



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	92	92	92	88	91	90	94	94	87	88	88
Estimate GoC	•	•••	•••	•	••	••	••	••	••	••	•	•
Official	96	92	92	92	88	91	90	94	94	87	88	88
Administrative	93	92	92	85	88	90	90	94	94	87	88	88
Survey	94	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

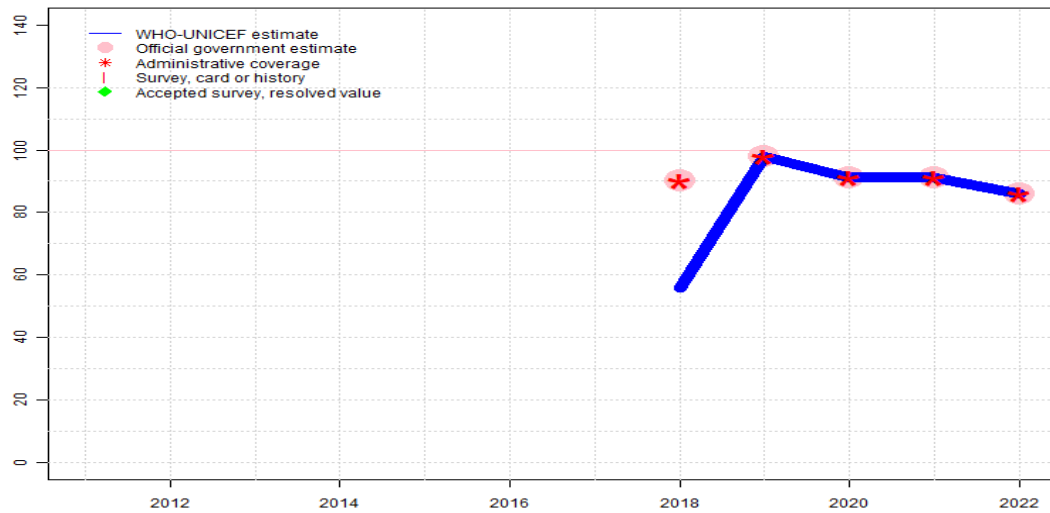
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - IPV1

MDA - 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).

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Reported coverage may include children up to two years of age during catch-up activities. Estimate challenged by: D-

2020: Estimate informed by reported data. Reported coverage may include children up to two years of age during catch-up activities. Estimate challenged by: D-

2019: Estimate is based on reported data following introduction. GoC=R+ D+

2018: Estimate of 56 percent assigned by working group. Inactivated polio vaccine introduced in March 2018. Programme achieved 90 percent coverage in 56 percent of the target population. Estimate based on the full national target population. Programme reports a three months vaccine stockout at national level. Estimate challenged by: R-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	NA	NA	NA	NA	NA	56	98	91	91	86
Estimate GoC	NA	NA	NA	NA	NA	NA	NA	•	••	•	•	•
Official	NA	NA	NA	NA	NA	NA	NA	90	98	91	91	86
Administrative	NA	NA	NA	NA	NA	NA	NA	90	98	91	91	86
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

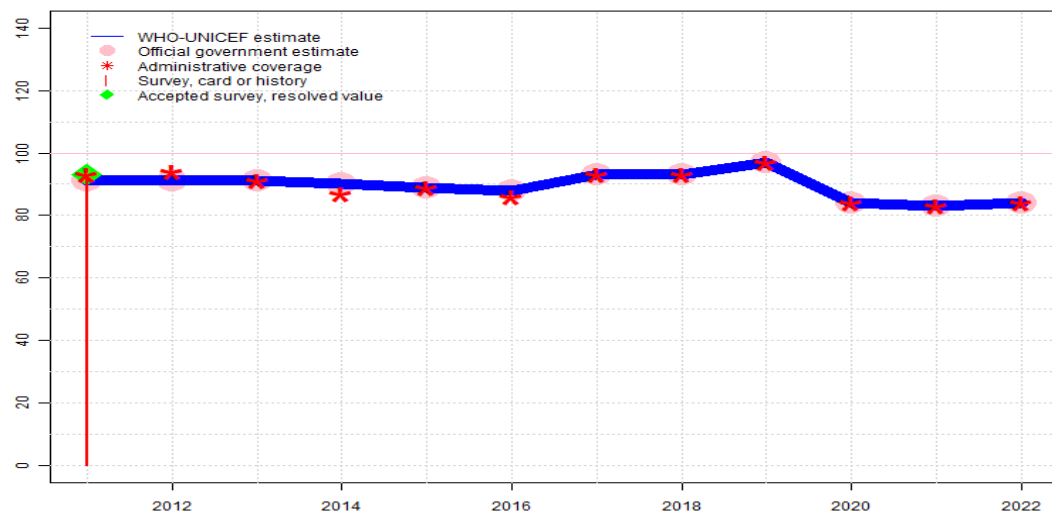
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - MCV1

MDA - MCV1



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Estimate based on reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 93 percent based on 1 survey(s). GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	91	91	91	90	89	88	93	93	97	84	83	84
Estimate GoC	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●	●●	●	●
Official	91	91	91	90	89	88	93	93	97	84	83	84
Administrative	93	94	91	87	89	86	93	93	97	84	83	84
Survey	93	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

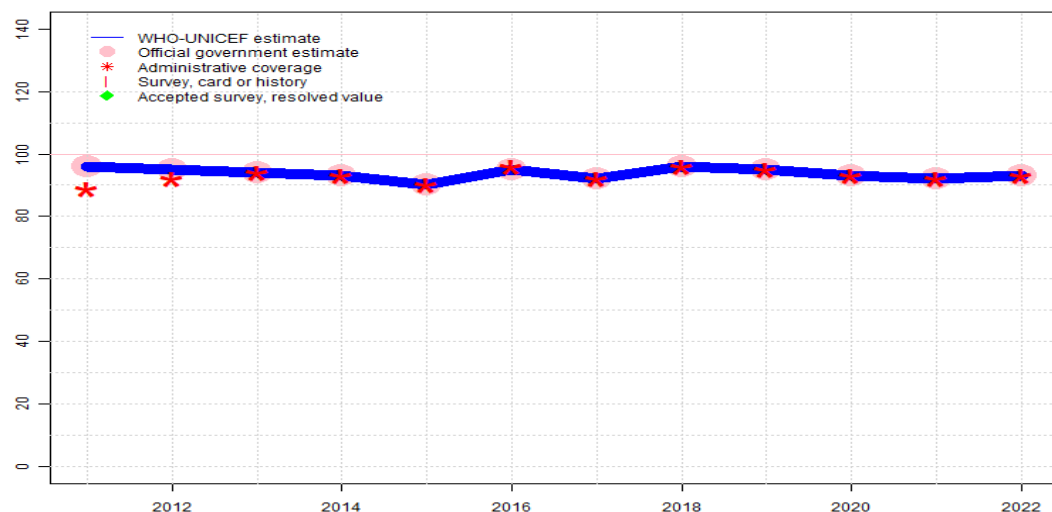
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

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Republic of Moldova - MCV2

MDA - MCV2



Description:

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

2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-

2020: Estimate informed by reported data. Estimate challenged by: D-

2019: Estimate informed by reported data. Estimate challenged by: D-

2018: Estimate informed by reported data. GoC=R+ D+

2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+

2016: Estimate informed by reported data. GoC=R+ D+

2015: Estimate informed by reported data. GoC=R+ D+

2014: Estimate informed by reported data. Estimate challenged by: D-

2013: Estimate informed by reported data. GoC=R+ D+

2012: Estimate informed by reported data. Estimate challenged by: D-

2011: Estimate informed by reported data. Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	95	94	93	90	95	92	96	95	93	92	93
Estimate GoC	•	•	••	•	••	••	••	••	•	•	•	•
Official	96	95	94	93	90	95	92	96	95	93	92	93
Administrative	89	92	94	93	90	96	92	96	95	93	92	93
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

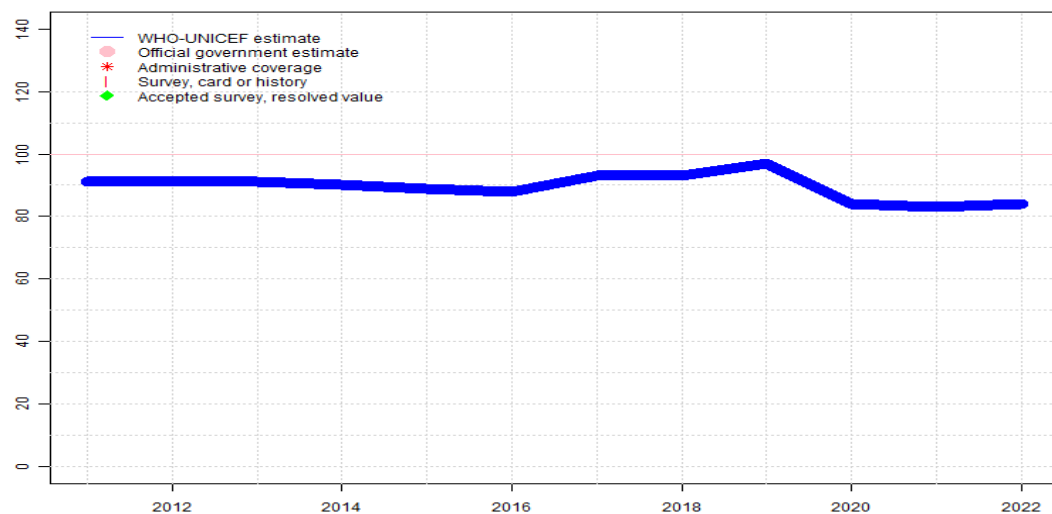
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - RCV1

MDA - RCV1



Description:

For this revision, coverage estimates for the first dose of rubella containing vaccine are based on WHO and UNICEF estimates of coverage of measles containing vaccine. Nationally reported coverage of rubella containing vaccine is not taken into consideration nor are they represented in the the accompanying graph and data table.

2022: Estimate based on estimated MCV1. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-

2021: Estimate based on estimated MCV1. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-

2020: Estimate based on estimated MCV1. GoC=R+ D+

2019: Estimate based on estimated MCV1. GoC=R+ D+

2018: Estimate based on estimated MCV1. GoC=R+ D+

2017: Estimate based on estimated MCV1. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+

2016: Estimate based on estimated MCV1. GoC=R+ D+

2015: Estimate based on estimated MCV1. GoC=R+ D+

2014: Estimate based on estimated MCV1. GoC=R+ D+

2013: Estimate based on estimated MCV1. GoC=R+ S+ D+

2012: Estimate based on estimated MCV1. GoC=R+ S+ D+

2011: Estimate based on estimated MCV1. GoC=R+ S+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	91	91	91	90	89	88	93	93	97	84	83	84
Estimate GoC	●●●	●●●	●●●	●●	●●	●●	●●	●●	●●	●●	●	●
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

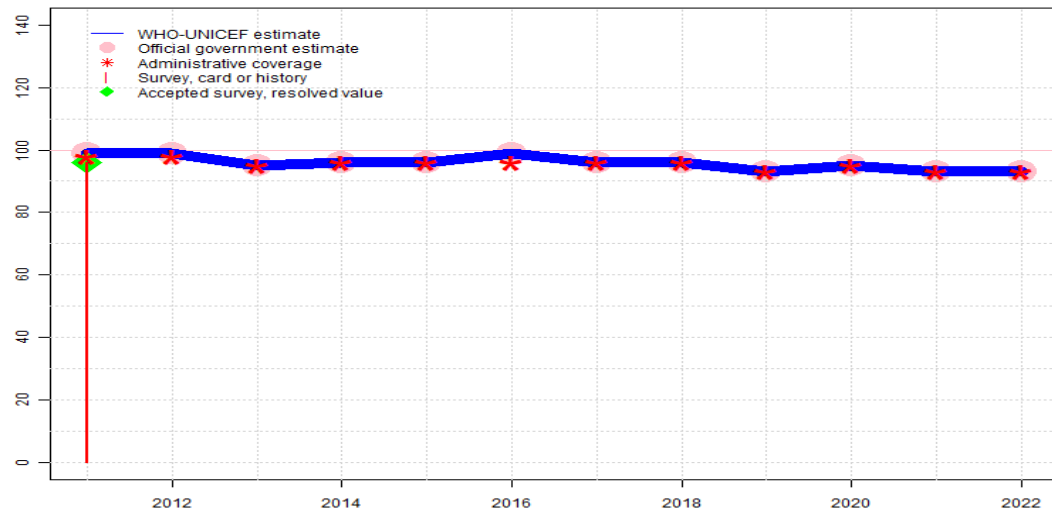
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - HepBB

MDA - HepBB



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. GoC=R+ D+
- 2013: Estimate informed by reported data. GoC=R+ S+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 96 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	99	99	95	96	96	99	96	96	93	95	93	93
Estimate GoC	•	•••	••	••	••	••	••	••	••	••	•	•
Official	99	99	95	96	96	99	96	96	93	95	93	93
Administrative	98	98	95	96	96	96	96	96	93	95	93	93
Survey	96	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

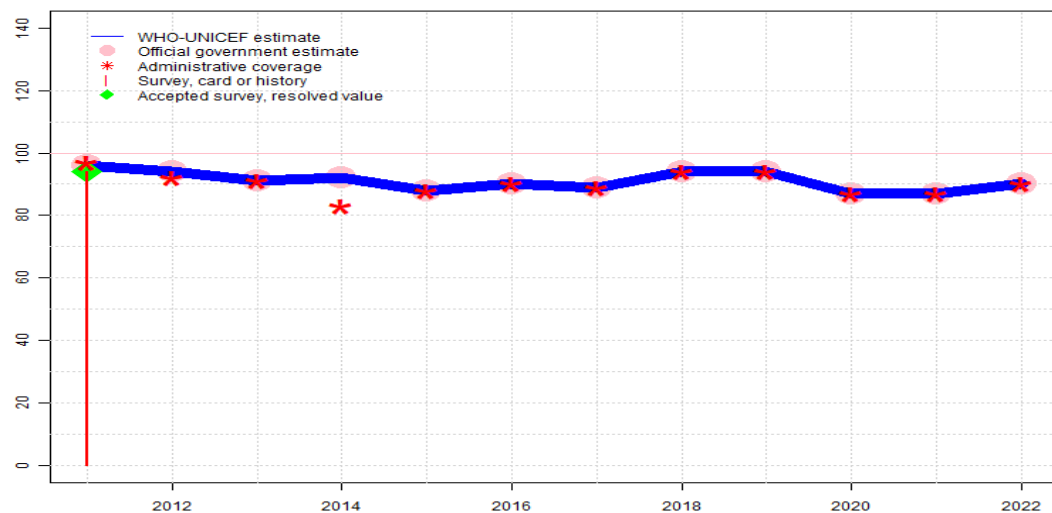
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - HepB3

MDA - HepB3



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Programme reports a vaccine stockout of unknown duration at national and subnational levels. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-
- 2013: Estimate informed by reported data. GoC=R+ S+ D+
- 2012: Estimate informed by reported data. GoC=R+ S+ D+
- 2011: Estimate informed by reported data supported by survey. Survey evidence of 94 percent based on 1 survey(s). Estimate challenged by: D-

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	96	94	91	92	88	90	89	94	94	87	87	90
Estimate GoC	•	•••	•••	•	••	••	••	••	••	••	•	•
Official	96	94	91	92	88	90	89	94	94	87	87	90
Administrative	97	92	91	83	88	90	89	94	94	87	87	90
Survey	94	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

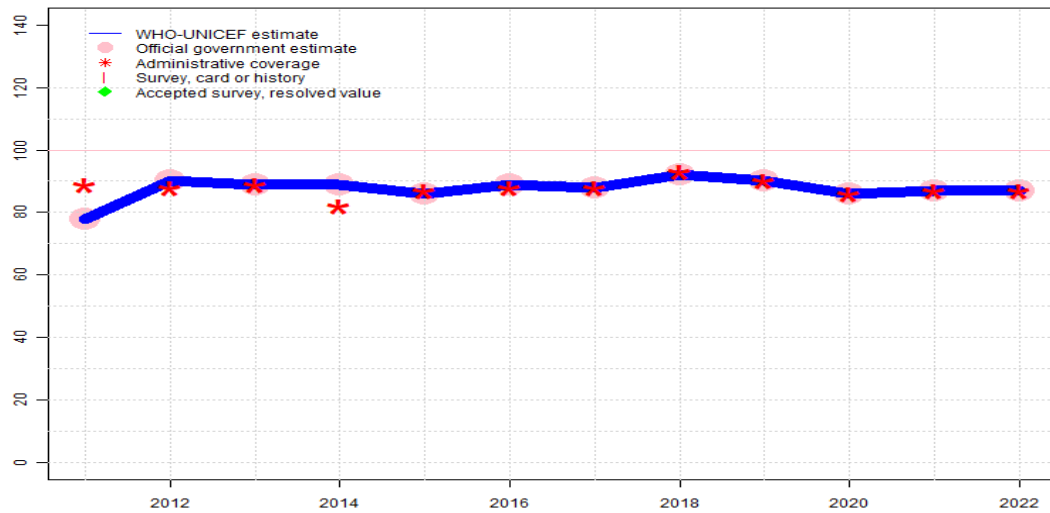
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - Hib3

MDA - Hib3



Description:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Estimate informed by reported data. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: D-
- 2020: Estimate informed by reported data. Programme reports a vaccine stockout of unknown duration at national and subnational levels. GoC=R+ D+
- 2019: Estimate informed by reported data. GoC=R+ D+
- 2018: Estimate informed by reported data. GoC=R+ D+
- 2017: Estimate informed by reported data. Since 2016, the reported target population has declined by 13 percent. GoC=R+ D+
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Estimate informed by reported data. GoC=R+ D+
- 2014: Estimate informed by reported data. Estimate challenged by: D-
- 2013: Estimate informed by reported data. GoC=R+ D+
- 2012: Estimate informed by reported data. GoC=R+ D+
- 2011: Estimate informed by reported data. GoC=R+ D+

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	78	90	89	89	86	89	88	92	90	86	87	87
Estimate GoC	●●	●●	●●	●	●●	●●	●●	●●	●●	●●	●	●
Official	78	90	89	89	86	89	88	92	90	86	87	87
Administrative	89	88	89	82	87	88	88	93	90	86	87	87
Survey	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

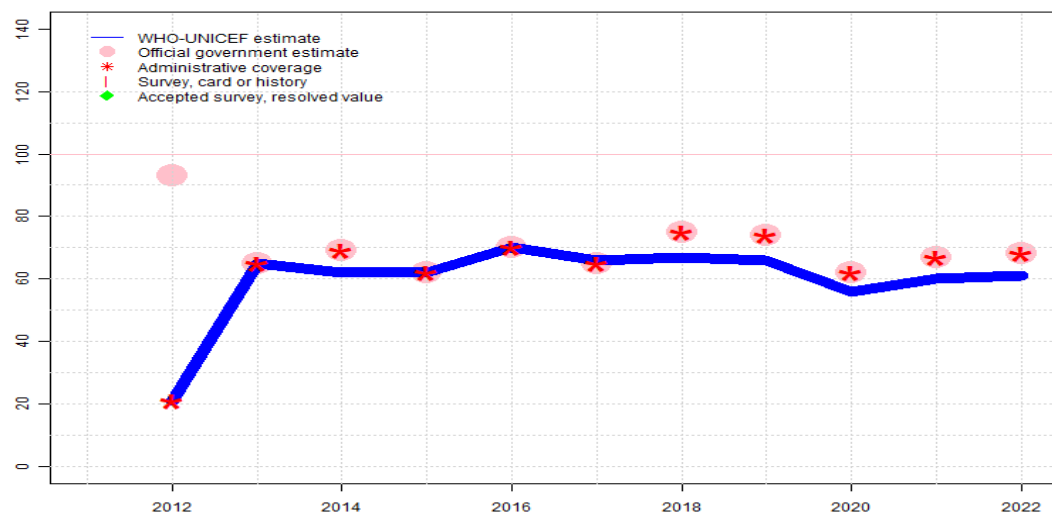
The WHO and UNICEF estimates of national immunization coverage (wuenic) are based on data and information that are of varying, and, in some instances, unknown quality. Beginning with the 2011 revision we describe the grade of confidence (GoC) we have in these estimates. As there is no underlying probability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

Republic of Moldova - RotaC

MDA - RotaC



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	21	65	62	62	70	66	67	66	56	60	61
Estimate GoC	NA	●●	●●	●	●	●●	●	●	●	●	●	●
Official	NA	93	65	69	62	70	65	75	74	62	67	68
Administrative	NA	21	65	69	62	70	65	75	74	62	67	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.

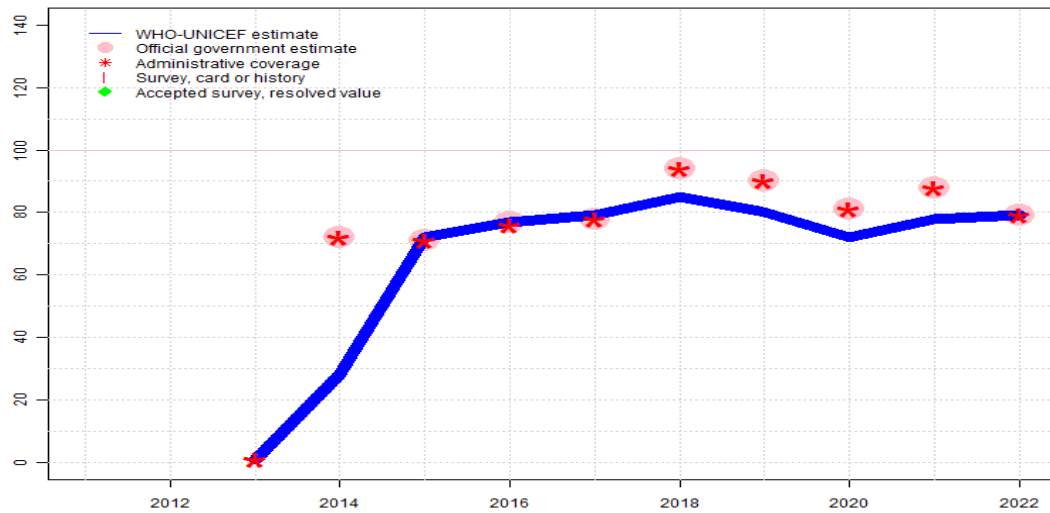
In all cases these estimates should be used with caution and should be assessed in light of the objective for which they are being used.

Description:

- 2022: Programme reports 68 percent coverage achieved in 89 percent of national target. Estimate informed by coverage achieved in total annual national target population. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: R-
- 2021: Programme reports 67 percent coverage achieved in 89 percent of national target. Estimate based on coverage achieved in total annual national target population. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: R-
- 2020: Programme reports 62 percent coverage achieved in 90 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Estimate challenged by: R-
- 2019: Programme reports 74 percent coverage achieved in 89 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Estimate challenged by: R-
- 2018: Programme reports 75 percent coverage achieved in 90 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Estimate challenged by: R-
- 2017: Programme reports 65 percent coverage achieved in 90 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Since 2016, the reported target population has declined by 13 percent. Estimate challenged by: R-
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Programme report doses administered in 90 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Estimate challenged by: R-
- 2014: Programme reports 69 percent coverage achieved in 89 percent of the national target population. Estimate is based on annualized coverage in the total national target population. Estimate challenged by: R-
- 2013: Estimate informed by reported data. GoC=R+ D+
- 2012: Estimate informed by reported administrative data. Rotavirus vaccine introduced in July 2012. Government official estimate reflects coverage in eligible birth cohort. GoC=R+ D+

Republic of Moldova - PcV3

MDA - PcV3



	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Estimate	NA	NA	1	28	72	77	79	85	80	72	78	79
Estimate GoC	NA	NA	••	•	•	••	•	•	•	•	•	•
Official	NA	NA	NA	72	71	77	78	94	90	81	88	79
Administrative	NA	NA	1	72	71	76	78	94	90	81	88	79
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:

- 2022: Estimate informed by reported data. No nationally representative household survey within the last 5 years. WHO and UNICEF recommend a high-quality survey to confirm reported levels of coverage. Estimate challenged by: D-
- 2021: Programme reports 88 percent coverage achieved in 89 percent of national target. Estimate based on coverage achieved in total annual national target population. Numerator for vaccines recommended in infancy has declined more than 10 percent and denominator of surviving infants 16 percent since 2019. Estimate challenged by: R-
- 2020: Programme reports 81 percent coverage achieved in 90 percent of national target. Estimate based on coverage achieved in total annual national target population. Estimate challenged by: R-
- 2019: Programme reports 90 percent coverage achieved in 89 percent of national target. Estimate based on coverage achieved in total annual national target population. Estimate challenged by: R-
- 2018: Programme reports 94 percent coverage achieved in 90 percent of national target. Estimate based on coverage achieved in total annual national target population. Estimate challenged by: R-
- 2017: Programme reports 78 percent coverage achieved in 90 percent of national target. Estimate based on coverage achieved in total annual national target population. Since 2016, the reported target population has declined by 13 percent. Estimate challenged by: R-
- 2016: Estimate informed by reported data. GoC=R+ D+
- 2015: Programme reports 71 percent coverage achieved in 90 percent of national target. Estimate based on coverage achieved in total annual national target population. Estimate challenged by: R-
- 2014: Seventy-two percent coverage achieved in 38 percent of national target. Estimate based on coverage achieved in total annual national target population. Estimate challenged by: R-
- 2013: Estimate informed by reported administrative data. Pneumococcal conjugate vaccine introduced in October 2013. GoC=R+ D+

Republic of Moldova - survey details

NOTE: A survey to measure vaccination coverage for infants (i.e., children aged 0 to 11 months) will sample children aged 12 to 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 to 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.

2011 Republic of Moldova Multiple Indicator Cluster Survey, 2012

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	97.8	15-26 m	383	95
BCG	Card	95.4	15-26 m	-	95
BCG	Card or History	98	15-26 m	383	95
BCG	History	2.6	15-26 m	-	95
DTP1	C or H <12 months	94.3	15-26 m	383	95
DTP1	Card	93.5	15-26 m	-	95
DTP1	Card or History	96.3	15-26 m	383	95
DTP1	History	2.8	15-26 m	-	95
DTP3	C or H <12 months	90.6	15-26 m	383	95
DTP3	Card	90.6	15-26 m	-	95
DTP3	Card or History	93.3	15-26 m	383	95
DTP3	History	2.7	15-26 m	-	95
HepB1	C or H <12 months	97.9	15-26 m	383	95
HepB1	Card	96	15-26 m	-	95
HepB1	Card or History	98	15-26 m	383	95
HepB1	History	2.1	15-26 m	-	95
HepB3	C or H <12 months	93.6	15-26 m	383	95
HepB3	Card	91.6	15-26 m	-	95
HepB3	Card or History	93.7	15-26 m	383	95
HepB3	History	2.2	15-26 m	-	95
HepBB	C or H <12 months	95.9	15-26 m	383	95
HepBB	Card	90.5	15-26 m	-	95
HepBB	Card or History	95.9	15-26 m	383	95
HepBB	History	5.4	15-26 m	-	95

Hib1	C or H <12 months	94.3	15-26 m	383	95
Hib1	Card	93.5	15-26 m	-	95
Hib1	Card or History	96.3	15-26 m	383	95
Hib1	History	2.8	15-26 m	-	95
MCV1	C or H <15 months	89.3	15-26 m	383	95
MCV1	Card	88.8	15-26 m	-	95
MCV1	Card or History	92.8	15-26 m	383	95
MCV1	History	4	15-26 m	-	95
Pol1	C or H <12 months	94.8	15-26 m	383	95
Pol1	Card	93.8	15-26 m	-	95
Pol1	Card or History	96.6	15-26 m	383	95
Pol1	History	2.7	15-26 m	-	95
Pol3	C or H <12 months	88.5	15-26 m	383	95
Pol3	Card	91.3	15-26 m	-	95
Pol3	Card or History	93.6	15-26 m	383	95
Pol3	History	2.2	15-26 m	-	95

2004 Moldova Demographic and Health Survey 2005

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	89.7	15-26 m	329	90
BCG	Card or History	99.7	15-26 m	329	90
BCG	History	10.1	15-26 m	329	90
DTP1	Card	88.7	15-26 m	329	90
DTP1	Card or History	98.3	15-26 m	329	90
DTP1	History	9.5	15-26 m	329	90
DTP3	Card	86.4	15-26 m	329	90
DTP3	Card or History	93.5	15-26 m	329	90
DTP3	History	7.1	15-26 m	329	90
HepB1	Card	89.3	15-26 m	329	90
HepB1	Card or History	97.7	15-26 m	329	90
HepB1	History	8.4	15-26 m	329	90
HepB3	Card	87.8	15-26 m	329	90
HepB3	Card or History	94.5	15-26 m	329	90
HepB3	History	6.7	15-26 m	329	90
MCV1	Card	84.9	15-26 m	329	90
MCV1	Card or History	90.6	15-26 m	329	90
MCV1	History	5.7	15-26 m	329	90
Pol1	Card	89.3	15-26 m	329	90

Republic of Moldova - survey details

Pol1	Card or History	99.1	15-26 m	329	90
Pol1	History	9.8	15-26 m	329	90
Pol3	Card	87.7	15-26 m	329	90
Pol3	Card or History	94.8	15-26 m	329	90
Pol3	History	7.1	15-26 m	329	90

1999 Republic of Moldova, Assessment of Immunization Services delivery, 2001

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	Card	99.6	15-30 m	2520	-
DTP1	Card	99.3	15-30 m	2520	-
DTP3	Card	97.7	15-30 m	2520	-
HepB3	Card	91.1	15-30 m	2520	-
MCV1	Card	95.4	15-30 m	2520	-
Pol1	Card	99.6	15-30 m	2520	-
Pol3	Card	98.4	15-30 m	2520	-

1999 Republic of Moldova, Multiple Indicator Cluster Survey 2000

Vaccine	Confirmation method	Coverage	Age cohort	Sample	Cards seen
BCG	C or H <12 months	93.2	15-26 m	342	94
BCG	Card or History	99.2	15-26 m	342	94
DTP1	C or H <12 months	93	15-26 m	342	94
DTP1	Card or History	96.7	15-26 m	342	94
DTP3	C or H <12 months	86.2	15-26 m	342	94
DTP3	Card or History	93.8	15-26 m	342	94
HepB3	C or H <12 months	83.7	15-26 m	342	94
HepB3	Card or History	90.1	15-26 m	342	94
MCV1	C or H <12 months	79	15-26 m	342	94
MCV1	Card or History	91.1	15-26 m	342	94
Pol1	C or H <12 months	94.1	15-26 m	342	94
Pol1	Card or History	97.5	15-26 m	342	94
Pol3	C or H <12 months	87.1	15-26 m	342	94
Pol3	Card or History	94.8	15-26 m	342	94

Republic of Moldova - 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>