

# Fact Sheet<sup>1</sup>

## User fees for immunization in developing countries

### *Working definition*

User fees are any charges in any form made to the end consumer in exchange for immunization services. The purpose of fees is to increase resources available to fund immunization programmes.

### *Findings on the implementation of user fees*

- User fees discourage people from seeking vaccination.
- Public funding is the most equitable way to finance essential immunization.
- Essential immunization services should be free of charge.

Research findings, multilateral agreements and the policies of the World Bank and United Nations agencies together support the following findings:

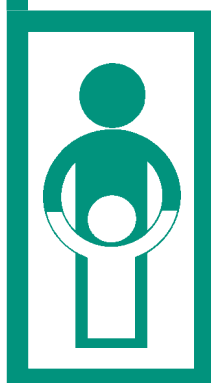
- User fees discourage people from seeking vaccination for themselves and their children.
- User fees should not be used for essential immunization services (a list of essential vaccines is provided below).
- Essential immunization services should be financed through public funds.

These findings flow from two facts:

1. Basic health services, including essential immunization, are a human right.
2. The positive externalities of immunization justify public expenditure to promote widespread protection against disease and to stop disease transmission.

Furthermore, vaccination is a preventive health intervention, and it is therefore more sensitive than curative services to the discouraging effects of user fees. Cross-subsidization of immunization services through user charges on curative drugs is an alternative to charges for vaccination. Nonetheless, this practice is potentially regressive and inequitable.

<sup>1</sup> This fact sheet summarizes the findings of the background paper *Practice and policies on user fees for immunization in developing countries* (WHO/V&B/01.07), commissioned by the Financing Task Force of the Global Alliance for Vaccines and Immunization.



## DEPARTMENT OF VACCINES AND BIOLOGICALS



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## User fees for essential immunization services and vaccine finance goals<sup>2</sup>

Goal	Option: user fees
Equity	Poorer people are more likely to go without essential immunization services if there is a user fee.
Cost-effectiveness	They are expensive to administer and most often do not cover the full cost.
Coverage	Coverage is negatively impacted by user fees.
Speed	Timely access will not be provided to all.
Feasibility	Cultures with high social solidarity or very low income may resist user fees.
Transparency	Fee collection and management requires a high level of accountability, which is often difficult to implement and monitor.
Simplicity	User fees are difficult to administer.
Sustainability	Experience shows that user fees adequate to ensure sustainability are not consistent with universal coverage goals.
Independence (self-sufficiency)	Essential preventive services should be free. However, user fees for other health services used to cross-subsidize vaccination, if retained at local level, may allow greater local control over health services.

### Essential vaccines

While national governments determine the list of vaccines deemed essential for their immunization programmes, WHO provides a model list of essential drugs as a guideline for policy-makers at the national level. This list is based on disease prevalence, product efficacy, product safety and availability. The WHO *Model List of Essential Drugs*, 11<sup>th</sup> edition (November, 1999) lists the following vaccines for universal immunization:

- BCG, diphtheria, hepatitis B, measles, pertussis, oral poliomyelitis, and tetanus.

For specific groups of individuals, such as inhabitants of areas with high disease burden, the following vaccines are deemed essential:<sup>3</sup>

- influenza, meningitis, poliomyelitis injection, rabies, rubella, typhoid and yellow fever,<sup>4</sup>
- *Haemophilus influenzae* type B (although it is not yet on the model list, WHO encourages the introduction of this vaccine; i.e. it can be considered essential).<sup>5</sup>

<sup>2</sup> For definitions and explanations of these goals, see *Options for a Global Fund for New Vaccines*. Geneva, World Health Organization (WHO/V&B/99.13).

<sup>3</sup> For information on which vaccines WHO recommends as essential for a specific country, please contact the Department of Vaccines and Biologicals at WHO Headquarters.

<sup>4</sup> Countries which should incorporate vaccination against yellow fever into the national immunization programme are identified in the WHO publication: Vainio J and Cutts F, *Yellow Fever*, 1998. Geneva, World Health Organization (WHO/EPI/GEN/98.11), distributed by the Department of Vaccines and Biologicals, World Health Organization, Geneva. 34 African countries are at high risk and should consider yellow fever vaccine as essential. Medium-risk countries may also consider the vaccine essential.

<sup>5</sup> The WHO position paper on *Haemophilus influenzae* type B conjugate vaccines. *Weekly Epidemiological Record*, 73(10):64-68, 6 March 1998. Geneva, World Health Organization.

The GAVI Financing Task Force, as represented by its core members, considers that the arguments and evidence presented are sound and balanced, and is in general agreement with the content and conclusions contained within the paper.

Copies and information may be requested from:

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