

Assessing immunization coverage survey costs

International Health Economics
Association

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Background & Rationale

Health and immunization surveys can be expensive.

The costs of different methods has not been systematically evaluated.

Project aims to fill a gap in our knowledge.

Establish benchmarks and identify cost saving innovations.

Improve communication between funders and implementers in negotiating budgets for surveys.

Methods, scope & limitations

The study used a mixed methods approach.

59 surveys were identified that could be used for the analysis (2011-2023).

12 estimates are from survey costing studies - more accurate.

47 estimates based on budgets: were budgets fully used, under-estimated, or overestimated?

Government contributions invisible.

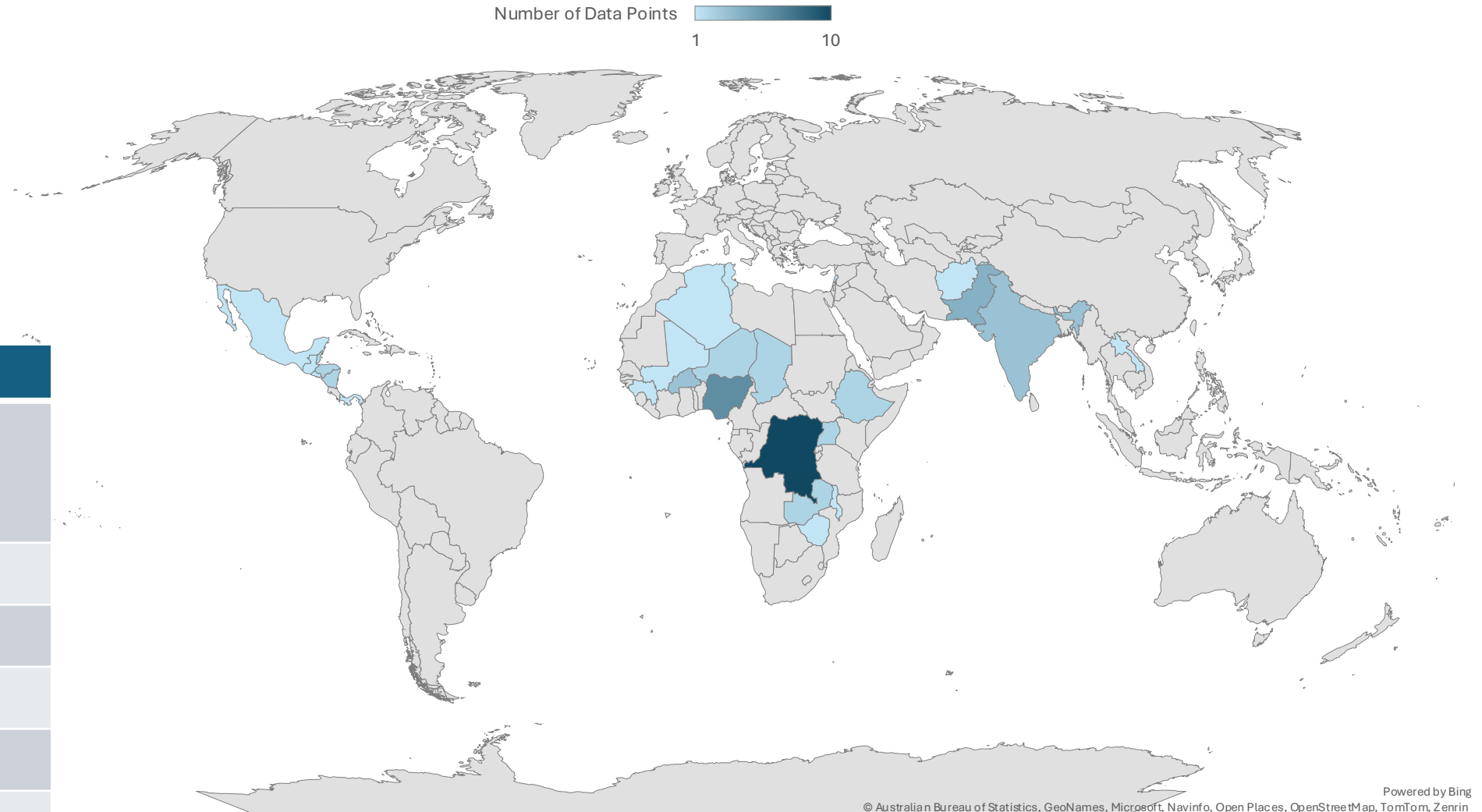
Many funders and costs can be high

Organization	Survey Types	Cost Ranges	Financing
Gavi	Post Campaign Coverage Surveys (PCCS)	\$900 - \$1.8m	Single or multiple funders
Gates Foundation	WHO cluster sampling surveys; Lot Quality Assurance Sampling (LQAS)	\$15,000 - \$2.4m	Some funding partnership
UNICEF MICS	Multiple Indicator Coverage Surveys (MICS)	\$250k - \$10m	Multiple funders + gov't
USAID	Demographic and Health Surveys (DHS)	\$1m - \$12m	Multiple funders
World Bank	COVID high-frequency phone surveys	For example, \$8 - \$13 per household for phone survey	World Bank
Inter-American Development Bank	Household surveys to verify results-based financing	Not publicly available	Multiple funders
Global Financing Facility	Health facility phone surveys	\$30 - \$110 per facility phone survey	World Bank/ GFF
Global Fund	Household surveys for HIV/AIDS, TB, and malaria	\$2m - \$6m for TB prevalence surveys	Multiple funders

Most surveys in our study from Africa

Analysis covers 27 different countries

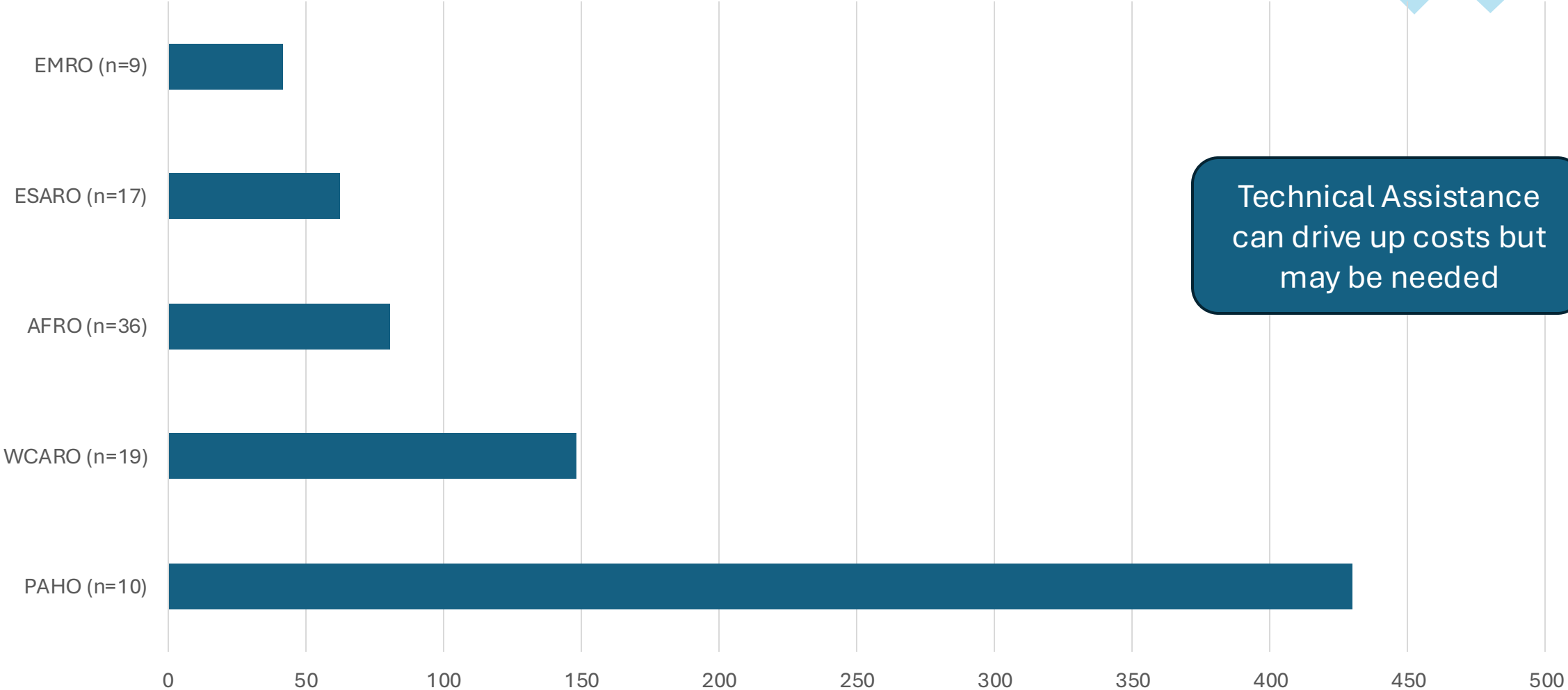
Region	Number
AFRO	37 (63%)
- WCARO	18 (31%)
- ESARO	19 (32%)
EMRO	9 (15%)
PAHO	10 (15%)
SEARO	3 (1%)
WPRO	1
Total	59



Variability in total & unit costs across immunization surveys (US\$2023)

Indicator	Total Cost	Cost/Cluster	Cost/ Household	Cost/Person Surveyed
Average	\$621,023	\$1,434	\$163	\$118
Median	\$248,278	\$1,299	\$89	\$109
Min	\$13,251	\$60	\$9	\$26
Max	\$2,871,181	\$5,277	\$1,137	\$280
Count	59	33	39	31

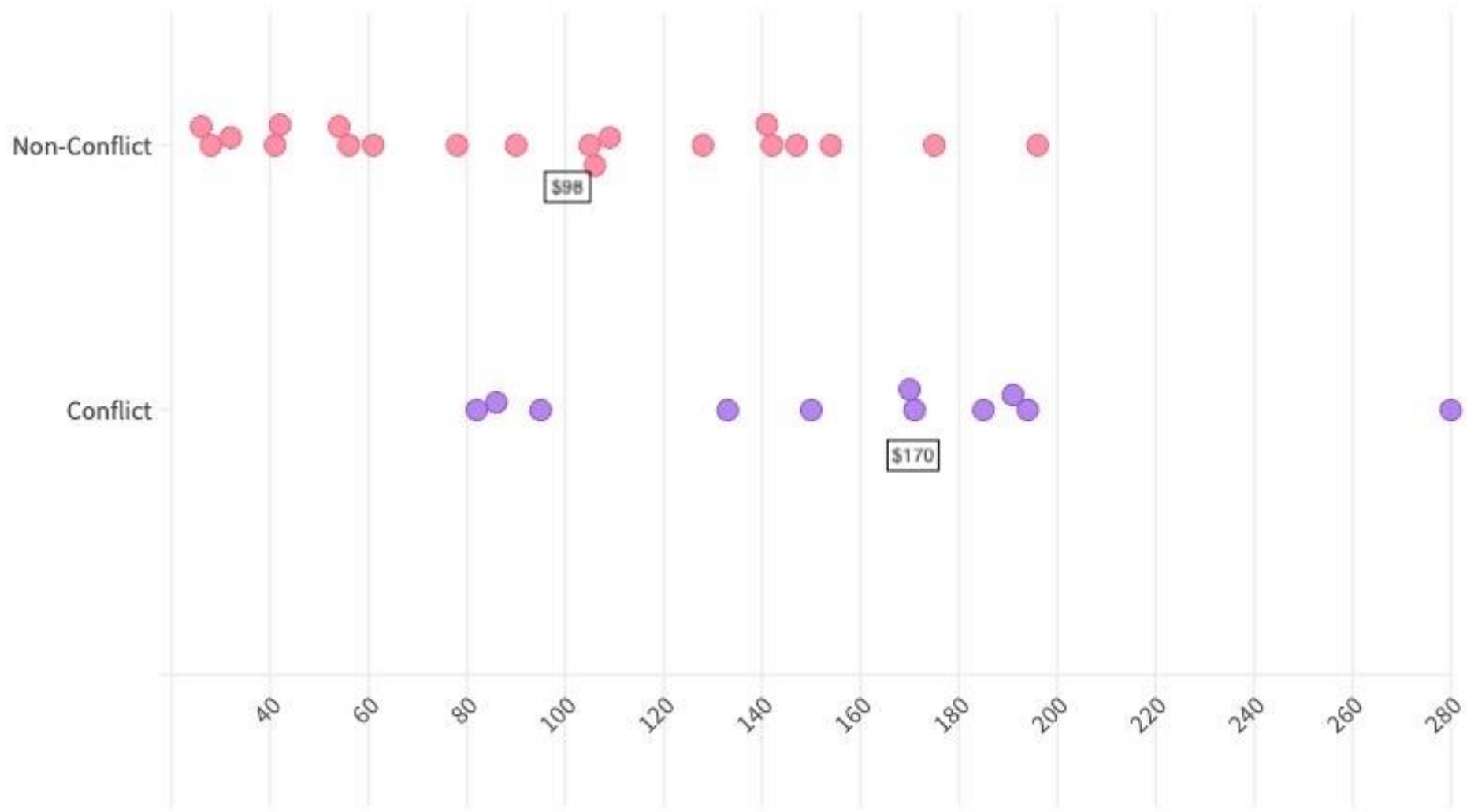
Cost/HH



Cheaper alternatives to standard WHO methodology (2023\$)

Survey type (median values)	Total Cost	Cost/Cluster	Cost/HH	Cost/Person Surveyed
WHO Cluster (n=18)	\$838,149	\$1,680	\$99	\$107
PCCS (n=10)	\$138,500	\$1,190	\$336	\$146
LQAS (n=10)	\$35,163	\$1,029	\$86	\$78
MICS (n=8)	\$1,790,025	\$1,405	\$165	\$191
Phone surveys (n=5)	\$210,802		\$14	

Setting



Cost per Person Surveyed by Setting US\$2023

● Conflict ● Non-Conflict

Some evidence it is more expensive to conduct surveys in fragile & conflict settings

\$90 vs \$170 per person surveyed

Additional findings

Major cost drivers: personnel, transportation, and field work costs. International technical support costs are high.

Budget for data processing and dissemination, airtime for communication during field work, community engagement, and security for field work under-estimated.

Lack of correlation between GNI p.c. and survey costs

Coverage survey financing is highly fragmented affecting timeliness, cost, and quality of survey results.

**Future for
immunization
survey
efficiency &
financing**

Deploy a standardized survey budgeting tool.

Require all survey reports provide the budget by line item.

Harmonize the conduct of surveys and pool funding for them in advance.

Smart survey design and implementation.

Greater use of technology for cost efficiency.

Thank you!

