



Written Comments to the OECD Health Committee

July 2026

Improve existing estimates on spending on disease prevention and public health (EGEPH 4-5 May meeting, Item 3)

[DELSA/HEA/HS\(2025\)7](#)

General Comments

Following the *Business at OECD* submission in October on 2025, for the OECD document on *Spending on Prevention: Update on Methodological Work and Preliminary Results* (DELSA/HEA/HS(2025)7), and the subsequent discussion at the May Expert Group on Economics of Public Health, we would like to provide the following update.

Overall, the Secretariat's work indicates continued progress in strengthening prevention spending estimates, with a focus on improving granularity, addressing data gaps, and refining estimation approaches. Immunisation appears as one of the more consistently reported areas, while other prevention categories remain less complete.

At the same time, comparability challenges persist, reflecting differences in national practices, data availability, and classification approaches. Some elements highlighted in earlier comments—such as more structured immunisation disaggregation and clearer classification guidance—are not yet clearly visible in the current material.

Looking ahead to the draft report expected in September, *Business at OECD* reiterates its support and encourage further consideration of a limited number of practical elements, building on its October 2025 written comments, including:

- **Clarifying the classification of immunisation spending within the SHA framework**, to support more consistent attribution across countries and reduce fragmentation across categories (notably within HC.6.2);
- **Exploring a light, voluntary disaggregation of immunisation spending by broad population groups** (e.g. paediatric, adolescent, adult), where data are already available, in line with efforts to improve granularity;
- **Ensuring that differences in reporting completeness across prevention subcategories are reflected in the interpretation of results**, noting that more complete reporting in areas such as immunisation may influence the observed distribution of spending.

We believe these elements would remain consistent with the OECD Secretariat's current methodological direction and could support improvements in comparability and interpretability, without expanding the scope of the exercise.