Policy Content Analysis of the Expanded National Immunization Program in the Republic of Korea

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The purpose of this study was to evaluate comparatively the content of the Expanded National Immunization Program according to the provision method between 2005 and 2006 in Korea. We assessed the impact of the mutually exclusive vaccination policy using the result reports of the 2005 and 2006 Demonstration Project and the related references by the content analysis. The public health centers paid vaccination fees to the private clinic and hospital in the 2005 Demonstration Project in Daegu metropolitan city and Gunpo city. But, the public health centers directly supplied free vaccination services to the children in the 2006 Demonstration Project in Gangneung city, Yangsan city, and Yeongi-gun. The total budgets of 2005 and 2006 Demonstration Project were 6.57 billion won and 0.65 billion won, respectively. The computerized registration rates and timeliness rates of administration of each vaccination had improved all in the 5 Demonstration Project regions. However, the computerized registration rates of most vaccination in Gunpo city were higher than those in the 2006 Demonstration Project regions except hepatitis B. Especially, the computerized registration rate of BCG was 48.3%, but the BCG coverage rate by the follow-up telephone survey was 99.8% in Daegu metropolitan city. The community parents in all the regions were satisfied because of expanding financial and geographical access to immunization coverage. In conclusions, from the aspect of the main outcomes, the implementation of two different financial immunization aids appears to be widely accepted among these parents and to have had an impact on vaccination coverage. In the future, the government must try to enact that the national immunization policy including under-immunised or incompletely immunised groups would be achieved by the affordable method of the public-private dynamics.

Key Words : Expanded National Immunization Program, Provision Method, Immunization Coverage, Policy (Content) Analysis

Ⅰ. 서 론

예방접종으로 예방 가능한 전염병(vaccine-preventable diseases, VPD)의 이환은 의료기관 방문과 입원이용, 학교나 사업장 결근으로 인한 시간 손실뿐만 아니라 조기사망 등으로 다양한 사회적・경제적 비용을 초래하게 된다(Zhou, 2005; Roush, 2007). 하지만, 총괄적인 지역사회 예방접종률을 통상 일정 수준(95% 이상)으로 유지하는 경우 VPD의 예방이나 퇴치가