Acquired Benefits and Poor Targeting in Public Spending on Health and Education in Cameroon

Bernadette Kamnia Dia, Simon Leunkeu Wangun, Christophe Tatsinkou and Josephine Afor

Poverty continues to be prevalent in Cameroon. At the same time, important social sector reforms are currently underway to achieve the Millennium Development Goals. In this context, a team of Cameroonian researchers analyze the degree to which the poor benefit from public spending on health and education in Cameroon. The results of their analysis have important implications for the design of poverty policies.

In the area of health, the poor resort primarily to self medication and/or traditional medicine, while the less poor have access to the private sector. Among the public services, integrated health centers (IHC) are the most popular, particularly for the poor, followed by district health centers (DHC). Hospitals are used most by the non-poor.

However, the poor benefit most from public health services (Figure 1), reflecting the progressivity of health care spending. At the margin, any increase in expenditure on the different health care services will be a benefit for everyone, although the financing of IHCs would be more beneficial to the poor.

With regard to education, the poor rely heavily on public institutions while more wealthy individuals prefer private institutions. On average, the poor benefit more from public spending on primary education, while middle-income people benefit mostly from public spending on secondary education, and the rich from public spending on higher education. These observations hold in both urban and rural areas. In general, women and girls benefit less from public expenditures on primary, secondary and higher education compared to boys and men.

At the margin, public spending on primary education seem to have reached such a large share of the population that any further increase in spending has little additional impact on the participation rate, although it may increase the quality of education. However, increases in public spending on secondary education benefits everyone, including individuals with higher income (Chart 2).

Finally, satisfaction with quality of service is higher in urban than rural areas. But there is no correlation between satisfaction and level of welfare in Cameroon.

Figure 1: Evolution of Public Health Services benefits

Figure 2: Evolution of acquired benefits

This Policy Brief is based on PMMA working paper 2008-08.