Health Improves in Benin, but the Rich-Poor Gap Widens and Increasing Pollution Causes Concern

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Cosme Vodonou, who is a member of both the Benin MIMAP national team and the PEP steering committee, finds that health programs undertaken in Benin in recent years – sustained healthcare personnel training, vaccination campaigns, prevention and control of certain endemic diseases (malaria in particular) – have resulted in noticeable improvements in health status. Out of 1000 newborns, 136 children died before their first birthday in 1972, 123 in 1982 and only 94 in 1996. Meanwhile, life expectancy at birth went from 37.3 years in 1961 to 53 years in 1996.

Nevertheless, disparities are still very important between the poor and the rich in the city of Cotonou. Diarrhea prevalence in childhood is 2.7 times higher in poor households in comparison to richer ones. Hygiene conditions are crucial to the reduction of diarrhea prevalence. Children from households using cleaning products have 97% less risk of suffering from diarrhea than those who are not.

Concerning preventive health measures for children - such as vaccinations - mothers' behavior is related to their standard of life, their level of education, their age and religion. For example, women who went to high school or more are at least twice as likely to have their children vaccinated compared to those who did not go to school.

Also, there is a positive correlation between the incidence of acute respiratory infections and the number of vehicles in circulation in Cotonou. The very low proportion of health spending (less than 2%) in poor households makes them more vulnerable to pollution.

The author concludes that the Beninese government must focus its health programs on the poorest households, while continuing its air pollution reduction efforts undertaken in 2000.