

# **Social Services Delivery: How much? What cost? Who pays?**

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# Will cover

- Rationale for public expenditure on health...
- Investing in MNCH
- Investing in prevention:  
the case of HIV and AIDS

# Rationale for public expenditure

- Financing versus provision
- “Public goods” : vaccination
- Access:  
Equity and poverty reduction
- Economic productivity: pandemics
- Averted health and other costs:  
the cost of not financing

# MNCH in Asia and Pacific

DESPITE fast growth...

Progress has stalled for many

- Rates: child malnutrition India double SSA. AP 1/3 world maternal deaths, 40% child deaths
- Numbers: 15% world newborn deaths 3 states of India.

# Five "I"s

- Inadequate expenditure: \$26 cf SSA
- Inefficient expenditure: ARI 3% vs 25%
- Inequitable expenditure espy OOP
- Incentives do not connect expenditure with outcomes
- Incomplete implementation and expenditure on key programs

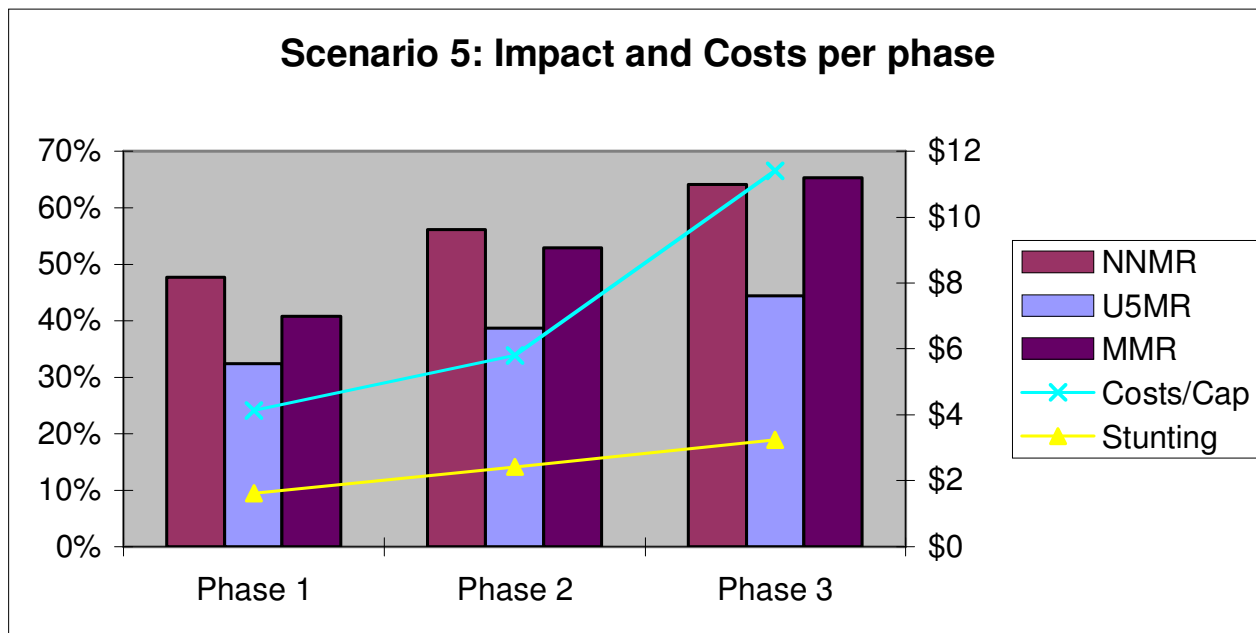
# Five “I”s...or just one “E”

- Inadequate expenditure
- Inefficient expenditure
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# Some results

- Additional investment of \$1.50 per person per year buys a 20% reduction in MNCH within a few years.
- Additional \$10 to achieve MDG 4 and 5

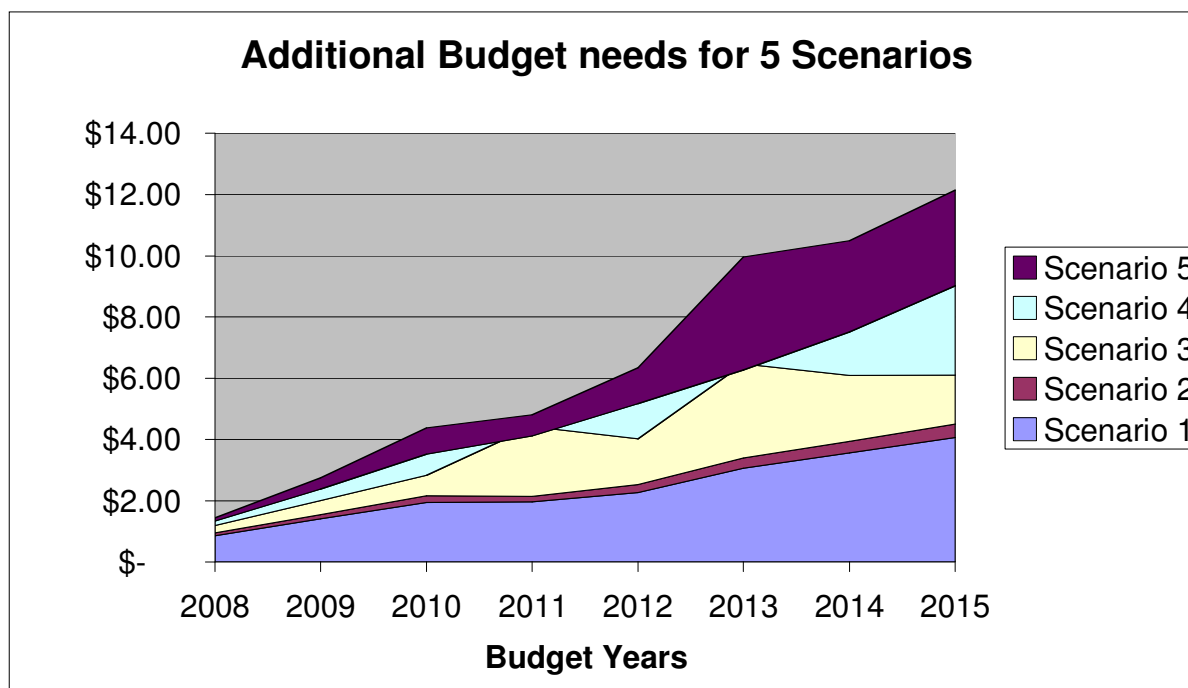
# Scenario 5



10 April 2008

Consultation on Equity in Access to Quality  
Health Care of Women and children

# Budgetary summary



10 April 2008

Consultation on Equity in Access to Quality  
Health Care of Women and children

# What's new ?

- All key UN technical agencies and PMNCH, plus ADB and World Bank, plus bilaterals, plus Gates Foundation.
- Approach draws on best scientific knowledge (Lancet series) ; AND links to latest costs (MICS DHS) and latest software.

# What's new (cont'd)

- Where, when, why, in what sequence at what cost
- Demand and supply side
- Politics?
  - Identify politically visible quick wins
  - But also longer term, more expensive key investments: anaesthetists etc,

# HIV and AIDS

- Every dollar invested in prevention saved Thailand \$43 treatment costs next decade
- Costs of neglect
- Choose where have biggest impact. Often surveillance, prevention, care and impact mitigation. For ADB → infrastructure

# HIV and AIDS

- Targeted interventions save lives and money
- Infrastructure as a risk setting.  
*The Joint Initiative*
- Mobile men with money
- Economics of high risk groups