This chapter examines how progress in education and health is the result of both structural determinants, which include state capabilities, public spending and social stratification, and intermediate determinants, which encompass individuals, families, communities and care systems. Based on this conceptual framework, gaps corresponding to inequalities are identified, either between countries (horizontal) or between social groups or areas in each country (vertical), based on the Sustainable Development Goals (SDGs) in El Salvador, Guatemala, Honduras and Mexico.

Identification of gaps in public spending on health and education

1. The gaps are estimated based on the results in education or health achieved by countries, areas or ethnic groups during a given period.

2. They are analytically linked to the overall amount, composition and characteristics of public spending on education and health in each country in order to estimate the possible expenditure contribution.

3. Fiscal gaps that arise from the need to cover the inequalities that still persist in education and health are evaluated.

Public spending on health and education

Public expenditure can and should contribute to increasing the coverage and quality of health and education services, but its impact is conditioned by a wide range of variables.

The most important implications of this study are threefold

- It is necessary to mobilize more resources for education and health.
- A progressive reorientation of public spending, both in health and education, aimed at achieving an urban-rural and territorial balance must be ensured.
- This should be complemented by other measures to increase the impact of public spending, taking into account circumstances ranging from the education of parents to improvements in the management of health and education systems, and investments in sanitation and hygiene infrastructure.

Source document