



APPROACHES TO REVIEWING EQUITY AND SERVICE DELIVERY FOR SOCIAL SPENDING

EMILY SINNOTT CAPE TOWN JULY 23, 2015



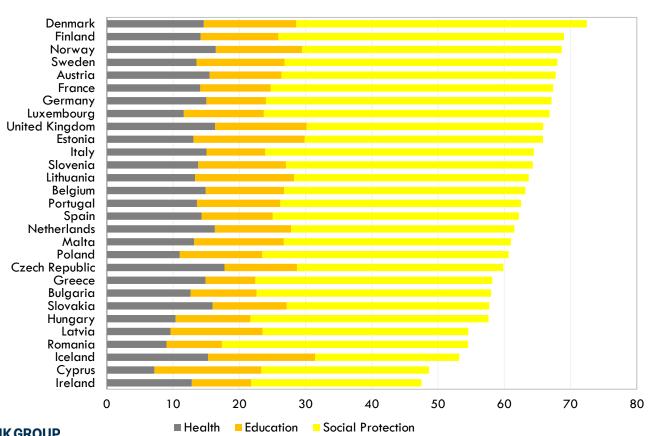
Aim of presentation

- Present an array of tools/approaches used to look at distributional impact of fiscal policy and quality of service delivery.
- Focus on the social sectors: Education, health and social protection. Accounts for around 50 to 70% of public spending in EU countries.
- Use of recent EU examples—given the strong focus in the region on fiscal policy reforms due to consolidation needs.



Social sector spending accounts for the major share of government spending in EU countries...

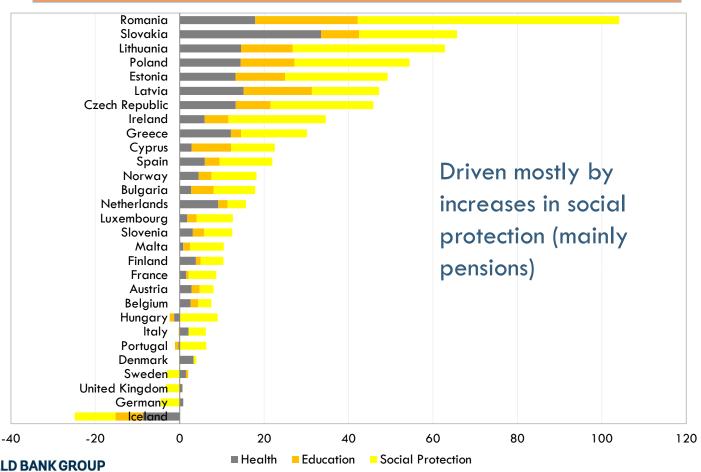
Social sector spending as % of total government spending, 2010





...and boomed over 2004-2008

Real growth in social spending, contribution by subsector, during boom (2004-2008)





Presentation structure

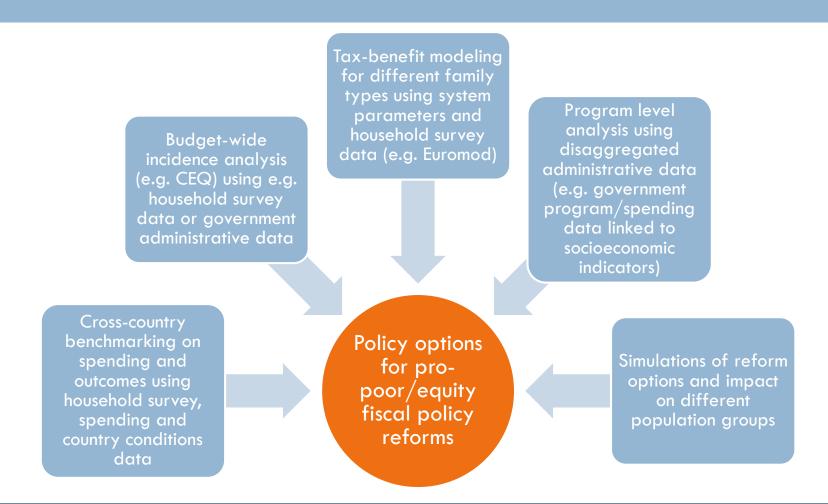
- 1. Tools to deepen spending analysis
- 2. Cross-country benchmarking
- 3. Linked administrative data
- 4. Tax-benefit models
- 5. Drawing from recent EU experience



Tools to deepen spending analysis



Common approaches to approaching equity in expenditure/revenue reviews

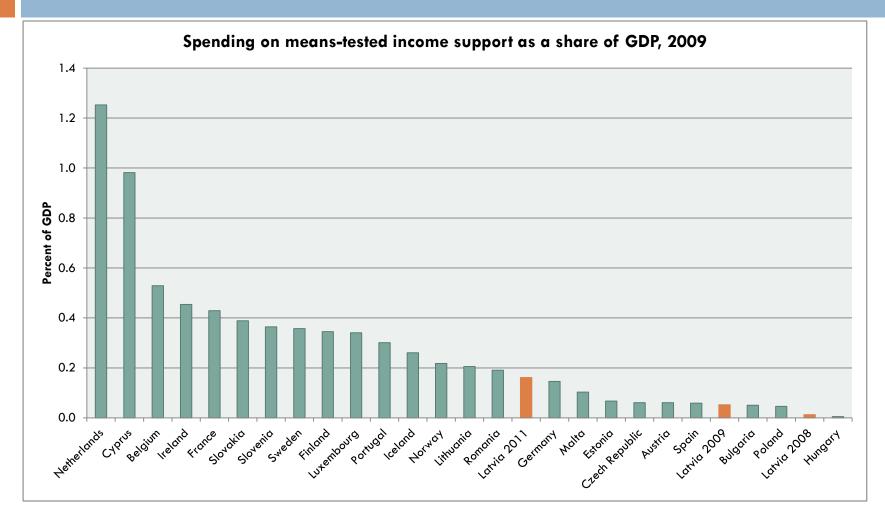


Efficiency implications of these equity efforts in terms of (a) marginal tax rates and/or (b) program cost

8 Cross-country benchmarking



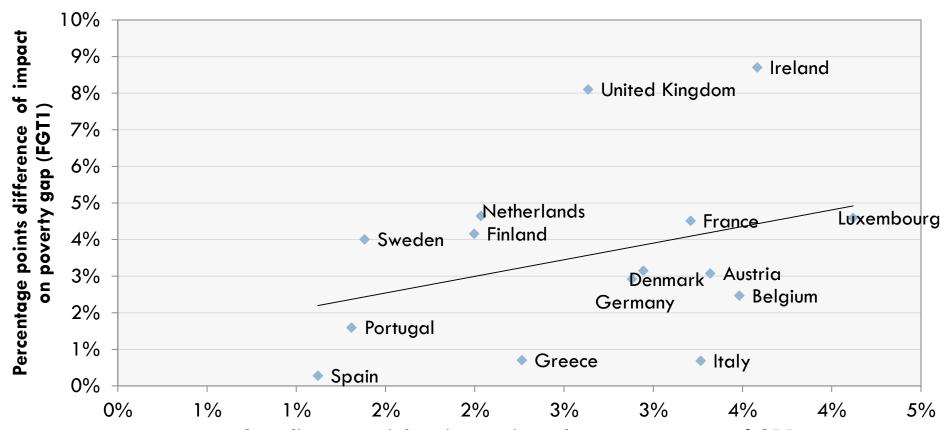
Large divergence in cross-country spending on means-tested income support for the poor in EU





Social assistance in EU countries has very different poverty impacts not only due to spending levels, but also because of targeting

Reduction in at-risk-of-poverty rate and spending on cash social assistance benefits, 2009





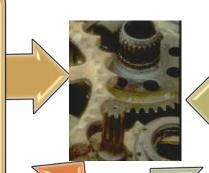


11 Linked administrative data



Government budget and expenditure/revenue data

Source: Ministry of Finance/Treasury, education, heallth, social protection/labor ministries



Community/Individual data

e.g., demographic and socioeconomic data, poverty, unemployment and education levels

Source: household service data, individual-level data from population registry/social insurance data,/health insurance data from National statistical office and other government agencies

Data on sectoral inputs

e.g.: school-level data on students, teachers, classes; facility-level data on medical personnel, equipment, pharamaceuticals

Source: education, heallth, social protection/labor ministries

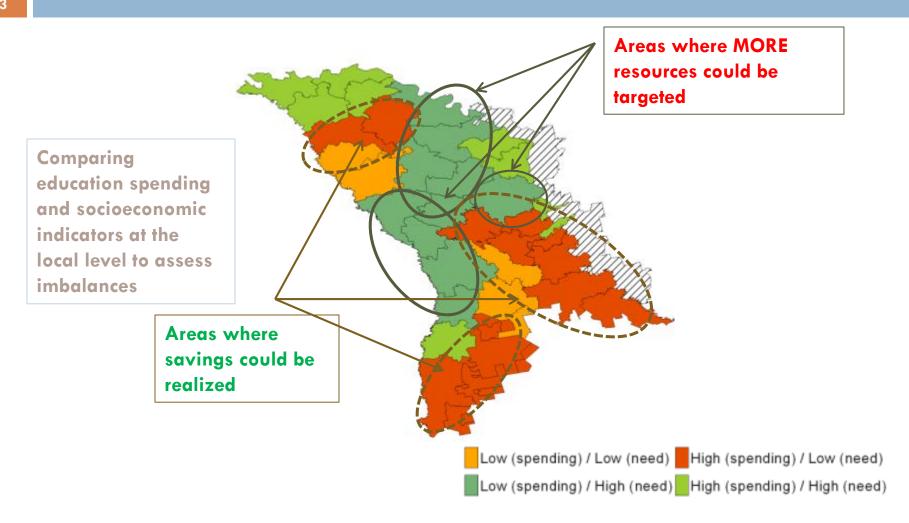
Sectoral performance data

e.g.: school-level test scores data, reemployment, health treatment and outcomes

Source: National assessment center, employment agencies, health authorities



Case 1: Identifying education spending inequities in Moldova—Comparing per capita education expenditure by region vs. deprivation index



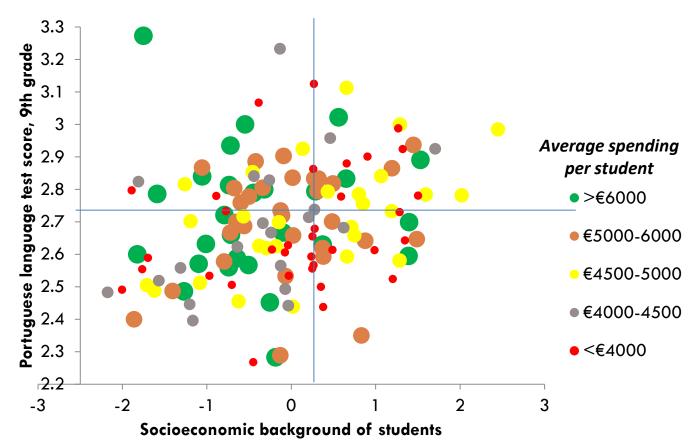


Case 2: Examining school-level education spending, equity and performance in Portugal (1)

School spending per student, performance and socioeconomic context

Combining
spending, test
score and
socioeconomic
information to
examine school
performance in
Portugal

No clear pattern nationally



Source: World Bank staff calculations based on data from Portugal's MEC.

Note: The socioeconomic background of students at a school is measured by an index built using data on the share of financial aid and the level of schooling attained by mothers. Only schools whose students' average age is 14.5 are displayed. The vertical and horizontal lines indicate national average weighted by enrollment.

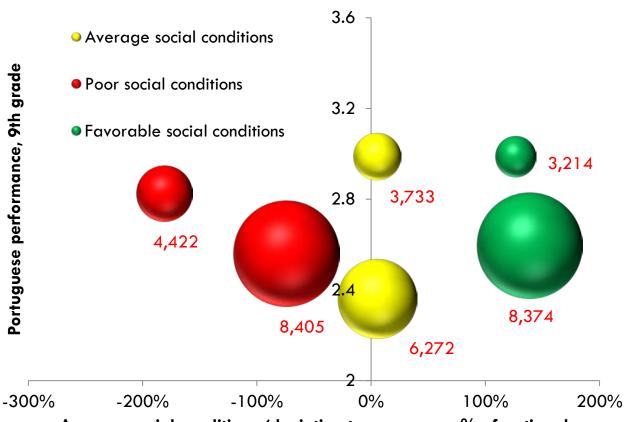


Examining school-level education spending, equity and performance in Portugal (2)

Allows the identification of poorer and better performing schools

- Spending per student not closely linked to performance
- Costs driven by teacher tenure

Divergence in school performance





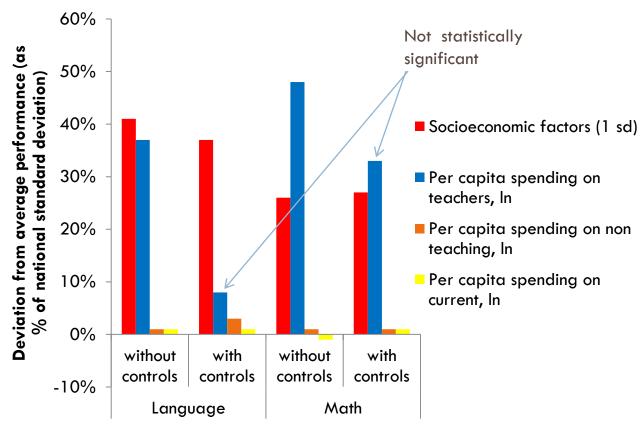


Examining school-level education spending, equity and performance in Portugal (3)

Socioeconomic factors not resources dominate in explaining the diverging school performance

Earlier intervention needed; in Portugal to stop grade repetition by 4th and 6th grades through programs such as individual tutoring

Marginal impact of spending on 9th grade assessment results

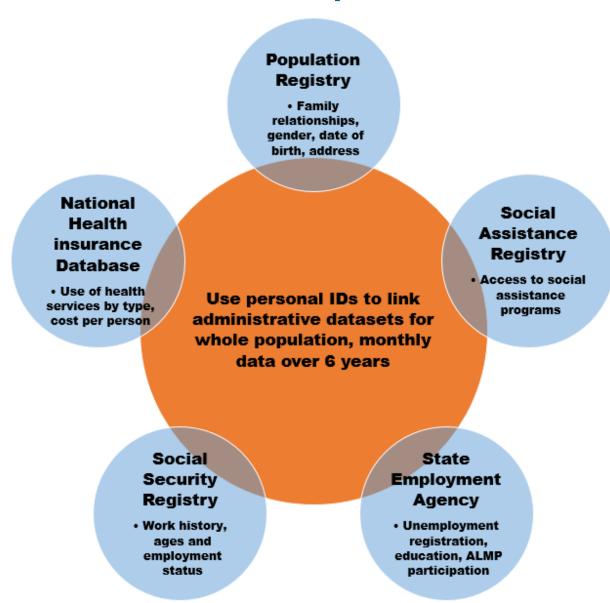


Source: World Bank staff calculations based on data from Portugal's MEC.

Notes: Controls are added for average class size (in 9th grade) and share of teachers with tenure. Once class size and tenure are taken into account, spending has no effect on students performance. This indicates that spending affects quality only through class size and tenure. The effects of class size are small and only significant for math performance.



- 17
 - Large effort by government to link databases on service use and labor market conditions of whole population
 - Multiple uses, e.g.
 evidence on benefit
 dependency, ALMP
 impact, health safety
 net usage
- Large data brings some complexity: approx 2 million people followed over 6 years monthly; close to 600,000 in ALMP study

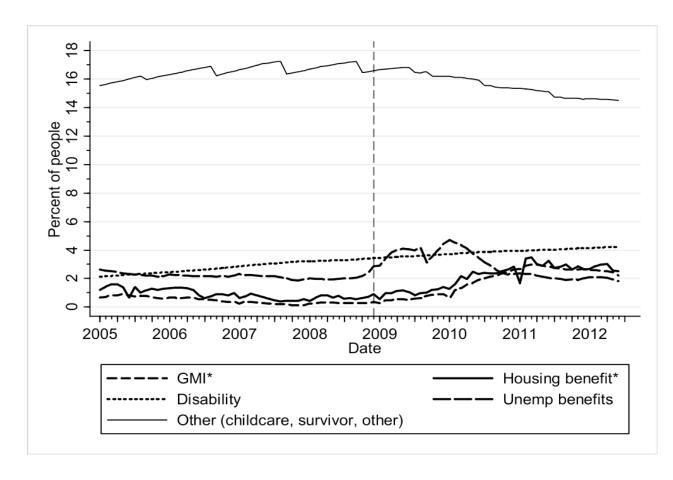




Application 1: Even descriptive statistics can tell a lot: Evidence Does Not Support Widespread Benefit Dependency (1)

Social assistance (Guaranteed Minimum Income, GMI) grew over crisis; but a maximum of 4 percent have participated at any one time ...

Benefit program incidence, 2005-2012

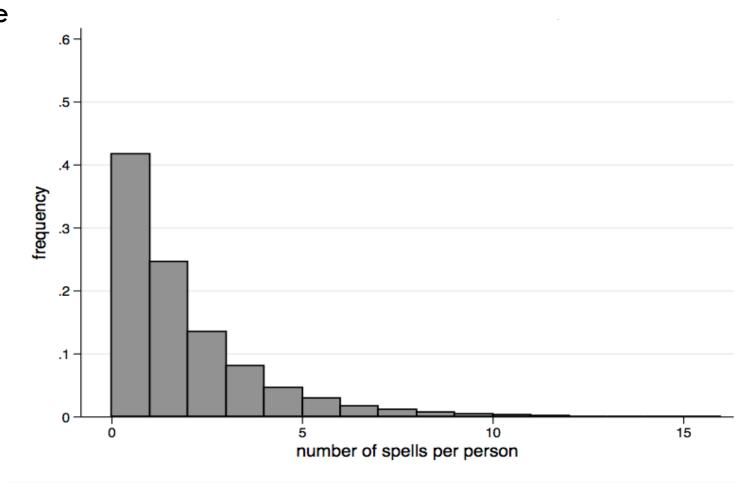




Evidence Does Not Support Widespread Benefit Dependency (2)

40% of people have only one GMI spell in 2006-2012

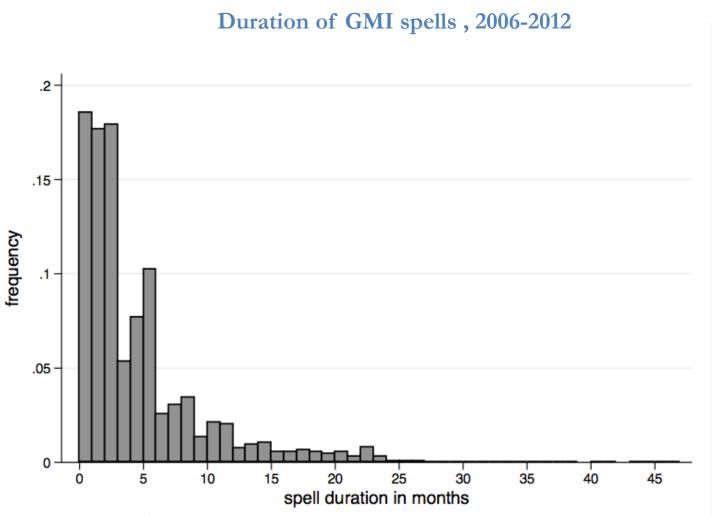






Evidence Does Not Support Widespread Benefit Dependency (3)

... and spell durations appear to be short...with a lot of spells of one to three months



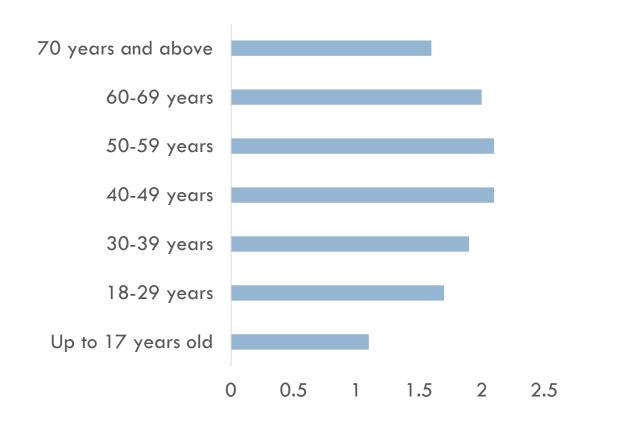


note: 17.3% of spells are censored

Application 2: Indication of underuse of poor elderly of health social safety net (1)

- Claims per poor patient lower for 70 year olds and older than for those in middle-age
- Likely explained by lack of access (transport, low knowledge of program/problems accessing benefit), rationing (evidence of less GP assistance than other groups)

Mean number of health services used by needy (poor) patients, 2012, by age group

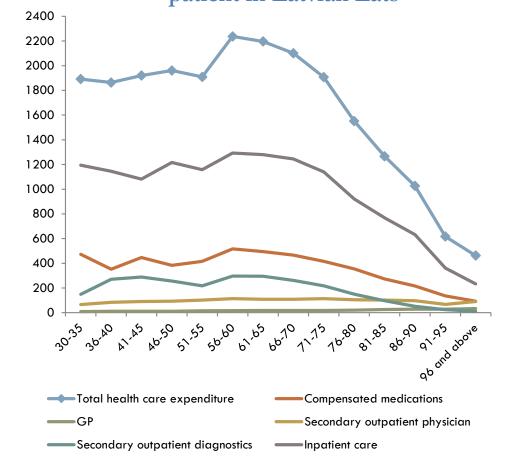




Indication of underuse of poor elderly of health social safety net (2)

- Evidence overall of much less spending on older patients by the state
- If patients are filtered to only include those in last two years of life similar shape remains
- Very little savings in the hands of many of these older people so unlikely that public provision is substituted by private services for most

Public health spending by age group, expenses per patient in Latvian Lats

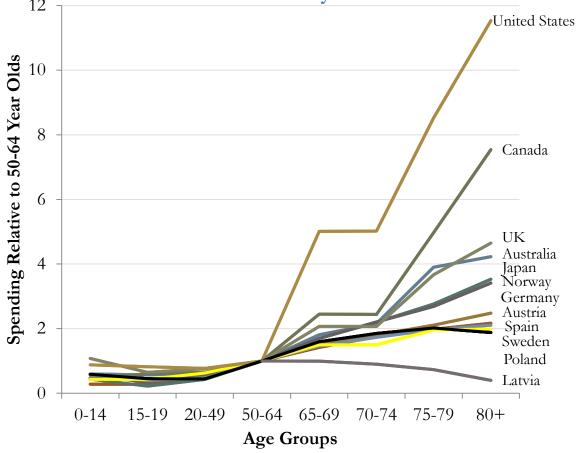




Indication of underuse of poor elderly of health social safety net (3)

- Some evidence of less intensive spending for older old in less rich countries
- Stresses the importance of measuring what is not spent and implications for health outcomes







Application 3: Directing employment program support

- Who are the people experiencing labor market difficulties?
- How are professional training and informal education programs for unemployed performing for these groups?
- A substantial variation in terms of various labor market outcomes (employment rates, wages) found both between types of programs and within each type.
- Overall, the best performing programs for men include:

professional training in manual, as well as service and a sales jobs employer provided training in non-manual jobs informal education programs in project management and software informal education programs for professional drivers of transport and industrial vehicles

For women, the best performing programs include:

employer provided training in manual jobs
professional training in manual jobs
IT (basic skills)
state language (categories 2 & 3) and English (intermediate level)
professional training in manual, as well as service and a sales jobs



NO/UNSTABLE WORK: DETAILED GROUPINGS

"single older unemployed/disabled"

. Old/Middle-aged 45-61 y.o.

22%

- . Single
- . 10+ yrs. experience
- . Low education
- . Many disabled/unemployed
- . Chronic illness

"stay-at-home mums with small child"

- . Younger women 25-39 y.o.
- 11%
- . Married/union
- . Higher education
- . Child < 6 y.o.
- . Rural
- . Working partner

"disabled older women with working partner"

- . Older women 50+
- . Married

- 6%
- . Lower education
- . 10+ yrs. experience
- . High disability (most in sample), inactive
- . Chronic illness
- . Working partner

"single young males with low education"

- . Young 20-29 y.o.
- . Men
- . Never married
- . Very low education
- . Unemployed
- . No children
- . Rural

"poorly educated, rural male breadwinner"

- . 30-39 y.o. men
- . Married/union
- . Very Low
- education
- . 10+ yrs. experience
- . Child < 6 y.o.
- . Rural
- . Partner not working

"highly educated stayat-home mums"

- . 30-39 y.o. women
- . Married
- . Higher education (most)
- . 10+ yrs. experience
- . Children
- . Urban
- . Working partner

"older unemployed, fit for work"

14%

9%

4%

. Older 50+

18%

11%

6%

- . Married
- . 10+ yrs.
- experience
- . Low education
- . Unemployed/Low earnings /Infrequent work

"self-employed older men"

. Older men 40-54

y.o.

- . Married
- . 10+ yrs. experience
- . Self-employed
- . No child in household
- . Informal

"disabled older women, partner not working"

- . Older women 50+
- . Married
- ion
- . Lower education
- . 10+ yrs. experience
- . Unfit for work, inactive
- . Large share retired early
- . Chronic illness
- . Partner not working

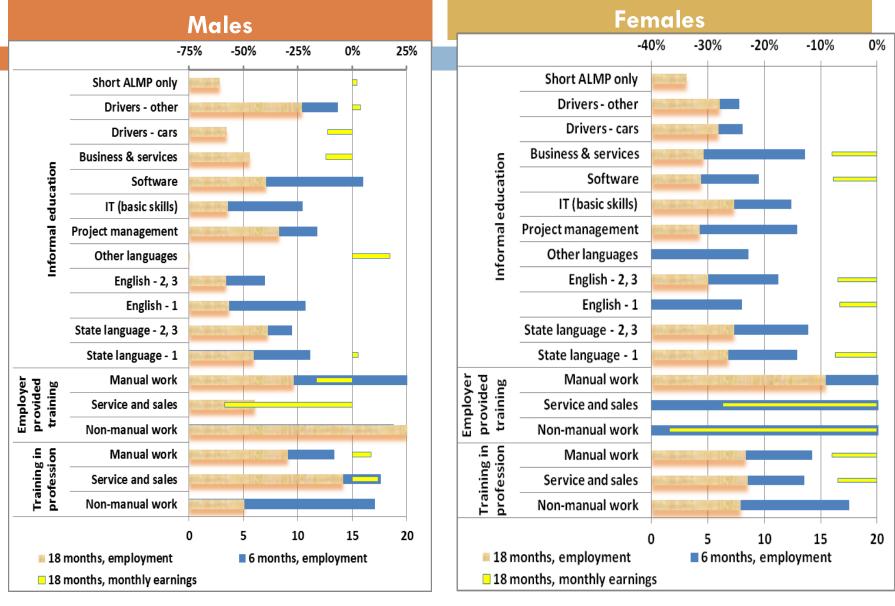


Estimated ALMP effects on:

• employment rates 6 and 18 months after training (% points, lower scale)

• average earnings in months worked over 18 months (%, upper scale)

26



Tax-benefit models



Using tax-benefit models to analyze impact of reforms

 Allows measurement of the aggregate impact of tax-benefit policy changes on different family types

□ But!

- Distributional analysis would be needed to assess full impact and costs of any reforms
- Informality and under-reporting could present a challenge in designing targeted make-work-pay policies
- Does not include indirect taxes and so incomplete picture for family income (and more relevant for high-income countries' tax structure where personal income tax and benefits are much larger)



Very different marginal effective tax rates for low earners across OECD countries

In-work benefits for low income households allow after-benefit and tax income to increase as work effort increases, selected countries 180% Net Income (%of out-of-work income) 160% 140% 120% 100% 80% 60% 40% 20% 0% 20 40 60 80 100 Gross Earnings (% Average Wage) ·Australia ······France — United Kingdom - · - United States Latvia baseline



Drawing from recent EU experience



Importance of evidence base for policy making in good and bad times

Continuous review of spending and programs using a variety of data sources means countries have basis for deciding on trade-offs in bad times and investments in good times.

Combined focus on the following is important:

- Use large administrative data combined with socioeconomic and performance indicators for more power
- Sustainability
 - Are spending programs affordable now and in the longer term?
- Efficiency
 - Can facilities/service delivery deliver more outputs for their current set of inputs? (Technical efficiency)
 - > Can the overall efficiency of spending be increased with a better allocation of the budget across programs? (Allocative efficiency)
- Equity
 - How is spending distributed across different groups?
 - > Is the safety net adequate to protect lower income groups in bad times?
- Rethinking the role of the state/programs



Thank you!