

# The Incidence of Public Spending on Healthcare: Comparative Evidence from Asia

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The article compares the incidence of public healthcare across 11 Asian countries and provinces, testing the dominance of healthcare concentration curves against an equal distribution and Lorenz curves and across countries. The analysis reveals that the distribution of public healthcare is pro-rich in most developing countries. That distribution is avoidable, but a pro-poor incidence is easier to realize at higher national incomes. The experiences of Malaysia, Sri Lanka, and Thailand suggest that increasing the incidence of pro-poor healthcare requires limiting the use of user fees, or protecting the poor effectively from them, and building a wide network of health facilities. Economic growth may not only relax the government budget constraint on pro-poor policies but also increase pro-poor incidence indirectly by raising richer individuals' demand for private sector alternatives. JEL Codes: H22, H42, H51.

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