

# Human Capital - Health and Education

## EC 390 - Development Economics

Jose Rojas-Fallas

2025

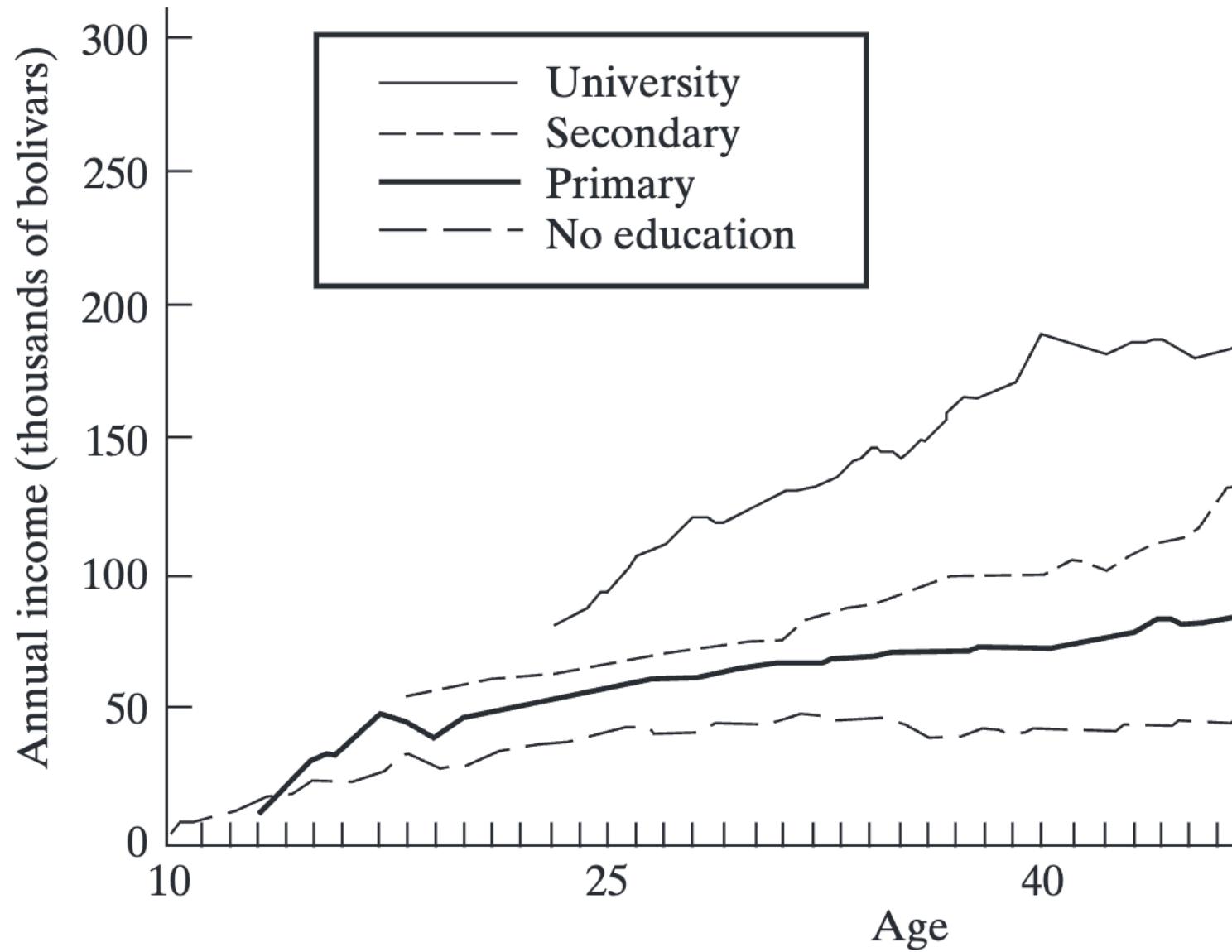
# Central Role of Education and Health

# Education and Health

Education and Health are basic **objectives of development**

- A **healthy and educated** is desirable for growth
- Modern economies tend to produce healthy and educated individuals
- Further, we can think of **education and health** as **investments**
- You **invest** in a university degree because it will **pay off eventually**
- You **invest** in eating healthy because it will **pay off eventually**
- In developing countries, these investments can have **large pay-offs**
- But these pay-offs happen **in the future**

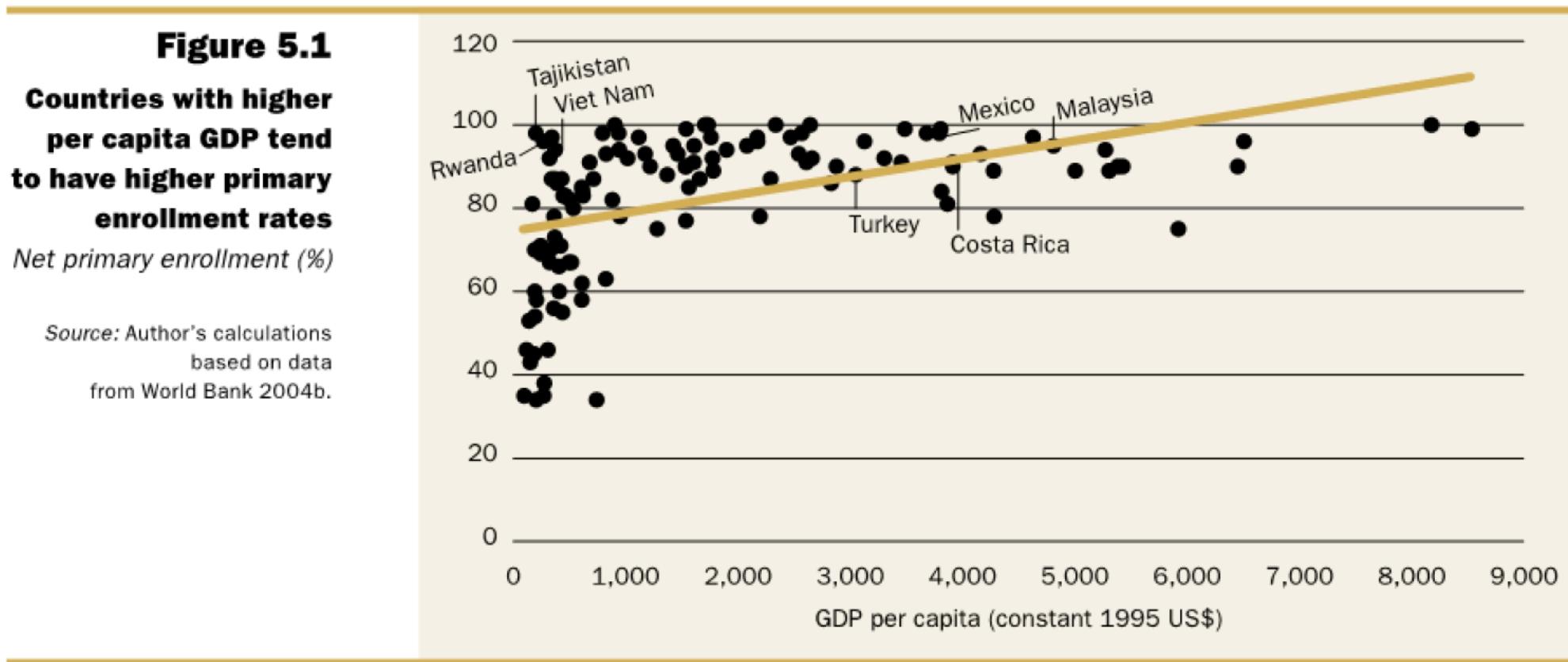
# Education and Health



# Education and Health

**Greater incomes** are associated with **higher education levels**

- More factors at play for low-income countries



# Education and Health

**Greater incomes** are associated with **higher education levels**

- More factors at play for low-income countries

**Table 2: Private Returns to Schooling by Income Group**

Country income level	Overall rate of return (%)	Mean years of schooling
Low	9.3	5.0
Middle	9.2	7.0
High	8.2	9.2
World average	8.8	8.0

Notes: Country per capita income levels based on World Bank (2016) classifications in 2015 US\$: low = \$1045 or less; middle = \$1046-\$12,735; high = \$12,736 or more

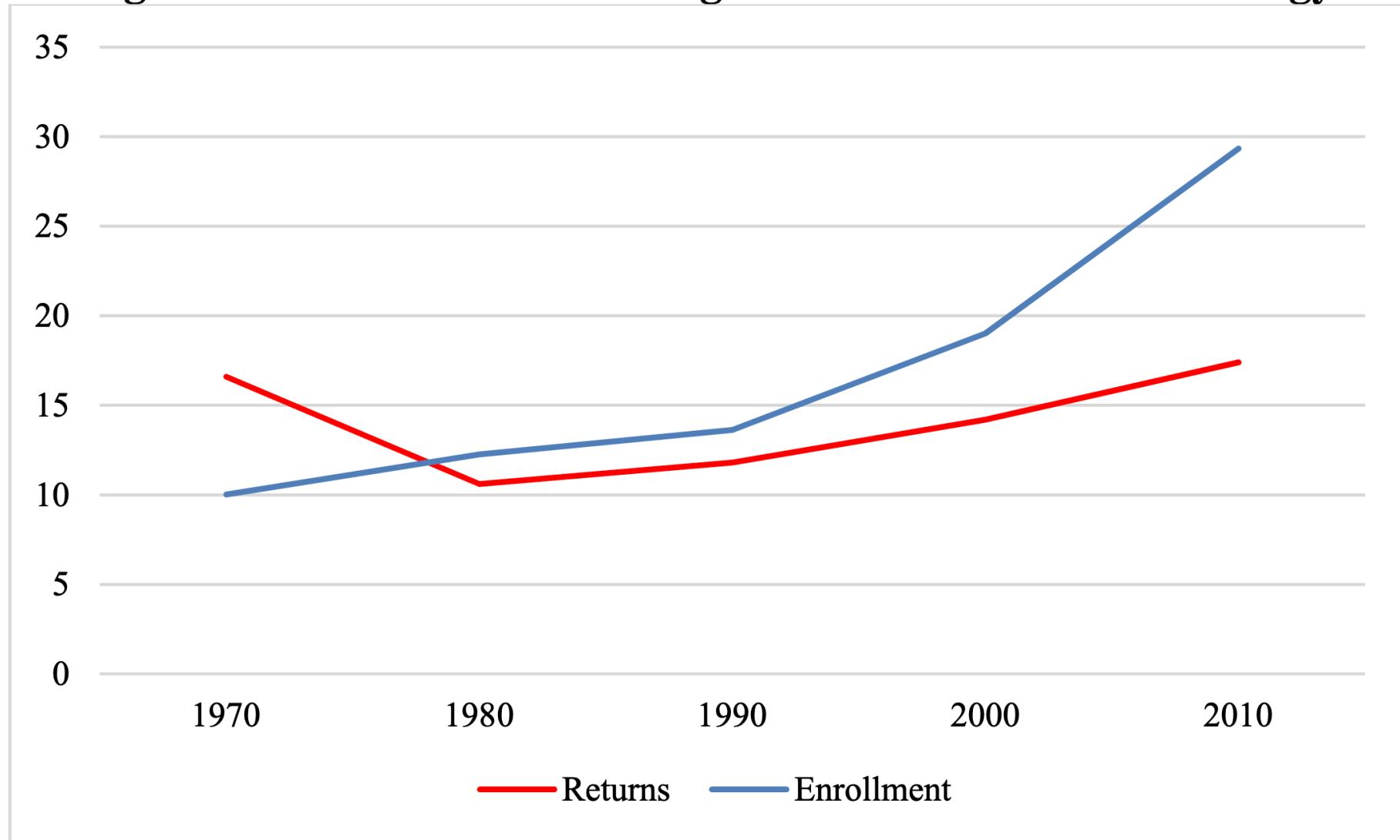
# Education and Health - Regions

**Table 3: Private Returns to schooling by region**

Region	Overall rate of return (%)	Mean years of schooling
Latin America and Caribbean	11.0	7.3
Sub-Saharan Africa	10.5	5.2
East Asia and Pacific	8.7	6.9
South Asia	8.1	4.9
Advanced Economies	8.0	9.5
Europe and Central Asia	7.3	9.1
Middle East and North Africa	5.7	7.5
World average	8.8	8.0

# Education Interacting with Technology

**Figure 5: The Race between Higher Education and Technology**



# Education Interacting with Technology

**Figure 8: Average returns to schooling and average mean of education over time**



# Human Capital Approach

# Human Capital

**Definition:** Catch-all term we use in economics to refer to education, health, skills, and other human capacities that can raise productivity

Human capital can be acquired **through investment**

- Education
- Health care
- Training, therapy, etc.
- They affect **productivity, income, happiness, and lifespan**
- We may not directly talk about education or health, but rather the **human capital** it creates

# Complementarities

**Health and Education** investments have large **complementarities**

- If children are **malnourished or have high mortality, education investment** will not be as effective
  - Poor health in children leads to:
    - Low school attendance
    - Less attention in class
    - Lower lifetime earnings and returns to investment
- To effectively **increase human capital**, we need **investments in both health and education** simultaneously

**Unfortunately, investments take considerable time to pay off**

# Invest Now, Returns Later



# Invest Now, Returns Later

Investing in education means that we **expect higher earnings in the future** than we would have obtained otherwise

- These **future income gains** must be compared with the **total costs incurred** to understand it as an investment
- Education costs include direct costs:
  - tuition costs
  - books and uniforms
- And indirect costs:
  - **foregone income**

# Let's Model It

Formally, we can write the **Discounted Value of Education** where  $E_t$  is income with extra education,  $N_t$  is income without extra education,  $t$  is year,  $i$  is the **discount rate** and this is summed over expected years of working life:

$$\text{DVE} = \frac{E_t - N_t}{(1 + i)^t}$$

We do this because these decisions are not equivalent across individuals

- People with **higher discount rates** will be **less likely to invest in education**  
**They value the increase in the future income less than current income**

# Discounted Value Example

Let's find out if being here is worth it

- Suppose that your earnings with a degree will be 100 ( $E = 100$ )
- Without a degree, your earnings will be 20 ( $N = 20$ )
- Suppose your discount rate is 20%, you value the future 20% less than the present ( $i = 0.2$ )
- Lastly, suppose you will earn your degree in 4 years ( $t = 4$ )

We put it all together in the *DV* equation:

$$DV = \frac{100 - E_t - N_t}{(1.2)^4 + i^t}$$

The additional 80 dollars “future you” would earn with extra education is only worth **38.6 to “present you”**

# Discounted Value Example (v2)

We can adapt this equality to model other things as well , **we just need a start and end value**

**And we can solve for any of the components if we have the other information**

Let us find the discount rate such that we are **indifferent** the future value of 2 extra dollars in 5 years from now

$$DVEM = \frac{2}{(1 + i)^5} = 1$$

# Discounted Value Example (v2)

$$DVEM = \frac{2}{(1 + i)^5} = 1$$

$$2 = (1 + i)^5$$

$$\sqrt[5]{2} = 1 + i$$

$$\sqrt[5]{2} - 1 = i$$

$$i \approx 0.149$$

**To be indifferent between 2 dollars in 5 years and 1 dollar today, we would need to have a discount rate of**

~ 14.9%

# Discounted Value of Education

## Why do we care about discount rates when thinking about economic development?

- Why might someone with a lower income have a higher discount rate?
  - If you are very worried about your current situation, the value you place on something in the distant future is very small
- Consider a subsistence farmer:
  - Do they send their children to school, which will pay off later in their lives (and allow them to take care of their parents)?
  - Or do they keep them at home to help farm the land, which will pay off tomorrow?
- Clearly, income and discount rates are **negatively correlated**

# Investing in Education

Hopefully you can see why **saving and investing** is a difficult decision to make

But thankfully, when possible, progress has been made

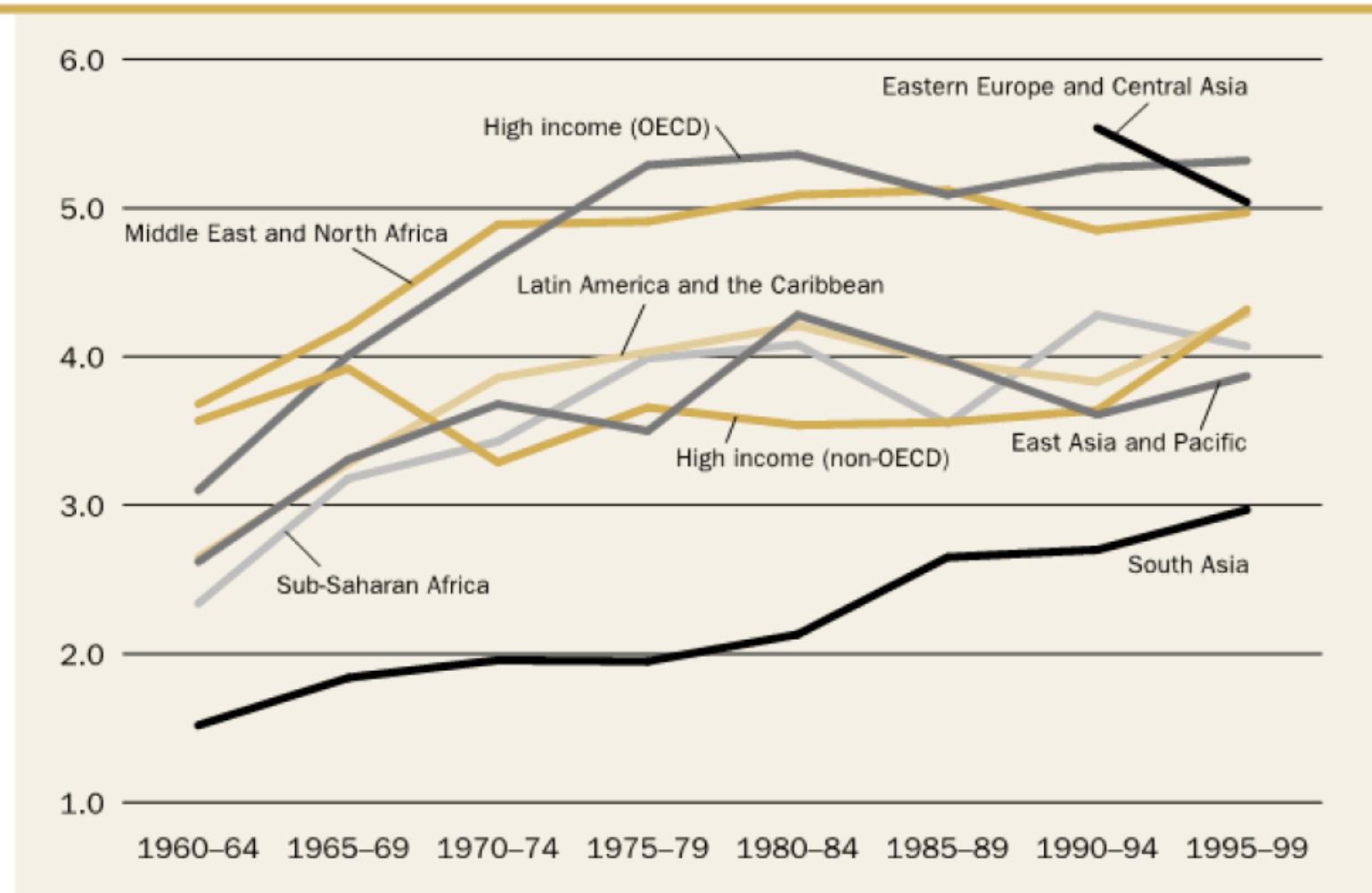
- There might be more pressing matters that require resources
- Solely based on expected return value, it **might not be worth it**
- If we do **invest**, what's truly to say things will pay-off as we expect?

# Improvements in Education

**Figure 3.1**  
**Public spending on education has risen in the past 40 years, but it varies widely across regions**

Percent of GDP, five-year averages, 1960–99

Source: World Bank 2002.



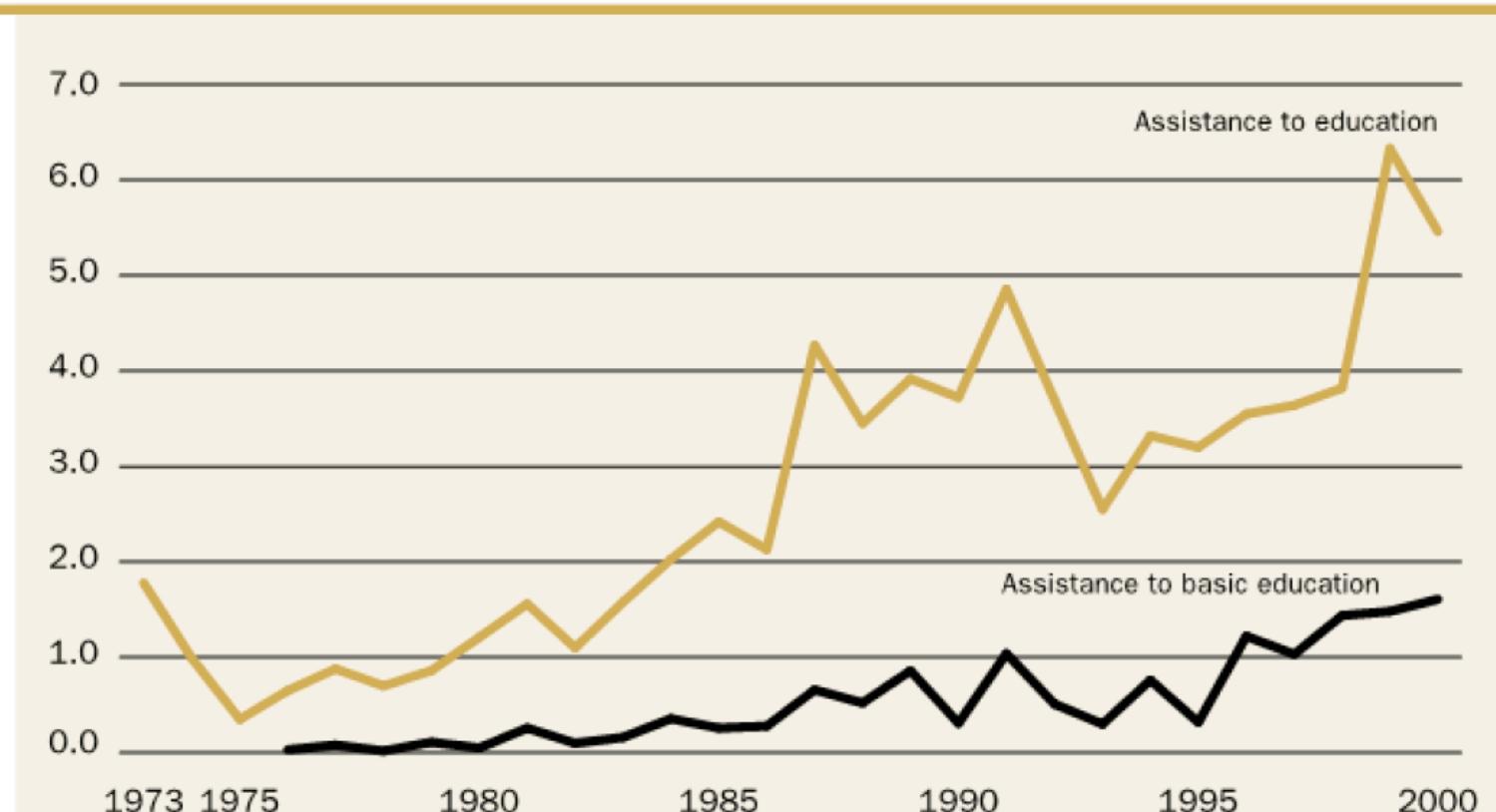
# Improvements in Education

**Figure 3.2**

**Bilateral official development assistance for education has risen, too**

*Share of developing countries' aggregate GDP (%)*

Source: OECD Creditor Reporting Service.



# Improvements in Education

**Table 4.1**

**Primary completion rates, by region and gender, 1990 and 2000**  
Percent

Note: Figures are population-weighted averages.

a. For some countries the last available year is 1999.

Source: Bruns, Mingat, and Rakotomalala 2003, based on World Bank database on primary school completion.

Region	1990			2000 <sup>a</sup>		
	Girls	Boys	Total	Girls	Boys	Total
East Asia and the Pacific	92	97	96	98	98	97
Europe and Central Asia	85	95	90	93	95	93
Latin America and the Caribbean	71	64	69	85	81	83
Middle East and North Africa	71	84	78	78	86	83
South Asia	59	77	68	63	84	74
Sub-Saharan Africa	43	57	50	46	56	51
All developing countries	65	79	73	76	85	81

# Social Versus Private Benefits and Costs

**Education plays a key role in the ability of a developing country to absorb modern tech and develop the capacity for self-sustaining growth and development**

**And like much of everything else, there are cost, benefits, and spillovers to consider**

- We try to alter the **incentives** of individuals to get them to pursue more education
- However, the **optimal education decision** for an individual does not necessarily correspond to the **socially optimal level of education**

# Social Versus Private Benefits and Costs

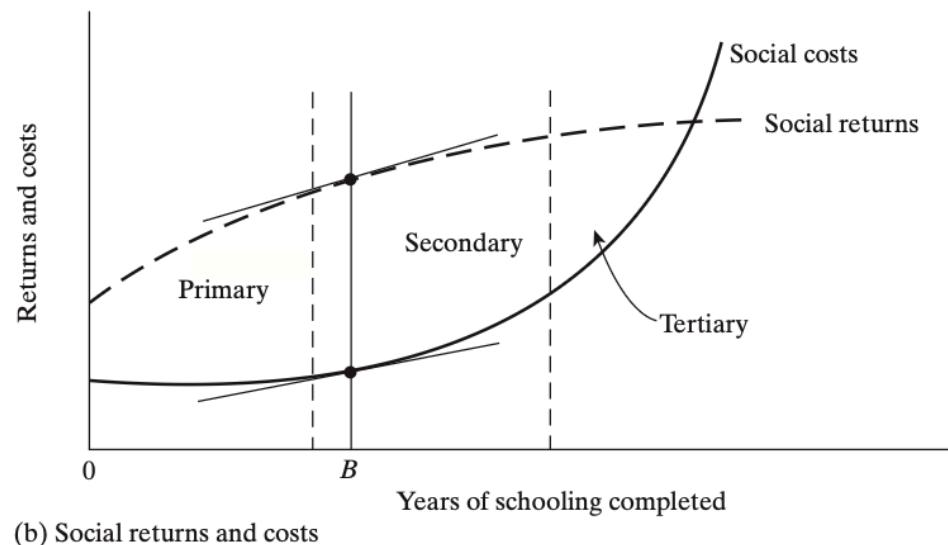
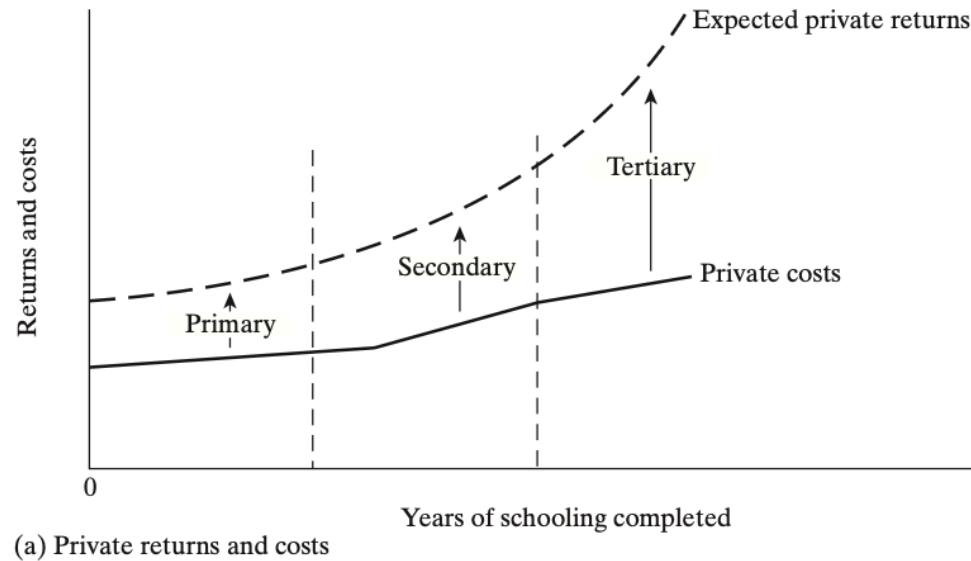
**Private (individual)** returns grow faster than **social returns**

- Individuals benefit from education by earning more money and gaining higher quality skills
- Society only benefits from part of the individual's increased income and education

**Social costs** grow more quickly than private costs

- **Higher cost of capital** and recurrent costs of higher education (post-primary) is very costly
- Subsidization of higher education reduces costs for individuals and increases costs for society

# Private and Social Benefits



# Private and Social Benefits

- Optimal education choice happens when:

**slope of returns and slope of costs are the same**

**marginal benefit = marginal cost**

Given our setup, this means that the **socially optimal level of education** is less than **individually optimal level of education**

- This is why the Millennium Development Goal focuses on **Primary Education**, not university education

# Education Has Increased

- In 1990, half of the world's countries had achieved universal primary education, up from 28% in 1960
- Median primary enrollment increased from 80% to 99% in 1990
- Median secondary enrollment rates have increased from 13% in 1960 to 45% in 1990
- In 1960, 29 countries had no college students and by 1990 only 3 had no college students

# Has Education Failed?

Despite these advances in availability of education, the growth effects have been disappointing

- At the very least, they have been less than expected
- Studies have concluded that although education is important, there is a weak association with growth

# What's the lesson here?

- **We are good at controlling specific outcomes**
  - We know how to increase test scores
  - We know how to increase enrollment rates
- **But we are not very good at generating growth through education**
  - It could be that education has strong complementarities with other institutions/services
    - Health, Safety, Environment, etc.

But **maybe we shouldn't only worry about growth**, education improves well-being nonetheless

# Child Labor

# The Children DO NOT Yearn for the Mines

This is an **unfortunately** widespread problem in developing countries

When children under the **age of 15 work**:

- Time working disrupts time in school **and in some cases prevents them from going altogether**
- The health of child workers are significantly worse
  - This can cause **physical stunting** which is very common
- They are subject to cruel and exploitative working conditions

# Child Labor

**Definition: Either under the minimum age for work (usually 15 years old) or up to 17 years of age, and engaged in work that poses a threat to their health, safety, or morals, or are subject to conditions of forced labor**

According to the **International Labor Organization (ILO)**, as of 2015 there are:

- **152 million** children classified as “**child laborers**”
- 48% are reportedly just 11 years or younger
- 73 million were found to be doing some hazardous work that directly endangers their **health, safety, and moral development**

# Child Labor

## Geographical concentration

- Africa and the Asia and Pacific region account for about 90% of all child labor
- 71% work in agriculture, 12% in industry, 17% in services

## Working Conditions

# Child Work vs Leisure Time

In some cases, work time comes from the child's **leisure time** instead of school time

- Recall not many child workers attend school
- Even if they do go to school, child labor will:
  - Reduce time for homework
  - Cause the child to be tired at school, resulting in losing the benefit of being in school being less
  - Likely cause them to drop out sooner than otherwise

# Ban on Child Labor

It is not obvious that an **immediate ban** would be in the best interest for the child

- Without the ability to work, a child may lose valuable income, which may cause them to be severely malnourished
  - With work (wages), school fees may become accessible
  - Basic nutrition is more likely
  - Health care may become available to them

But there is a set of circumstances under which both the child and the family **benefit unambiguously** from a ban:

## Multiple Equilibria

# Ban on Child Labor - Multiple Equilibria

Let's model child labor

We first make two assumptions:

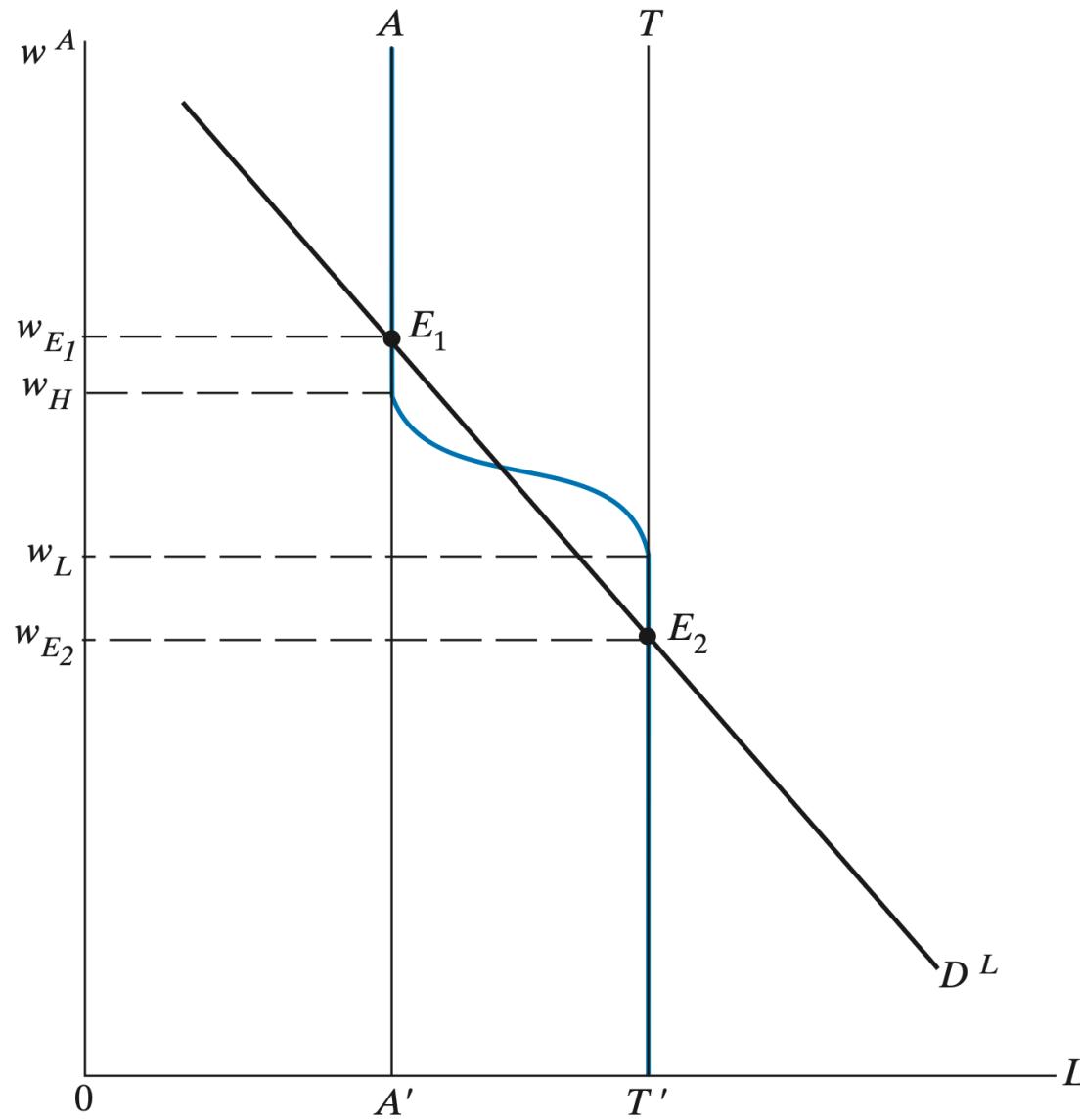
**1.** A household with a sufficiently high income **would not** send its children to work

- As expected, there is strong evidence that this is true

**2.** A child's and adult labor are **substitutes**

- In reality, children are not as productive as adults and adults can do any work that children can do
- A frequent rationalisation for child labor often said is that children have special productive abilities, such as small fingers [Video](#)

# Ban on Child Labor - Multiple Equilibria



# Health

# Health and Development

A key set of questions are:

**Does bad health explain low incomes in developing nations?**

or

**Does low income explain bad health in developing nations?**

- Both are true and a lot of effort has been given to untangling them

# Scale of Health

Some problems seem **very large (e.g. Malaria, HIV/AIDS)**, there are also many fairly easy and effective solutions

- Many health problems can be prevented or solved with simple solutions like:
- Clean water, Bleach, Condoms, Bed Nets, etc.

## Why are they underutilized?

- Information and Misperceptions
- Behavioral Biases
- Liquidity Constraints and Small Costs
- Social and Cultural Norms
- Public Good and Externalities Problems
- Weak Institutions and Delivery

# Health “Solutions” Take-Up Challenges

## 1. Information and Misperceptions

- Many people are **not fully aware** of the health benefits or proper use of interventions
- Misconceptions, such as chlorine being harmful or mosquitos only bite during the day, **reduce adoption**
- Benefits are often **invisible**

# Health “Solutions” Take-Up Challenges

## 2. Behavioral Biases

- Things like **present bias** exist. People heavily discount future benefits and with reason.
- Fighting against **inertia and habits**
- **Low salience:** Health prevention efforts do not feel urgent until someone falls sick

# Health “Solutions” Take-Up Challenges

## 3. Constraints and Small Costs

- Even if **interventions are affordable**, the **upfront cost** can be a binding constraint for households with tight income flows
- The existence of **seasonal or uncertain income streams** means

# Health “Solutions” Take-Up Challenges

## 4. Social and Cultural Norms

- Things like condom use or menstrual products may face **stigma** in the household or society
- Traditional beliefs or social hierarchies may discourage the use of **“foreign”** or modern health products

# Health “Solutions” Take-Up Challenges

## 5. Public Good and Externalities Problems

- Many preventive goods, such as bed nets or water chlorination, have **positive externalities**
  - If others use them, you benefit too
- This leads to **free-riding** and **private underinvestment**

# Health “Solutions” Take-Up Challenges

## 6. Weak Institutions and Delivery

- Health products may not reach remote areas reliably
- Weak institutions lead to things like **corruption and weak supply chains** which limit beneficial campaigns

# Gender Gap

# Education

Young females receive less education than young males in most low-income countries

- Large majorities of illiterate people and those unable to attend school are female
- This **educational gender gap** is greater in the least-developed countries in Africa and in South Asia
  - **Definition:** Male-female differences in school access and completion
- In higher-income countries, there is a trend of a significantly higher and growing share of female than male enrollment in university education
- This has begun extending to many upper-middle-income countries across the world

# Educational Gender Gap

Unsurprisingly, **educational discrimination against women** is an obstacle for **economic development**

It also reinforces **social inequality**

# Expanding Educational Opportunities for Women

Logically, increasing educational access to women is economically desirable. A non-exhaustive list of reasons:

- 1. Rate of return on women's education is higher than men's in most developing nations**
- 2. Increasing women's education has significant externalities**
- 3. Significant aid toward breaking out of vicious circles of poverty**

# Expanding Educational Opportunities for Women

Logically, increasing educational access to women is economically desirable. A non-exhaustive list of reasons:

## **1. Rate of return on women's education is higher than men's in most developing nations**

- Given that few women are enrolled in educational institutions, the next (marginal) girl to enroll is likely to be more talented (on average) than the marginal boy

## **2. Increasing women's education has significant externalities**

## **3. Significant aid toward breaking out of vicious circles of poverty**

# Expanding Educational Opportunities for Women

Logically, increasing educational access to women is economically desirable. A non-exhaustive list of reasons:

**1. Rate of return on women's education is higher than men's in most developing nations**

**2. Increasing women's education has significant externalities**

- Increases in education leads to more than just increases in productivity
- It also leads to greater labor force participation, later marriage, lower fertility, greatly improved child health and nutrition
- All of this benefits **the next generation too**

**3. Significant aid toward breaking out of vicious circles of poverty**

# Expanding Educational Opportunities for Women

Logically, increasing educational access to women is economically desirable. A non-exhaustive list of reasons:

- 1. Rate of return on women's education is higher than men's in most developing nations**
- 2. Increasing women's education has significant externalities**
- 3. Significant aid toward breaking out of vicious circles of poverty**
  - Women carry a disproportionate burden of poverty, we can think of education as a **binding constraint**
  - If we can ease access to education, we can expect to see greater development

# Health and Gender

Healthcare, generally worldwide, is **male-centered**

- Medical research and treatment standards often based on **male physiology** → misdiagnosis for women
- **Health funding** favors male-dominant conditions and women's health is reduced to **reproduction**
- Limited access and agency, like cultural/societal norms, restrict women's mobility and decision-making
- There are **data gaps** as there is little sex-disaggregated health data which masks disparities

# “Missing Women” Mystery

There is a general bias toward boys in most cultures, which creates this phenomenon

- The number of women **is far lower than what would be expected** given natural birth and survival rates

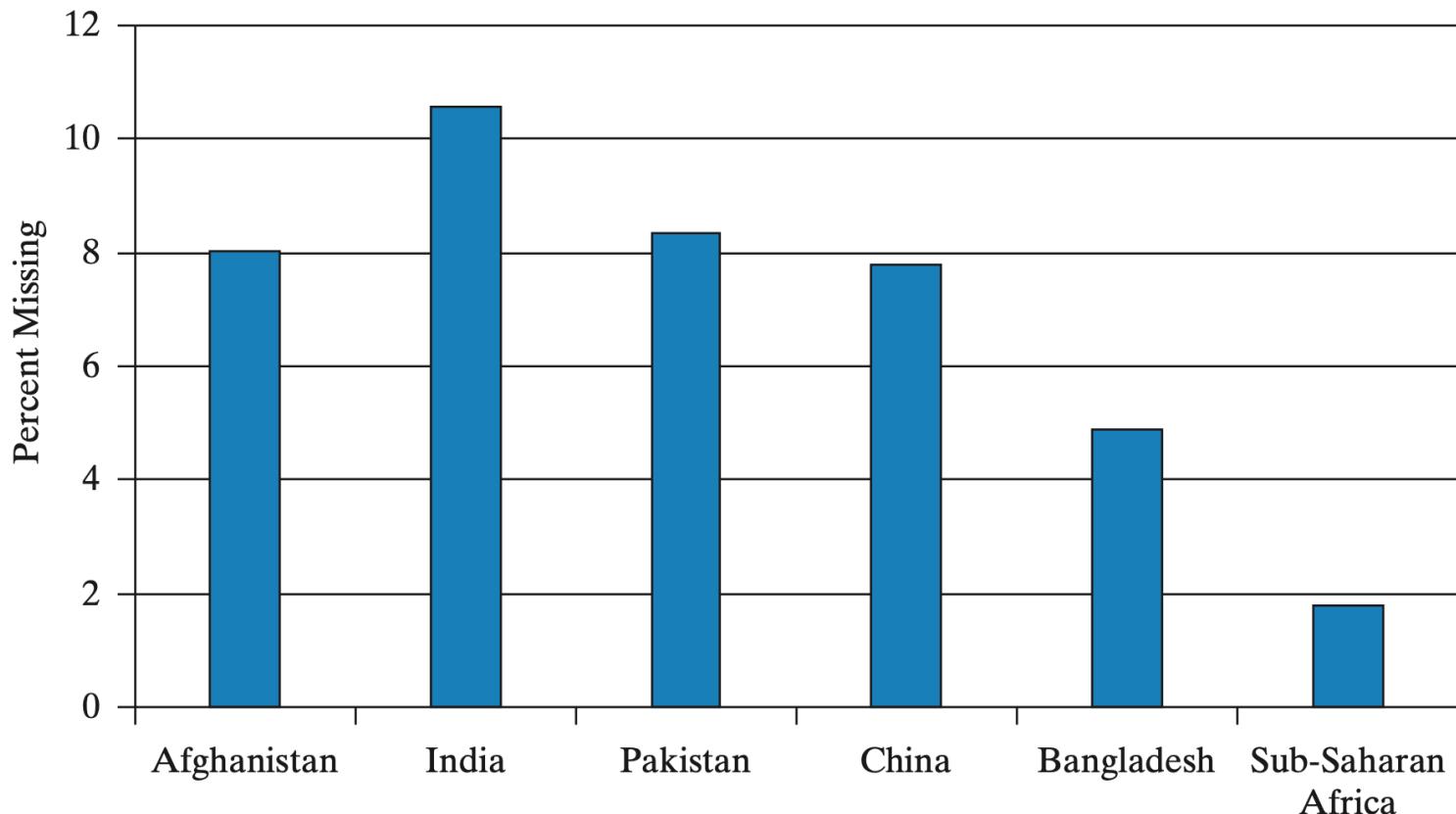
**Amartya Sen (1990)** coined the term and estimated that tens of millions of women are “**missing**” due to excess female mortality

# “Missing Women” Mystery

- **Natural Ratio:** Normally, there are slightly more women than men in a population because women tend to live longer
- **Observed Pattern:** In countries like India and China, the ratio is skewed toward men
- **Main Causes:**
  - **Sex-selective abortion**
  - **Girl's health neglect**
  - **Discrimination in access to healthcare**
- **Economic Implications:** Fewer women can **distort labor markets**,  
**marriage markets** ,**long-term demographics**

# “Missing Women” Mystery

FIGURE 8.6 Estimated Percentage of Women “Missing”



Source: United Nations, Department of Economic and Social Affairs, Population Division (2017)