

## Welfare Schemes and Social Protection in India

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### ABSTRACT

This paper provides a broad overview of welfare schemes in India and their impact on social protection during a period of high economic growth. It summarizes India's performance with respect to select economic and social indicators relative to select low and middle income countries in the Asia Pacific region. It further overviews trends in some key select economic and social indicators for India and discusses India's attainment in Social Protection relative to an index of such protection provided by the Asian Development Bank. The basic messages of this paper are as follows. (i) When compared to low and middle income countries in the Asia Pacific India's economic performance has outstripped its performance in social and welfare indicators. (ii) Despite this India is spending less on social welfare programs and other welfare schemes than many countries in the Asia Pacific, including some of those whose economic performance has been less impressive than India's. (iii) Finally, the paper argues that the efficiency and effectiveness of key welfare programs in India need to be substantially improved. Particular attention needs to be paid to female participation in and their access to social welfare programs.

JEL Classification Code: D63, H53, H55, I38

Keywords: Welfare Schemes, Social Protection, SPI, India

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## **I. Introduction**

Right from the dawn of independence Indian policymakers have professed to promote equitable economic development in the country. This has involved balancing economic growth with reduction in the acceleration of inequality and augmented social protection of the poor. The nomenclature for this growth strategy has changed and, in its current version, is called “inclusive growth”. Such a strategy has been enshrined in a number of official documents including the 12<sup>th</sup> Five Year Plan.

Both high economic growth and effectively functioning welfare schemes are central to the agenda of inclusive economic growth. Indeed there is a symbiotic relationship between the two. High economic growth both pulls up people from below the poverty line and generates additional resources for financing welfare schemes and thus provides social protection. Welfare schemes protect the poor and disadvantaged and equip the labor force in the lower rungs of the skill/economic welfare totem pole to better participate in the process of accelerating economic growth.

This paper provides a broad overview of welfare schemes in India and their impact on social protection during a period of high economic growth. It is organized as follows. Section II summarizes India’s performance with respect to select economic and social indicators relative to select low and middle income countries in the Asia Pacific region. Section III overviews trends in some key select economic and social indicators for India. Section IV discusses India’s attainment in Social Protection relative to an index of such protection provided by the Asian Development Bank. Section V concludes.

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## **II. India's Performance on economic and social indicators relative to Asia Pacific**

Table 1 ranks the (comparable) performance of select low and middle income Asia Pacific countries according to select economic and social welfare criteria.

### **Table 1 about here.**

With a GDPPPP per capita (GDPPPPPC) of \$3200 India was among the better economic performers in 2009. However, Viet Nam, Mongolia, and Kyrgyzstan had more physicians per 1000 people than India although these countries had lower GDPPPPPC than India. India's performance in terms of hospital beds per 1000 people was inferior to that of several countries that had lower GDPPPPPC, viz., Laos, Viet Nam, Nepal, Kyrgyzstan, Mongolia and Papua New Guinea. Viet Nam with a GDPPPPPC lower than India's had a lower Infant Mortality Rate (IMR). Maternal mortality rate was lower than India's in Nepal, Kyrgyzstan, Mongolia and Viet Nam, although each of these countries had lower GDPPPPPC than India's. In terms of underweight children under the age of 5, India's record is the poorest among all the countries in this set. Notwithstanding all this, only Burma spent less on health per unit GDP than India.

A number of key messages emerge from this account. First, India's economic performance has been robust. However, a number of countries with lower GDP PPPPC have outperformed India in terms of key social indicators. In particular, India lags behind all countries in this sample in the key area of nutrition of children under the age of 5. Children who suffer from growth retardation as a result of poor diets and/or recurrent infections tend to have a greater risk of suffering illness and death. Finally, despite this lackluster performance in key indicators of health and nutrition India spends less on health than any country in this sample.<sup>1</sup>

Clearly, firmer conclusions, than those possible from Table 1, can be drawn if we have comparable time series data for these countries. One can argue that the data reported in Table 1 can be misleading since they refer to just a snapshot of the data and it would be more pertinent. Table 2 presents suggestive evidence in respect of two key variables – GDP PPPPC and IMR.

**Table 2 here.**

A summary of the progress between 2000 and 2011 in respect of these variables is presented in Table 3. In view of the fact that declines in IMR from a high base are easier than from a low base India's performance does not appear to be outstanding. Indeed over this period Indian IMR fell and then actually rose before falling again.

**Table 3 here.**

### **III. Recent Progress in India's Economic and Social Indicators**

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<sup>1</sup> Health expenditures in Table 1 are broadly defined as activities performed either by institutions or individuals through the application of medical, paramedical, and/or nursing knowledge and technology, the primary purpose of which is to promote, restore, or maintain health.

In order to understand their evolution over time Table 4 reports key welfare and economic indicators of India since 1990.

**Table 4 here.**

A few key conclusions can be inferred from this Table 4. First, GDP per capita in 2005 PPP \$ almost trebled between 1209.8 in 1990 to 3223.3 in 2011. However, achievements in the areas of health/nutrition and education have been lagging behind. Further, females face a clear disadvantage in each of these areas. Thus, mortality rate for girls under the age of 5 (per 1000 live births) is uniformly higher than for boys under the age of 5. Data on weight for age for children under the age of 5 is available only for three years. In the latest year for which this data is available (2006) a smaller proportion of boys are undernourished as compared to girls. However, this relation reverses itself for the two previous years for which this data is available (1993 and 1999).

When it comes to literacy and education literacy for all females is lower than that for males. However, the literacy rate for female youth (those aged between 15 and 24 years) is higher than that for all females but still lower than that for male youth (those between 15 and 24 years). The ratio of girls to boys in primary school enrolment is lower than that for boys but ultimately catches up in the latest year for which this data is available (2008). However, enrolment and actual education are very different with the ratio of female pupils to male pupils in primary education consistently below 50 per cent. The ratio of females to males in secondary school enrolment is growing, but always less than 100 per cent. The ratio of females to males in tertiary enrolment is even lower. The pupil teacher ratio in primary schools is high at above 40 per cent but is lower for secondary schools.

On another note the percentage of persons with access to improved sanitation facilities increased from 18 in 1990 to 34 in 2010. Clearly this is inadequate progress since clean water and sanitation are essential to child health (Jalan and Ravallion, 2003).

Thus, despite a robust performance on the economic front India's achievements in the areas of health/nutrition and education has been inadequate, particularly for females. Notwithstanding this government expenditure in these areas has been, as noted earlier, lackluster. Public expenditure on education as a percentage of GDP fell from a high of 4.3 in 1999 and 2000 to 3.1 in 2005 and 2006 before rising marginally to 3.3 in 2010. Public spending on education as a proportion of total government expenditure fell from 12.7 per cent in 1998, 1999 and 2000 to 10 per cent in 2009 before rising slightly to 10.5 in 2010. Public expenditure on health is much lower at just over 1 per cent of GDP. Hence, more and more people are relying on private acquisition of health services. The same is true of education. There seems to be a gradual retreat of the public sector from these critical areas.

As is well known there are wide divergences between welfare indicators across Indian states. Table 5 shows that inequality and its persistence across states extends to more comprehensive indicators of human development (such as HDI) than income.<sup>2</sup>

**Table 5 here.**

#### **IV. Social Protection and Welfare in India**

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<sup>2</sup> In a similar vein Jha and Sharma (2013) have reported rising inequality using household data for the period 1993-94 to 2009-10.

It is against this background that social protection schemes in India should be evaluated. The government of India and various state governments run a plethora of social protection and welfare schemes. Too many to enumerate here these can be broadly classified under three headings: Social Insurance (SI), Social Assistance (SA) and Labor Market Programs (LMP). Broadly speaking SI consists of elements such as pensions, health insurance and unemployment insurance. SA has typically been split into six components: (i) social transfers in cash or kind, conditional or unconditional, (ii) in-kind transfers such as food subsidies targeting the poor<sup>3</sup> or vulnerable, subsidies for rural household construction programs (e.g. Indira Awaas Program), child welfare programs including school lunch programs, scholarships, particularly for poorer children and orphans, (iii) disaster relief programs particularly for persons displaced by flood, earthquakes, cyclones and the like, (iv) assistance to the elderly, (v) health assistance, e.g. to infants and expecting and new mothers, (vi) disability programs. Labor market programs consist of food for work programs, the National Rural Employment Guarantee Scheme and the like.

It would be useful to get an aggregate measure of India's expenditure on social protection compared to those other low and middle income countries in the Asia-Pacific region.

The Social Protection Index (SPI) is constructed by the Asian Development Bank (ADB 2013) to compare the ratio of total social sector expenditure to total intended beneficiaries. As discussed above, social sector spending consists of three elements: SI, SA and LMP. Thus, as a first approximation, Social Protection Index for country  $j$  is defined as

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<sup>3</sup> Thus, apart from the Targeted Public Distribution Scheme (TPDS) India has a number of food subsidy programs including the mid-day meal scheme, Annapurna scheme, Emergency Food Program and Rajiv Gandhi Program for Empowerment of adolescent girls.

$$\frac{(E_{SIj} + E_{SAj} + E_{LMPj})}{(B_{SIj} + B_{SAj} + B_{LMPj})}$$

where  $E$  represents expenditure and  $B$  represents the number of beneficiaries in each category, SA, SI and LMP.

However, since the data are expressed in national currencies comparison across countries could not be made (although comparison for the same country across time could be made since adjustment for price level changes is possible). Hence, it is necessary to normalize this ratio. To accomplish this ADB (2013) compares the value of the national poverty line for 35 countries in the Asia Pacific with respective GDP per capita. On average, it was found that the poverty line was about  $\frac{1}{4}$  of the GDP per capita. Hence, the final form of the Social Protection Index ( $SPI_j$ ) for country  $j$  is give as:

$$SPI_j = \left\{ \frac{(E_{SIj} + E_{SAj} + E_{LMPj})}{(B_{SIj} + B_{SAj} + B_{LMPj})} \right\} / [0.25 * GDPPC_j]$$

where  $GDPPC_j$  is GDP per capita of country  $j$  in US \$ terms.

Computations of SPI for 2009 are given in Table 6.

**Table 6 here.**

India's SPI is almost in the centre of the low/middle income countries included in the sample. However, Nepal, Maldives, Viet Nam, East Timor, Kyrgyzstan and Mongolia have higher SPI than India even though each of them has lower GDPPPPPC. Further, Kyrgyzstan, East Timor and Nepal have lower GDP PC in current prices than India but have better SPI. However, all countries that have higher SPI than India also spend a higher proportion of their GDP's on Social Protection.



Thus, two inferences can be made from Table 6. First, in India Social Protection is lagging behind GDP growth. Second, public expenditure on Social Protection has not kept pace with economic growth nor is it making a significant impact on India's SPI.

Another key point is the inefficiency of public expenditure in SPI areas. I take two examples here: the much touted National Rural Employment Guarantee Scheme (NREGS) and the Targeted Public Distribution Scheme (TPDS). The former is a key LMP program where the latter is a SA program.

Government of India's budget for 2012-13 set aside Rs. 40,000 crores for the NREGS. Although there has been earmarking of the class of projects to be undertaken no cost benefit analysis of these projects was ever done. So, there is no yardstick by which the impact of these projects can be assessed. In this context Jha and Gaiha (2012) use official data posted on the NREGS website to ask three key questions: a) how much benefits have accrued from this program to eligible workers, b) whether these benefits have persisted over time, and c) how much and what type of work was completed using labor employed in NREGS projects and how useful were they?

On all these scores the performance of the NREGS has been poor and, indeed, has deteriorated over time. Thus, for the country as a whole average person days of employment instead of being 100 days fell from 46.83 in 2009-10 to 32 in 2011-12. The percentage of households completing 100 days of employment during (none months each) of 2009-10 and 2011-12 went down sharply from 7.08 to 1.39. Further, while the share of planned expenditure actually spent went up the percentage of stipulated work fell.

Clearly, therefore, a considerable overhaul of the NREGS is necessary. This overhaul must occur at least two levels: First, explicit recognition must be given to the fact that NREGS is a safety net and not an alternative rural employment scheme. Hence, it is necessary to ensure that

only the neediest get access to it. Capture of NREGS jobs by more well off sections of the rural population may set in if wages under this program are set too high (Jha et. al. 2009). Second, considerable care needs to be exercised to ensure project selection is done effectively and NREGS funds are directed toward creating the infrastructure that they were intended for and which Indian villages sorely need.

The TPDS is notorious for its inefficiency, leakages, poor targeting of the poor and huge food subsidy bill. In 2010–11 the food subsidy bill jumped by 27 percent over the previous year to Rs 742.310 billion and has gone up again substantially. With the enactment of the Food Security Ordinance the bill for Food Security will climb even more steeply and, may indeed, become fiscally unsustainable.

Khera (2011) has indicated that there is considerable variation across states in the efficiency of the TPDS. With respect to the functioning of the TPDS, essentially leakages and some other characteristics revealed by household data over the period 1993–94 to 2004–05 India's states could be categorized into three groups: (i) functioning (all the southern states, Himachal Pradesh, and Maharashtra); these states performed well in both time periods (ii) reforming (Chattisgarh, Madhya Pradesh, Orissa and Uttar Pradesh; the performance of these states improved between 1993-94 and 2004-05 and (iii) languishing (mostly eastern states including Bihar, West Bengal and Jharkhand); the performance of these states remained unsatisfactory in both time periods. The improved performance of the 'reforming' states was the result of two factors: (a) increased food subsidy contribution from the Central government, and (b) a rising gap between the open market price and the TPDS price of foodgrains which led to increased off-take from TPDS. In this context Jha et. al. (2013) show using more recent data for Rajasthan, Andhra Pradesh and

Maharashtra that the real income transferred through TPDS is a small fraction of the actual subsidy and that transactions costs are very high.

Reform of TPDS is contingent on enhancing incentives for Fair Price Shop Owners to increase supplies available through their shops. The single most significant step that can be taken to ensure this is to increase the margin the shop owners get to keep from their TPDS sales.

Currently, these margins are very small (Jha et. al. 2013). Further, access to Fair Price Shops needs to be improved and procurement, storage and distribution policies need to be revamped.

## **V. Conclusions and Implications**

This paper has evaluated India's performance with respect to select economic and social indicators relative to select low and middle income countries in the Asia Pacific region. It also reviews the recent evolution of key economic and social indicators in India and assesses social protection of India relative to those in low and middle income countries in the Asia Pacific region.

Several key conclusions emerge from the analysis. First, economic growth is important for social protection. Recent economic growth has had a significant effect on social indicators.

Nevertheless, the impact of high economic attainment on social and welfare indicators has been less pronounced than in some countries with less robust economic performance. Despite this India spends less on social and welfare policies than many countries in the Asia Pacific region.

To compound matters key areas of social and welfare expenditure are beset with serious inefficiencies. The analysis in this paper indicates the critical importance of improving access to social welfare programs for women and girls.

It is possible to improve the impact of economic growth on social and welfare indicators by addressing the core administrative and governance inefficiencies in social protection programs.

Thus, much can be achieved without large enhancement of social welfare budgets.

## References

Asian Development Bank (2013) *The Social Protection Index: Assessing Results for Asia and the Pacific*, Manila, Asian Development Bank.

CIA World Factbook (2013) Available at <https://www.cia.gov/library/publications/the-world-factbook/>  
Accessed 26<sup>th</sup> July 2013.

Institute of Applied Manpower Research and Planning Commission, Government of India (2011) *India Human Development Report: Towards Social Inclusion*, New Delhi: Oxford University Press.

Jalan, J. and M. Ravallion (2003) "Does Piped water reduce diarrhea for children in rural India" *Journal of Econometrics*, vol. 112, no. 2, 153-173.

Jha, R., Gaiha, R., Bhattacharyya, S. and S. Shankar (2009) 'Capture' of anti-poverty programs: An Analysis of the National Rural Employment Guarantee Scheme in India *Journal of Asian Economics*, vol. 20, no.3., pp. 456-464.

Jha, R. and R. Gaiha (2012) "NREGS: Interpreting the Official Statistics" *Economic and Political Weekly*, vol. 47, no. 40, pp. 18-22.

Jha, R. and A. Sharma (2013) Poverty and Inequality: Redesigning Intervention in *Handbook of the Indian Economy in the 21<sup>st</sup> Century: Understanding the Inherent Dynamism*, (ed.) Ashima Goyal, New Delhi: Oxford University Press, forthcoming 2013.

Jha, R., Gaiha, R., Pandey, M. and N. Kaicker (2013) Food Subsidy, Income Transfer and the Poor: A Comparative Analysis of the Public Distribution System in India's States" *Journal of Policy Modeling*, forthcoming, <http://dx.doi.org/10.1016/j.jpolmod.2013.01.002>

Khera, R. (2011) India's Public Distribution System: Utilisation and Impact, *Journal of Development Studies*, vol. 47, no.7, pp. 1038-1060.

**Table 1: Performance of select low and middle income Asian countries in select economic and welfare indicators**

Country	GDP PPP PC	Country	Phy	Country	HB	Country	IMR	Country	MMR	Country	UC<5	Country	HEGDP
Burma	1,100	Bhutan	0.02	Cambodia	0.1	Laos	77.82	Marshall Islands	NA	Fiji	NA	Burma	2
Nepal	1,200	Papua New Guinea	0.05	East Timor	0.1	Pakistan	65.14	Laos	470	Malaysia	NA	India	2.4
Bangladesh	1,600	East Timor	0.1	Bangladesh	0.4	Bangladesh	59.02	East Timor	300	Marshall Islands	NA	Marshall Islands	2.5
Cambodia	2,000	Vanuatu	0.12	Fiji	0.45	Cambodia	54.79	Pakistan	260	Vanuatu	NA	Pakistan	2.8
Kyrgyzstan	2,200	Cambodia	0.23	Burma	0.46	Azerbaijan	54.6	Cambodia	250	India	43.5	Papua New Guinea	3.1
Laos	2,300	Nepal	0.24	Philippines	0.5	Vanuatu	49.45	Bangladesh	240	Bangladesh	41.3	Bangladesh	3.4
Papua New Guinea	2,300	Laos	0.27	Indonesia	0.6	Bhutan	49.36	Papua New Guinea	230	East Timor	40.6	Philippines	3.8
East Timor	2,400	Indonesia	0.29	Pakistan	0.6	Burma	47.61	Indonesia	220	Nepal	38.8	Sri Lanka	4
Pakistan	2,400	Bangladesh	0.3	India	0.9	Nepal	47.46	Burma	200	Laos	31.6	Vanuatu	4
Marshall Islands	2,500	Thailand	0.3	Laos	1.2	Papua New Guinea	45.23	India	200	Pakistan	31.3	Kyrgyzstan	4.1
Viet Nam	2,900	Fiji	0.45	China	1.42	East Timor	40.65	Bhutan	180	Burma	29.3	Thailand	4.3
Mongolia	3,100	Burma	0.46	Vanuatu	1.69	Mongolia	39.88	Nepal	170	Cambodia	28.8	China	4.6
India	3,200	Sri Lanka	0.49	Bhutan	1.7	Kyrgyzstan	31.26	Vanuatu	110	Maldives	25.7	Bhutan	5.5
Philippines	3,300	Marshall Islands	0.56	Malaysia	1.82	India	30.15	Philippines	99	Sri Lanka	21.1	Indonesia	5.5
Indonesia	4,000	India	0.6	Thailand	2.2	Indonesia	29.97	Kyrgyzstan	71	Philippines	20.7	Maldives	5.6
Fiji	4,200	Malaysia	0.7	Maldives	2.6	Maldives	29.53	Mongolia	63	Viet Nam	20.2	Azerbaijan	5.8
Maldives	4,200	Pakistan	0.81	Marshall Islands	2.7	Marshall Islands	25.45	Maldives	60	Indonesia	19.6	Cambodia	5.8
Sri Lanka	4,500	Philippines	1.15	Viet Nam	2.87	Viet Nam	22.88	Viet Nam	59	Papua New Guinea	18.1	Nepal	5.8
Bhutan	4,700	Viet Nam	1.22	Sri Lanka	3.1	Philippines	20.56	Thailand	48	Bhutan	12	Laos	6.5
Vanuatu	5,300	China	1.42	Nepal	5	China	20.25	Azerbaijan	43	China	8.7	Viet Nam	7.2
China	6,700	Maldives	1.6	Kyrgyzstan	5.06	Sri Lanka	18.57	China	37	Azerbaijan	8.4	Malaysia	8
Thailand	8,100	Kyrgyzstan	2.3	Mongolia	5.89	Thailand	17.63	Sri Lanka	35	Thailand	7	Mongolia	9.3
Azerbaijan	10,400	Mongolia	2.76	Azerbaijan	7.93	Malaysia	15.87	Malaysia	29	Mongolia	5.3	Fiji	9.7
Malaysia	13,800	Azerbaijan	3.79	Papua New Guinea	NA	Fiji	11.58	Fiji	26	Kyrgyzstan	2.7	East Timor	12.3

Notes: Source CIA World Factbook, GDP PPP PC=GDP per capita in PPP \$, Phy= Physicians per 1000 persons, HB= Hospital beds per 1000 persons, IMR = Infant mortality for <1 year per 1000 live births, MMR= deaths per 100000 live births, HEGD= health expenditure as percentage of GDP, UC<5 = the percent of children under five considered to be underweight. Underweight means weight-for-age is approximately 2 kg below for standard at age one, 3 kg below standard for ages two and three, and 4 kg below standard for ages four and five. All figures refer to 2009 except for Phy (Bhutan 2007, Cambodia 2008, East Timor 2004, Fiji 2003, India 2005, Indonesia 2007, Nepal 2004, Kyrgyzstan 2007, Malaysia 2008, Maldives 2007, Marshall Islands 2008, Laos 2005, Mongolia 2008, PNG 2008, Philippines 2004, Sri Lanka 2006, Thailand 2004, Vanuatu 2008, and Viet Nam 2008); HB(Azerbaijan

2007, Bangladesh 2005, Bhutan 2006, Burma 2008, Cambodia 2004, East Timor 2004, Fiji 2003, India 2005, Indonesia (2002), Kyrgyzstan 2007, Laos 2005, Maldives 2005, Nepal 2006, Philippines 2006, Sri Lanka 2004, Thailand 2002, Vanuatu 2008, and Viet Nam 2008); MMR reports 2010 figures for all countries; UC <5(Azerbaijan 2006, Bangladesh 2007, Bhutan 2008, Burma 2006, Cambodia 2008, China 2000, East Timor 2002, India 2006, Indonesia 2007, Kyrgyzstan 2006, Laos 2006, Maldives 2001, Mongolia 2005, Nepal 2006, Pakistan 2001, PNG 2005, Philippines 2003, Sri Lanka 2007, Thailand 2006, Viet Nam 2008).

**Table 2: GDP PPP per capita and Infant Mortality Rate Select Low and Middle Income Asian countries**

	Azerbaijan	Bangladesh	Bhutan	Bumar	Cambodia	China	East Timor	Fiji	India	Indonesia	Kyrgyzstan
2000GDPPPPPC	3,000	1,570	1,100	1,500	1,300	3,600			2,200	2,900	2,700
IMR2000	83.41	71.66	110.99	75.3	66.82	28.92		14.45	64.9	42.21	77.08
2001GDPPPPPC		1,750	1,200	1,500	1,500		500	5,200		3,000	2,800
IMR2001	83.08	69.85	108.89	73.71	65.41	28.08		14.08	63.19	40.91	76.5
2002GDPPPPPC	3,500	1,700	1,300	1,660	1,500	4,400		5,500	2,540	3,100	2,800
IMR2002	82.74	68.05	106.79	72.11	64	27.25	51.99	13.72	61.47	39.4	75.92
2003GDPPPPPC	3,400	1,900	1,400	1,800	1,900	5,000		5,800	2,900	3,200	1,600
IMR2003	82.41	66.08	104.68	70.35	75.94	25.26	50.47	13.35	59.59	38.09	75.34
2004GDPPPPPC	3,800	2,000		1,700	2,000	5,600	400	5,900	3,100	3,500	1,700
IMR2004	82.07	64.32	102.56	68.78	73.67	25.28	48.86	12.99	57.92	36.82	36.81
2005GDPPPPPC	5,400	2,100		1,700	2,500	6,800	800	5,900	3,400	3,600	2,000
IMR2005	81.74	62.6	100.44	67.24	71.48	24.18	47.41	12.62	56.29	35.6	35.64
2006GDPPPPPC	7,500	2,300		1,800	2,700	7,700		6,200	3,800	3,900	2,100
IMR2006	79	60.83	98.41	61.85	68.78	23.12	45.89	12.3	54.63	34.39	34.49
2007GDPPPPPC	8,000	1,400	5,200	1,900	1,900	5,400	2,500	3,900	2,600	3,600	2,000
IMR2007	58.31	59.12	96.37	50.68	58.45	22.12		11.99	34.61	32.14	33.38
2008GDPPPPPC	9,500	1,500	5,200	1,200	2,000	6,000	2,300	3,800	2,900	3,900	2,200
IMR2008	56.43	57.45	51.92	49.12	56.59	21.16	41.98	11.88	32.31	31.04	32.3
2009GDPPPPPC	10,400	1,600	4,700	1,100	2,000	6,700	2,400	4,200	3,200	4,000	2,200
IMR2009	54.6	59.02	49.36	47.61	54.79	20.25	40.65	11.58	30.15	29.97	31.26
2010GDPPPPPC	10,900	1,700	5,500	1,400	2,100	7,600	2,600	4,400	3,500	4,200	2,200
IMR2010	52.84	52.54	46.92	50.76	56.94	16.51	39.32	11.28	49.13	28.94	30.25
2011GDPPPPPC	10,300	1,700	6,200	1,300	2,200	8,500	8,800	4,700	3,700	4,700	2,400
IMR2011	51.08	50.73	44.48	49.23	55.49	16.06	38.01	11	47.57	27.95	29.27
IMR2012	28.76	48.99	42.17	47.74	54.08	15.62	36.78	10.73	46.07	26.99	30.78

Notes: Source: CIA World Book, GDPPPPPC=Per capita PPP GDP in US\$, IMR = child deaths <5 years per 1000 live births.



	Laos	Malaysia	Maldives	Marshall Islands	Mongolia	Nepal	Pakistan	Papua New Guinea	Philippines	Sri Lanka	Thailand	Vanuatu	Viet Nam
2000GDPPPPPC	1,700	10,300	1,360		1,780	1,360	2,000	2,500	3,800	3,250	6,700	1,300	1,950
IMR2000	94.8	20.96	65.52	40.95	41.22	75.93	82.49	59.89	29.52	16.51	31.48	62.52	31.13
2001GDPPPPPC	1,630	9,000	1,400	1,600	1,770	1,400	210	2,400	4,000	3,250	6,600		2,100
IMR2001	92.89	20.31	63.72	39.82	53.5	74.14	80.5	58.21	28.7	16.08	30.49	61.05	30.24
2002GDPPPPPC	1,700	9,300	1,400		1,840	1,400		2,300	4,200	3,700	6,900		2,250
IMR2002	90.98	19.66	61.93	38.68	51.97	72.36	78.52	56.53	27.87	15.65	29.5	59.58	29.34
2003GDPPPPPC	1,700	9,000	1,400		1,800	1,400	2,100	2,200	4,600	3,700	7,400	2,900	2,500
IMR2003	88.94	19	60.13	31.58	57.16	70.57	76.53	54.84	24.98	15.22	21.83	58.11	30.83
2004GDPPPPPC	1,900	9,700	1,500		1,900	1,500	2,200	2,200	5,000	4,000	8,100	2,900	2,700
IMR2004	87.06	18.35	58.32	30.5	55.45	68.77	74.43	53.15	24.24	14.78	21.14	56.63	29.88
2005GDPPPPPC	2,000	12,000	1,400	2,900	1,900	1,400	2,400	2,600	4,700	4,300	8,600		2,800
IMR2005	85.22	17.7	56.52	29.45	53.79	66.98	72.44	51.45	23.51	14.35	20.48	55.16	25.95
2006GDPPPPPC	2,100	12,900	1,500		2,100	1,500	2,600	2,700	5,000	4,700	9,200		3,100
IMR2006	83.31	17.16	54.89	28.43	52.12	65.32	70.45	49.96	22.81	13.97	19.49	53.8	25.14
2007GDPPPPPC	2,000	14,500	1,000		2,900	1,000	2,400	2,100	3,200	4,000	8,000	3,900	2,600
IMR2007	81.44	16.62	53.25	27.3	42.65	63.66	68.84	48.46	22.12	19.45	18.85	52.45	24.37
2008GDPPPPPC	2,100	15,200	1,100	2,500	3,200	1,100	2,500	2,200	3,300	4,300	8,400	4,600	2,800
IMR2008	79.61	16.39	30.63	26.36	41.24	62	66.94	46.67	21.2	19.01	18.23	50.77	23.61
2009GDPPPPPC	2,300	13,800	1,200		3,100	1,200	2,400	2,300	3,300	4,500	8,100	5,300	2,900
IMR2009	77.82	15.87	29.53	25.45	39.88	47.46	65.14	45.23	20.56	18.57	17.63	49.45	22.88
2010GDPPPPPC	2,500	14,700	1,200		3,600	1,200	2,500	2,500	3,500	5,000	8,700	5,100	3,100
IMR2010	61.19	15.5	28.47	24.57	38.56	46	65.32	44.59	19.94	18.14	16.71	48.17	21.57
2011GDPPPPPC	2,700	15,800	1,300		4,800	1,300	2,800	2,600	4,100	5,700	9,500	5,000	3,400
IMR2011	59.46	15.02	27.45	23.74	37.26	44.54	63.26	43.29	19.34	9.7	16.39	46.85	20.9
IMR2012	57.77	14.57	26.46	22.93	36	43.13	61.27	42.05	18.75	9.47	15.9	45.57	20.24

Notes: Source: CIA World Book, GDPPPPPC=Per capita PPP GDP in US\$, IMR = child deaths <5 years per 1000 live births.

**Table 3: Change in GDPPPPPC and IMR over 2000-2011 in Select Low and Middle Income countries in Asia.**

Country	Change in GDPPPPPC (per cent)	Change in IMR (per cent)
Azerbaijan	243.3	-38.76
Bangladesh	8.28	-29.20
Bhutan	463.6	-59.92
Cambodia	69.23	-16.95
China	136.11	-44.46
India	68.18	-26.70
Indonesia	62.06	-33.78
Kyrgyzstan	-11.11	-62.02
Laos	58.82	-37.28
Malaysia	53.39	-28.34
Maldives	-4.41	-58.1
Mongolia	169.66	-9.60
Nepal	-4.41	-41.34
Pakistan	40	-23.3
Papua New Guinea	4	-27.71
Philippines	7.89	-34.48
Sri Lanka	75.38	-41.24
Thailand	41.79	-47.93
Vanuatu	284.61	-25.06
Viet Nam	74.35	-32.86

Source: Same as in Table 2 and author' calculation.



**Table 4: Select Economic and Welfare Indicators for India since 1990**

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	
GER																	3.5	3.5	3.5	3.5	3.5	3.5	3	
GDP																								
PC	1702	1685	1742	1789	1872	1976	2086	2131	2223	2370	2423	2501	2558	2718	2887	3107	3346	3620	3708	3966	4324	4535		
CR	4.95	5.25	4.65	5.33	0.96	0.77	1.83	6.09	6.26	4.14	3.88	7.21	1.23	4.13	1.19	9.92	0.33	9.97	5.27	7.85	7.15	9.77		
GDP																								
PCP	1209.	1197.	1238.	1271.	1330.	1404.	1482.	1514.	1580.	1684.	1722.	1777.	1817.	1931.	2051.	2208.	2377.	2573.	2635.	2818.	3073.	3223.		
PP	8	7	2	6	3	2	4	7	1	4	09	7	8	7	6	5	7	1	3	8	2	3		
LRYF		49.3										67.7					74.3							
LRAF		33.7										47.8					50.8							
LRY																								
M		73.5										84.2					88.4							
LRA																								
M		61.6										73.4					75.2							
RFM																								
P	74.0	76.3	77.3	80.4	81.2	81.4	82.3	83.1	84.0	83.7	84.2	85.0	86.6	96.4	96.4	95.9	95.3	96.8	100.0					
PEP																								
F	40.7	41.4	41.7	42.6	42.9	42.9	43.2	43.4	43.6	43.5	43.6	43.8	44.2	46.8	46.8	46.7	46.6	47.0	47.8					
RFM				62.6	64.2	64.2	64.7	66.8		70.3	71.0	71.6	74.4	80.5	80.7	82.2	83.3	85.7	88.0	91.3	91.8			
S																								
RFM																								
T	52.4	53.9				57.1	61.2	61.8			65.8	68.3	69.6	67.8	67.1	70.6	72.1	69.8		68.5	72.6			
PTR																								
P										35.4	40.0	40.1	40.7	41.3	40.2									
PTR																								
S										33.6	33.6	33.4	32.3	32.3	32.7					25.1	25.3			
PSE																								
GE									12.6	12.7	12.7			10.7						10.0	10.5			
PSE																								
GDP								2.8	3.5	4.3	4.3			3.6	3.3	3.1	3.1			3.2	3.3			
MR<																								
5	114.2	111.5	109.0	106.6	104.0	101.4	98.5	95.8	93.2	90.5	87.7	85.0	82.4	79.6	77.2	74.6	72.3	70.0	67.7	65.5	63.4	61.3		
MR<																								
5F	119.3	116.5	113.9	111.4	108.7	106.0	102.9	100.1	97.4	94.6	91.6	88.8	86.1	83.2	80.7	77.9	75.5	73.1	70.7	68.4	66.2	64.1		
MR<																								
5M	109.5	106.9	104.5	102.2	99.7	97.2	94.4	91.8	89.3	86.7	84.1	81.5	79.0	76.3	74.0	71.5	69.3	67.1	64.9	62.8	60.8	58.8		
ISF	18.0	18.0	19.0	20.0	20.0	21.0	22.0	23.0	24.0	25.0	25.0	26.0	27.0	28.0	29.0	30.0	31.0	31.0	32.0	33.0	34.0			
M<5																								
F			48.8								43.8						43.9							
M<5																								
M			52.4								45.0						43.1							
M<5																								
T	59.5		50.7					41.1		44.4							43.5							
PHE						3.0	2.9	3.2	3.2	2.9	3.2	3.4	3.4	3.3	3.6	3.3	3.1	2.9	2.9	2.9	2.7	2.7		

PUH						1.0	1.0	1.1	1.1	1.1	1.1	1.1	1.0	1.0	0.9	0.9	0.9	1.0	1.0	1.1	1.1	1.2
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Notes: Source: World Development Indicators 2013, The World Bank, GER = Gender Equality Rating (1 Low, 6 High), GDPPC=GDP per capita constant rupees (annual), GDPPCPPP = GDP per capita PPP in 20005 US\$, LRYF = literacy rate among female youth 15-24, LRAF = Literacy rate among females >15, LRYM= literacy rate among male youth 15-24, LRAM=literacy rate among male >15, RFMP=ratio of females to males in primary school enrolment, RFMS= ratio of females to males in secondary school enrolment. RFMT=ratio of females to males in tertiary enrolment, PEPF= primary education pupils % female, PTRP= pupil teacher ratio primary school, Pupil teacher ratio secondary school, PSEGE=public spending on education as percentage of government expenditure, PSEGDP=public sector spending on education as percentage of GDP, MR<5 = mortality rate for children under 5 per 1000 live births, MR<5F = mortality rate for girls under 5 per 1000 live births, MR<5M = mortality rate for boys under 5 per 1000 live births, ISF= Improved sanitation facilities, population with access, M<5F = malnutrition (weight for age) for girls <5, M<5M = malnutrition (weight for age) for boys <5, M<5T = malnutrition (weight for age) for all children <5, PHE=private health expenditure as percentage of GDP, PUH= public health expenditure as percentage of GDP.

**Table 5: Ranking of States according to HDI Value**

State	HDI 1999-200	HDI 2007-08	Rank 1999-2000	Rank 2007-08
Kerala	0.677	0.790	2	1
Delhi	0.783	0.750	1	2
Goa	0.581	0.652	4	3
Punjab	0.595	0.617	3	4
NE (excluding Assam)	0.543	0.605	5	5
Maharashtra	0.501	0.572	6	7
Tamil Nadu	0.480	0.570	8	8
Haryana	0.501	0.552	7	9
Jammu and Kashmir	0.465	0.529	11	10
Gujarat	0.466	0.527	10	11
Karnataka	0.432	0.519	12	12
West Bengal	0.422	0.492	13	13
Uttarakhand	0.339	0.490	16	14
Andhra Pradesh	0.368	0.473	15	15
Assam	0.336	0.444	17	16
Rajasthan	0.387	0.434	14	17
Uttar Pradesh	0.316	0.380	18	18
Jharkhand	0.268	0.376	23	19
Madhya Pradesh	0.285	0.375	20	20
Bihar	0.292	0.367	19	21
Orissa	0.275	0.362	22	22
Chattisgarh	0.278	0.358	21	23
All India	0.387	0.467		

Source: Institute of Applied Manpower Research and Planning Commission (2011)

**Table 6: Social Protection Index, Social Protection Expenditure and GDP PPP Per capita for select low and middle income countries of the Asia Pacific for 2009**

Country	SPI	Country	SPEGDP	Country	GDPPPPPC	Country	GDP PC in current prices \$
Papua New Guinea	0.005	Papua New Guinea	0.1	Malaysia	13,800	Malaysia	6915
Cambodia	0.02	Vanuatu	0.7	Azerbaijan	10,400	Maldives	6174
Vanuatu	0.025	Laos	0.9	Thailand	8,100	Azerbaijan	5018
Laos	0.026	Cambodia	1	China	6,700	Thailand	4151
Bhutan	0.036	Bhutan	1.2	Vanuatu	5,300	China	3734
Bangladesh	0.043	Indonesia	1.2	Bhutan	4,700	Fiji	2945
Indonesia	0.044	Pakistan	1.3	Sri Lanka	4,500	Vanuatu	2471
Pakistan	0.047	Bangladesh	1.4	Fiji	4,200	Indonesia	2335
India	0.051	Fiji	1.7	Indonesia	4,000	Sri Lanka	2057
Fiji	0.06	India	1.7	Philippines	3,300	Bhutan	1852
Nepal	0.068	Nepal	2.1	India	3,200	Philippines	1746
Maldives	0.073	Philippines	2.5	Mongolia	3,100	Mongolia	1692
Philippines	0.085	Maldives	3	Viet Nam	2,900	Papua New Guinea	1226
Thailand	0.119	Sri Lanka	3.2	East Timor	2,400	Viet Nam	1130
Sri Lanka	0.121	Thailand	3.6	Pakistan	2,400	India	1043
Viet Nam	0.137	Malaysia	3.7	Laos	2,300	Pakistan	926
China	0.139	Viet Nam	4.7	Papua New Guinea	2,300	Laos	904
East Timor	0.14	China	5.4	Kyrgyzstan	2,200	Kyrgyzstan	871
Kyrgyzstan	0.151	East Timor	5.9	Cambodia	2,000	Cambodia	731
Malaysia	0.155	Azerbaijan	6.1	Bangladesh	1,600	East Timor	710
Azerbaijan	0.187	Kyrgyzstan	8	Maldives	1,200	Bangladesh	617
Mongolia	0.206	Mongolia	9.6	Nepal	1,200	Nepal	463

Source : Asian Development Bank and CIA World Fact Book. SPI = Social Protection Index, SPEGDP = Social Protection expenditure as percentage of GDP, GDPPPPC=GDP per capita in PPP dollars, GDP PC in current prices = GDP per capita in US\$ in current prices.

