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# An Impact of Social Sector Expenditure on IMR and GER in Non- Special Category States of India During 2006-07 To 2020-21

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#### Abstract

Economic and social transformations are essential components for economic development and social variables for the measurement of economic development have emerged as important indicator. That's why this paper "An impact of Social Sector Expenditure on IMR and GER in Non- Special Category states of India during 2006-07 to 2020-21" has relevance in current scenario. The paper deals with the relationship between per capita health expenditure and IMR, per capita education expenditure and GER of 17 Non Special Category (NSC) states of India and negative and positive correlation has been found. The paper has been divided into- Introduction, Objectives, Methodology and Data sources, Analysis and Discussions and finally Conclusions of the study.

**Keywords:** GER-Gross Enrolment Ratio, IMR- Infant Mortality Rate, Social Sector Expenditure, Economic growth and Development.

### Introduction

Economic growth is a quantitative metric which is measured in terms of an economy's GDP growth while on the other hand, social development is quantitative and qualitative metrics both and as it refers to the population's overall well-being regarding education, health, freedom, capabilities and quality of life measures<sup>[1]</sup>. However, economic growth does not guarantee that the population or the economy as a whole is better off. Economic growth is a necessary but not a sufficient condition for development of the society and human beings. Development is a continuous process of social and economic changes <sup>[2]</sup>. Many theoretical studies underlined the linkages between economic growth and social sector expenditure like in the Endogenous Growth Models of Romer, Lucas, Barro and others, have focussed on the role of Human Capital Formation as it acts as the key agents of economic growth. For their enhancement, there is a need of heavy investment in the social sector of the economy for increasing efficiency and productivity of the human capital stocks. Development in the social sector leads to an increase in the capabilities of people, equipping them with enhanced labour productivity. This, in turn, boosts economic growth, and also the quality of life of the people.

<sup>&</sup>lt;sup>[1]</sup>Amartya Sen's Capability Approach.

<sup>&</sup>lt;sup>[2]</sup> Joseph Schumpeter's Theory of Economic Development (Introduced the concept of "creative destruction")



There is a positive correlation between the social sector expenditure and the development of individuals as well as for the society <sup>[3]</sup>. The expenditure on social service sectors in India comprises of various components such as education, health, urban and rural development, nutrition, sanitation, water availability and other protective and promotional measures<sup>[4]</sup>.

To make the discussion more focussed; this research paper mainly covers only two components of social sector expenditure- Education and Health Expenditure. For this, IMR is considered as an indicator of health status while on the other hand, GER (Primary GER and Secondary GER) is taken as an indicator of education performance. In this regard, there is a need to study the impact of Social Sector Expenditure on IMR and GER in 17 Non-Special Category states of India.

#### **Objective of the study**

- 1. To study the correlation between-
- a) Health Expenditure and IMR
- b) Education Expenditure and GER
- 1. Education Expenditure and Primary GER
- 2. Education Expenditure and Secondary GER
- 2. To check the variation of Primary GER, Secondary GER and IMR across the 17 NSC states of India during 2006-07 to 2020-21.

#### Methodology

This study is mainly an Analytical and Descriptive research in nature. The study is based upon the secondary data. The data has been collected from various sources: - Budget documents of the State governments, States Finances & some earlier issues from RBI Bulletin, Census of India, Sample Registration System Bulletin, Statistics of School Education, Statistics Division of Department of Higher Education (MHRD), National Statistical Office, Ministry of Statistics and Programme Implementation, Government of India and also from Occasional Papers of RBI <sup>[5]</sup>. Census data (2001 & 2011) has been taken to calculate the Per Capita social sector expenditure for different 17 states of India. In this study, 17 states (Andhra Pradesh, Bihar, Chhattisgarh, Goa, Gujarat, Haryana, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Orissa, Punjab, Rajasthan, Tamil Nadu, Uttar Pradesh and West Bengal) in India of non special category status have been taken for analysis. The periods of the study have been taken from 2006-07 to 2020-21 and the points of time for the study are 2006-07, 2011-12, 2015-16 & 2020-21. For the purpose of analytical study, statistical tools have been used for the measurement of mean (average), standard deviation and coefficient of variation. For computing decreasing rate of IMR (in %) for 17 NSC states, the method is percentage change in IMR in the year 2020-21 on the basis of 2006-07.

<sup>&</sup>lt;sup>[3]</sup> Iana Paliova, Robert McNown and Grant Nülle. (2019). *Multiple Dimensions of Human Development Index and Public Social Spending for Sustainable Development*.

 <sup>[4]</sup> Jennifer Rubin, Jirka Taylor, Joachim Krapels, Alex Sutherland, and et al. (2016). Are better health outcomes related to social expenditure? A cross-national empirical analysis of social expenditure and population health measures.
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<sup>&</sup>lt;sup>[5]</sup> Kaur, B. and Mishra, S. (2003). Occasional Paper of Reserve Bank of India, Vol 24, Nos 1 and 2, Summer and Monsoon.



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#### **Analysis and Discussion**

### a) Status of Per Capita Health Expenditure and IMR

Table: 1. per Capita Health Expenditure and IMR of 17 Non Special Category States

			Capi	ta	Health					Decreasi
S.N	States	Expenditure				IMR	ng rate			
0	States	2006-	2011-	2015-	2020-	2006-	2011-	2015-	2020-	of IMR
		07	12	16	21	07	12	16	21	(in %)
	Andhra Dradach	244.4	1113.	1056.	1948.	56	12	27	24	57.14
1	Andhra Pradesh	8	18	41	91	30	45	57	24	
	Dihar	150.3	1004.	2194.	4995.	60	4.4	42	27	55
2	Dinar	1	78	46	48	00	44	42	21	
	Chhattiagarh	221.5	822.8	2234.	3977.	61	19	41	29	37
3	Chinattisgarii	3	0	75	88	01	40	41	30	
	Con	1108.	1989.	2868.	6767.	15	11	0	5	66.67
4	Goa	71	75	46	71	15	11	9	3	
	Cuionat	213.5	1040.	2329.	3386.	52	41	22	22	56.60
5	Gujarai	2	11	07	07	33	41	33	25	
	Howson	218.9	787.2	1614.	3296.	57	4.4	26	20	50.88
6	Haryana	3	7	36	88	57	44	30	28	
	The outstand	360.3	1057.	2238.	3963.	40	20	20	25	48.98
7	Jnarkhand	1	33	64	09	49	39	32	25	
	Vamatalaa	245.6	925.6	1676.	3279.	48	35	28	10	60.42
8	Karnataka	6	9	82	20				19	
	Varala	392.1	1369.	2288.	3826.	15	10	10	C	60
9	Kerala	3	62	43	43	15	12	12	0	
	Madhya	177.4	909.4	2045.	3114.	74	50	50	12	41.89
10	Pradesh	8	9	21	99	/4	39	30	43	
	Maharashtra	241.4	857.5	1705.	2516.	25	25	21	16	54.29
11	Manarashtra	2	8	24	83	55	23	21	10	
	Odiaha	155.6	741.8	2104.	4330.	72	57	16	26	50.68
12	Ouisiia	9	8	28	59	15	57	40	30	
	Dunich	281.8	1680.	2342.	3479.	4.4	20	22	10	59.09
13	Fulljað	6	51	27	67	44	50	25	10	
	Dejecthen	224.5	1185.	2900.	4460.	67	50	12	22	52.24
14	Kajastilali	1	93	56	36	07	32	43	52	
	Tamil Nadu	245.0	939.2	1873.	3901.	27	22	10	12	64.86
15	Tamii Nadu	9	6	96	01	57	22	19	15	
	Litten Dur de de	236.0	1591.	3250.	5093.	71	57	16	20	46.48
16	Uttar Pradesh	1	48	47	04	/1	57	40	38	
	West D. 1	198.4	1083.	2126.	3391.	20	20		10	50
17	west Bengal	8	63	03	41	58	52	20	19	
	Average	289.1	1123.	2167.	3866.	50	38	32	24.12	



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	8	55	61	44					
Standard	220.1			1093.	17.00	149	12.20	11	
Deviation	6	345.5	523.5	38	17.99	14.0	12.20	11	

**Source:** Sample Registration System Bulletin, various issues, Office of the Registrar General and Census Commissioner, Ministry of Home Affairs, Government of India.

Table 1 reveals the state wise Per Capita Health Expenditure and state wise IMR of 17 Non-Special Category states of 2006-07, 2011-12, 2015-16 and 2020-21. The curve of Per Capita Health Expenditure (PCHE) of 17 Non-Special Category states is showing increasing trends while the curve of Infant Mortality Rate (IMR) of 17 Non-Special Category states is showing decreasing trends during the study period. It is quite clear that Per Capita Health Expenditure (PCHE) and Infant Mortality Rate (IMR) are negatively correlated. The National Health Policy (NHP) of India has laid target to reduce Infant Mortality Rate (IMR) to at least as low as 28 per 1000 live births by 2019, in which 12 out of 17 states have shown a reduction in IMR in the year 2020-21. The last column of table 1 is showing the state wise decreasing rate of IMR (in %) of 17 NSC states during the study period. The 17 NSC states are categorised into three categories based on their decreasing value of IMR (in %) i.e. (A) More than or equal to 60%, (B) Between (50-60) % and (C) Below 50%. Four out of 17 NSC states are categorised are under A category while nine out of 17 NSC states are under B category and the remaining four states are under C category during the study period.

#### b) Status of Per Capita Education Expenditure and GER

#### Table: 2 (a) Primary GER and Per Capita Education Expenditure of 17 Non Special Category

S N		Per Cap	oita Educ	ation Expe	enditure	Primary GER				
0.11	States	2006-	2011-			2006-	2011-	2015-	2020-	
U		07	12	2015-16	2020-21	07	12	16	21	
1	Andhra Pradesh	800.10	3288.9 5	3427.45	4929.58	96.47	92.8	90.93	102.97	
2	Bihar	705.03	4880.3 5	9152.49	14986.4 4	94.67	99	113.94	98.69	
3	Chhattisgarh	816.51	3832.5 2	8150.26	10281.2 8	123.19	114.1	104.77	96.31	
4	Goa	3302.0 3	5077.3 0	7458.01	11521.2 2	119.62	115.9	107.19	94.3	
5	Gujarat	935.07	3912.8 0	6321.77	8223.31	120.12	110.4	98.94	93.4	
6	Haryana	1042.1 0	4063.3 3	6405.37	8242.20	88.21	89.5	95.56	101.15	
7	Jharkhand	869.32	4424.0 8	6827.85	9871.69	111.7	117.2	111.53	102.2	
8	Karnataka	1038.1 2	3489.1 5	5562.13	7083.07	106.99	102.6	104.92	105.08	
9	Kerala	1368.4	4489.3	7041.31	7393.45	93.42	87.3	96.65	100.17	

States



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		4	0						
10	Madhya Pradesh	579.15	3524.2 6	6646.93	9751.26	150.41	124.3	103.21	89.49
11	Maharashtra	1277.1 8	4811.9 7	7275.67	9130.83	113.61	102.1	102.39	104.82
12	Odisha	642.83	3802.1 2	6536.70	9898.50	114.07	106.7	105.43	97.39
13	Punjab	929.09	5784.0 8	7997.99	11003.2 8	81.33	106.6	111.61	111.57
14	Rajasthan	854.25	4139.1 3	7881.97	12712.0 3	122.36	104.2	107.42	106.52
15	Tamil Nadu	906.08	3357.8 7	5927.84	8647.24	117.81	115.7	105.87	98.51
16	Uttar Pradesh	608.66	6185.0 7	11196.0 5	12955.9 9	113.75	110.9	112.29	103.16
17	West Bengal	735.83	4311.9 3	5770.65	9395.87	102.77	115.3	103.91	120.73
	Average	1024.1 1	4316.1 3	7034.14	9766.31	110.03	106.74	104.5	101.56
	Standard Deviation	624.99	824.37	1663.55	2420.31	16.42	10.35	6.28	7.29

**Source**: 1. Statistics of School Education, Statistics Division of Department of Higher Education, MHRD. 2006-07 & 2011-12. 2. Gross Enrolment Ratio (GER) by Gender and Level of School Education, (2015-16 and 2020-21), handbook of statistics on Indian states, RBI.

Table 2(a) reveals the state wise Per Capita Education Expenditure and state wise Primary GER of 17 Non-Special Category states of 2006-07, 2011-12, 2015-16 and 2020-21. The Per Capita Education Expenditure (PCEE) of 17 Non-Special Category states is showing increasing trends while the Primary Gross Enrolment Ratio (GER) of 17 Non-Special Category states is showing increasing trends during the study period. It is quite clear that Per Capita Health Expenditure (PCEE) and Primary Gross Enrolment Ratio (GER) are positively correlated (Annexure 2(a)).

On the basis of above discussions, it is clear that there is no clear cut relationship between education expenditure and Primary GER during the study period. Hence, it can be inferred that GER is not dependent only on economic factors but also on social factors.

Table: 2 (b) Secondary GER and Per Capita Education Expenditure of 17 Non Special Category
States

S. No	States	Per Cap	oita Educa	ation Expe	enditure	Secondary GER					
		2006-	2011-	2015 16	2020-21	2006-	2011-	2015-	2020-		
		07	12	2013-10		07	12	16	21		
1	Andhra Pradesh	800.10	3288.9 5	3427.45	4929.58	58.7	65.5	71.89	84.24		
2	Bihar	705.03	4880.3	9152.49	14986.4	24.42	48.4	64.85	63.52		



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			5		4				
3	Chhattisgarh	816.51	3832.5 2	8150.26	10281.2 8	44.29	65.7	89.74	86.24
4	Goa	3302.0 3	5077.3 0	7458.01	11521.2 2	74.77	93.1	103.05	91.07
5	Gujarat	935.07	3912.8 0	6321.77	8223.31	54.69	59.6	72.31	78.56
6	Haryana	1042.1 0	4063.3 3	6405.37	8242.20	56.35	68.8	83.75	95.15
7	Jharkhand	869.32	4424.0 8	6827.85	9871.69	26.07	44.5	65.69	62.97
8	Karnataka	1038.1 2	3489.1 5	5562.13	7083.07	65.73	75.4	79.94	90.62
9	Kerala	1368.4 4	4489.3 0	7041.31	7393.45	92.93	99.5	103.47	97.55
10	Madhya Pradesh	579.15	3524.2 6	6646.93	9751.26	52.95	68.6	79.43	71.3
11	Maharashtra	1277.1 8	4811.9 7	7275.67	9130.83	69.56	74.2	88.18	92.64
12	Odisha	642.83	3802.1 2	6536.70	9898.50	52.74	58.6	76.33	84.52
13	Punjab	929.09	5784.0 8	7997.99	11003.2 8	48.95	77.4	87.33	109.17
14	Rajasthan	854.25	4139.1 3	7881.97	12712.0 3	48.61	66.1	73.61	84.82
15	Tamil Nadu	906.08	3357.8 7	5927.84	8647.24	86.72	74.8	95.75	92.59
16	Uttar Pradesh	608.66	6185.0 7	11196.0 5	12955.9 9	48.6	67.2	69.67	66.41
17	West Bengal	735.83	4311.9 3	5770.65	9395.87	44.55	63.6	79.75	91.18
	Average	1024.1 1	4316.1 3	7034.14	9766.31	55.92	68.88	81.46	84.86
	Standard Deviation	624.99	824.37	1663.55	2420.31	18.18	13.62	11.84	12.72

**Source:** 1. Compiled by author's calculation based on data source from Statistics of School Education, Statistics Division of Department of Higher Education, and MHRD. 2006-07 & 2011-12. 2. Gross Enrolment Ratio (GER) by Gender and Level of School Education, (2015-16 and 2020-21), handbook of statistics on Indian states, RBI.

Table 2(b) reveals the state wise Per Capita Education Expenditure and state wise Secondary GER of 17 Non-Special Category states of 2006-07, 2011-12, 2015-16 and 2020-21. The curve of Per Capita Education Expenditure (PCEE) of 17 Non-Special Category states is showing increasing trends while



the curve of Secondary Gross Enrolment Ratio (GER) of 17 Non-Special Category states is showing increasing trends during the study period. It is quite clear that Per Capita Health Expenditure (PCEE) and Secondary Gross Enrolment Ratio (GER) are positively correlated (Annexure 2(b)).

In the case of Secondary GER, it is also clear for all 17 NSC states that economic factor is a prominent factor for secondary GER. While, at the level of Primary education, not only economic factor but also social change are necessary factor for improving the Primary GER.

Year	Primary GER	Secondary GER	IMR	Per Capita	Per Capita
				Expenditure	Expenditure
				on Health	on Education
2006-07	14.92	32.51	35.85	76.13	61.02
2011-12	9.70	19.77	38.64	30.75	19.09
2015-16	6.01	14.54	38.36	24.15	23.65
2020-21	7.18	15.00	45.70	28.28	24.78

#### Table: 3. Coefficient of variation of 17 Non Special Category States.

Source: Compiled by author's own calculation based on available data source.

Table 3 shows the variation of the 17 Non-Special Category states between two time-periods 2006-07 and 2020-21. The above table reveals that the Per Capita Expenditure on Health and Education show a declining variation among 17 Non-Special Category states. Education outcomes indicators (Primary and Secondary GER) are showing a fall in inter-states disparities in Primary GER and Secondary GER are decreasing during the period of time. While on the other hand, the health indicator (IMR) is showing an increase in variations from 35.85 to 45.70 during the study period.

### Conclusion

The study presents an analysis of the impact of Social Sector Expenditure on IMR and GER during the period of 2006-07 to 2020-21. The evidence suggests that the trends of Per Capita Health Expenditure (PCHE) and Infant Mortality Rate (IMR) are negatively correlated with each other during the study period. While on the other hand, the trends of Per Capita Education Expenditure (PCEE) and Gross Enrolment Rate (GER), both Primary GER and Secondary GER, are positively correlated with each other during the study period. And also the variation of all (except IMR) Per Capita Health Expenditure (PCHE), Per Capita Education Expenditure (PCEE), Primary GER and Secondary GER, all are showing decline in variation in the 17 NSC states during the study period.

On the basis of above discussion about Primary and Secondary GER, it is quite clear for all 17 NSC states that economic factor is a prominent factor for improving the Secondary GER while social changes as well as economic factors both are playing crucial role for improving the Primary GER.

#### Suggestion

For the improvement of health sector in 17 Non- Special Category (NSC) States, some suggestions for government, policy makers, researchers etc. are as follows:

• There is a need to increase the health expenditure for rapid decrease in IMR. State Government should allocate a handsome amount on health sector in their budget.



• There is a need to aware the society about education and have to make effort for changing in economic factors and social factors also for improving in Primary GER.

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