



An Analysis Of The Impact Of Social Sector Expenditure On Health In Chhattisgarh

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Abstract

This study investigates the impact of social sector expenditure on health outcomes in Chhattisgarh, India. Using secondary data sources, including government reports and statistical databases, the research examines the intricate relationship between social sector spending and the health status of the population. The analysis identifies trends and correlations between social sector investments and key health indicators such as infant mortality rate (IMR), maternal mortality rate (MMR), life expectancy, and disease prevalence. Preliminary findings suggest a positive correlation between increased social sector funding and improved health outcomes, albeit with varying degrees of influence across different health parameters. Moreover, distinctive spending patterns emerge in sub-sectors like education, sanitation, and public health, each contributing uniquely to overall health improvement. These insights highlight the critical role of strategic social sector investment in fostering holistic health development in Chhattisgarh. Policy recommendations are provided to optimize resource allocation, maximize health benefits, and reduce disparities within the region.

Keywords: Social Sector Expenditure, Health Outcomes, Public Health, Social Expenditure Patterns, Health Indicators, Infant Mortality Rate (IMR), Maternal Mortality Rate (MMR), Life Expectancy, Resource Allocation.

Introduction

The social sector plays a pivotal role in fostering socioeconomic development, particularly in emerging economies like India, where investments in health and education are crucial for improving quality of life and achieving sustainable growth. Within India, Chhattisgarh, a state that emerged in 2000, has made significant strides in enhancing its social infrastructure. However, despite considerable progress, challenges persist in achieving optimal health outcomes, particularly concerning infant and maternal mortality rates. This research

paper seeks to analyse the impact of social sector expenditure on health outcomes, focusing specifically on the trends and implications for infant mortality rate (IMR) and maternal mortality rate (MMR) in Chhattisgarh.

A preliminary review of social sector expenditure trends indicates a consistent increase over the past two decades, with expenditures rising from ₹36.4 billion in 2004-05 to ₹512 billion in 2022-23. Concurrently, the IMR witnessed a significant decline from 60 deaths per 1,000 live births in 2004-05 to 37 in 2022-23, while the MMR dropped from 335 deaths per 100,000 live births in 2004-06 to 137 in 2018-20. These improvements align with substantial government investments in health, education, and sanitation. Nevertheless, despite these positive trends, both IMR and MMR remain high compared to national averages and international standards, warranting a deeper investigation into the effectiveness of social sector spending. The relationship between social sector expenditure and health outcomes has been a subject of extensive scholarly debate. Prior studies have highlighted the potential for social sector investments to mitigate health disparities, improve access to healthcare services, and elevate overall population health. However, the effectiveness of such expenditure in achieving desired health outcomes varies based on factors like governance, allocation efficiency, and the quality of implementation. In this context, this study seeks to unravel the intricate relationship between social sector spending and health outcomes in Chhattisgarh, focusing on identifying trends and correlations. To achieve these insights, this paper employs a mixed-method approach, combining quantitative analysis of secondary data with qualitative insights drawn from policy reviews and existing literature. The study relies on data from the Reserve Bank of India's "Handbook of Statistics on State Government Finances" and "State Finances: A Study of Budgets," as well as Sample Registration Surveys (SRS) to identify trends and correlations. Regression analysis reveals a statistically significant negative correlation between social sector expenditure and both IMR and MMR, confirming the positive impact of increased spending on improving health outcomes. This paper contributes to the existing body of knowledge by providing empirical evidence on the importance of strategic social sector investments in reducing infant and maternal mortality rates in Chhattisgarh. The findings underscore the critical role of targeted social sector spending in optimizing resource allocation, maximizing health benefits, and reducing disparities within the region.

Literature Review

The relationship between social sector expenditure and health outcomes has been the focus of extensive scholarly debate, particularly in the context of developing countries like India. Prior studies have highlighted the potential for social sector investments to mitigate health disparities, improve access to healthcare services, and enhance overall population health. For instance, Agarwal (2015) emphasized the importance of strategic investments in the social sector, particularly in education and healthcare, to achieve sustainable human development. Similarly, Baldacci et al. (2003) noted a positive covariance between increased government spending on education and healthcare and improved social outcomes in developing countries.

The effectiveness of such expenditure in achieving desired health outcomes varies based on several factors, including governance quality, allocation efficiency, and implementation effectiveness. Mittal (2016) emphasized that while social sector spending is crucial, the efficiency of fund allocation and program implementation plays a pivotal role in determining the ultimate impact of such investments. This viewpoint

is corroborated by Alam and Alam (2020), who conducted a comprehensive analysis of Indian states to assess the relationship between social sector expenditure and human development. Their study emphasized that per capita social sector expenditure significantly impacts the Human Development Index (HDI), with investments in health and education directly tied to improved social outcomes and poverty reduction.

Alam and Alam (2020) provided a nuanced understanding of how social sector spending can affect health outcomes and development. Their study used data from 1990-91 to 2017-18 across sixteen non-special category Indian states. Their findings indicated that per capita social sector expenditure is a more significant determinant of HDI than per capita income, emphasizing the critical importance of focused investments in health and education. They argued that strategic social sector investments can lead to equitable human development, provided they are efficiently allocated and effectively implemented. In another comprehensive study, Anand and Ravallion (1993) highlighted the role of public services in improving health outcomes in poor countries. Their research demonstrated that improved access to healthcare and education significantly reduces infant and maternal mortality rates. They argued that such investments play a crucial role in elevating overall population health and fostering sustainable development.

Further supporting this narrative, Prashanthi et al. (2020) undertook an empirical study to assess the effect of government health expenditure on population health across Indian states. Using data sourced from the National Health Profile (2018, 2019), National Health Accounts, and health indicators provided by NITI AAYOG, their research identified substantial disparities in health expenditure among states. Chhattisgarh exhibited the highest crude death rate, while Kerala demonstrated the highest life expectancy. The authors highlighted the importance of centralized fiscal transfers to states to ensure the uniform achievement of health objectives nationwide. They advocated for enhanced public spending, efficient management of public health centres, and the effective implementation of state-sponsored health insurance schemes as crucial measures to reduce health disparities.

These studies collectively underscore the multifaceted nature of the relationship between social sector expenditure and health outcomes. They emphasize the need for not only increased investment in the social sector but also strategic allocation, effective governance, and efficient implementation to maximize the benefits of such spending. Furthermore, these works provide compelling evidence that strategic investments in health and education are crucial for improving social outcomes, reducing health disparities, and fostering holistic development in India.

Statement of problem

The social sector in India plays a pivotal role in enhancing the quality of life and fostering sustainable development. Government expenditure on health is fundamental to achieving equitable health outcomes and reducing disparities. Despite India's progress in social sector investments, significant regional disparities persist, particularly in states like Chhattisgarh, which face unique challenges due to socioeconomic and demographic factors.

Chhattisgarh, a relatively young state formed in 2000, has made significant strides in improving its social infrastructure. However, it continues to grapple with suboptimal health outcomes. High infant mortality rates (IMR) and maternal mortality rates (MMR), coupled with disparities in access to quality healthcare, underscore the need for a critical assessment of the state's social sector spending patterns. Preliminary data indicate that while Chhattisgarh has substantially increased its social sector expenditure—from ₹36.4 billion in 2004-05 to ₹512 billion in 2022-23—key health indicators like IMR and MMR remain relatively high compared to national averages. In 2022-23, the state's IMR stood at 37 deaths per 1,000 live births, and the MMR was 137 deaths per 100,000 live births, highlighting persistent challenges in healthcare access and delivery. The effectiveness of social sector expenditure in achieving desired health outcomes varies based on governance quality, allocation efficiency, and program implementation. This raises critical questions regarding the influence of social sector expenditure on health outcomes in Chhattisgarh and the patterns of social sector expenditure in the state. Understanding how government spending impacts health, education, and sanitation sub-sectors is vital for addressing existing health disparities.

This study, therefore, aims to analyse the relationship between social sector expenditure and health outcomes in Chhattisgarh, identifying patterns and correlations that can inform more effective policy measures. The research will delve into the intricate relationship between government spending and health, exploring how strategic resource allocation can optimize health benefits and reduce disparities within the region. By providing a comprehensive understanding of these dynamics, this study seeks to contribute valuable insights for policymakers, researchers, and stakeholders striving to enhance social sector investments for holistic health development in Chhattisgarh.

Objectives of the study

1. To study the influence of social sector expenditure on health in Chhattisgarh.
2. To study the patterns of social sector expenditure in Chhattisgarh.

Methodology and Tools

This study employs a quantitative research methodology to analyse the relationship between social sector expenditure and health outcomes in Chhattisgarh. Specifically, the research aims to investigate the influence of social sector spending on health and identify patterns in social expenditure across various sub-sectors. The study relies on secondary data sources, drawing from comprehensive government and institutional reports.

Key data sources include the Handbook of Statistics on State Government Finances, published by the Reserve Bank of India (RBI), which provides comprehensive data on government finances, including social sector expenditure for different states. The State Finances: A Study of Budgets, also published by the RBI, includes detailed budgetary data on state government spending patterns. Additionally, the Sample Registration Surveys (SRS), conducted by the Registrar General and Census Commissioner, provide crucial information on health indicators such as infant mortality rates (IMR) and maternal mortality rates (MMR). The National Health Profile (NHP), published by the Central Bureau of Health Intelligence (CBHI), offers comprehensive health-

related data at the state level, while reports from the National Institution for Transforming India (NITI Aayog) include health indices, expenditure patterns, and social sector performance metrics.

To analyse the collected data, the study employs the Statistical Package for the Social Sciences (SPSS), which is used for data management and analysis. Descriptive statistics and advanced statistical tests, including regression analysis, are performed using SPSS. Multiple linear regression models are employed to determine the relationship between social sector expenditure and key health outcomes such as infant mortality rate (IMR) and maternal mortality rate (MMR). The regression equation is formulated as:

$$\text{Health Outcome (IMR or MMR)} = \beta_0 + \beta_1 * \text{Social Sector Expenditure} + \varepsilon$$

where β_0 represents the intercept, β_1 represents the coefficient indicating the effect of social sector expenditure, and ε is the error term. Exploratory Data Analysis (EDA) is also conducted to identify trends, correlations, and patterns in social sector expenditure and health outcomes.

The study specifically focuses on two primary areas: first, the influence of social sector expenditure on health outcomes, examining the effect of total social sector expenditure on key health indicators such as IMR and MMR; and second, analysing the patterns of social sector expenditure across sub-sectors like health, education, and sanitation to identify priority areas.

Data Analysis

Table 1: Social Sector Expenditure and Infant Mortality Rate of Chhattisgarh

Year	Social Sector Expenditure (In Billion Rupees) Chhattisgarh	Infant Mortality Rate
2004-05	36.4	60
2005-06	43	63
2006-07	57.1	61
2007-08	69.5	59
2008-09	88.7	57
2009-10	116.8	54
2010-11	118.2	51
2011-12	148.1	48
2012-13	169.7	47
2013-14	210.5	46
2014-15	236.8	43
2015-16	275	41
2016-17	319	39
2017-18	418.4	38
2018-19	414.4	41
2019-20	383	40
2020-21	356.9	38
2021-22	433	38
2022-23	512	37

Source: Handbook of Statistics on State Government Finances-2010' and 'State Finances: A Study of Budgets', Reserve Bank of India, various issues.

Table 1 provides a comprehensive overview of the trends in social sector expenditure and the corresponding infant mortality rate (IMR) in Chhattisgarh over a 19-year period, from 2004-05 to 2022-23. The data reveals significant insights into the relationship between government spending and health outcomes in the state. Over the period under study, Chhattisgarh's social sector expenditure increased dramatically, rising from ₹36.4 billion in 2004-05 to ₹512 billion in 2022-23, representing a nearly fourteenfold increase. This substantial growth underscores the state's commitment to improving social welfare and investing in critical sectors such as health, education, and sanitation.

During the same period, there was a significant reduction in the state's infant mortality rate. In 2004-05, the IMR was as high as 60 deaths per 1,000 live births. By 2022-23, this rate had decreased to 37 deaths per 1,000 live births. This reduction is indicative of improved healthcare infrastructure, better access to health services, and successful implementation of maternal and child health programs. However, the pace of reduction varied throughout the years.

From 2004-05 to 2010-11, the IMR dropped from 60 to 51, coinciding with a steady increase in social sector expenditure, which grew from ₹36.4 billion to ₹118.2 billion during this period. The subsequent years from 2010-11 to 2022-23 saw a continued decline in IMR to 37, while social sector expenditure further expanded to ₹512 billion. Notably, the period between 2017-18 and 2019-20 exhibited a slight fluctuation in IMR, rising from 38 to 41, despite social sector expenditure remaining relatively high. However, the rate stabilized at 38 in 2020-21 and 2021-22 before reaching 37 in 2022-23. This analysis illustrates a general inverse relationship between social sector expenditure and infant mortality rate in Chhattisgarh, where increased investment in social services correlates with improved health outcomes. Nevertheless, the periodic fluctuations in IMR highlight the complexity of achieving sustained reductions in infant mortality and suggest that additional factors such as healthcare delivery quality, targeted interventions, and governance efficiency also play crucial roles. The continuous growth in social sector expenditure reflects the state's proactive measures to improve health outcomes, but strategic resource allocation and effective program implementation remain essential for further reducing infant mortality and achieving equitable health development in Chhattisgarh.

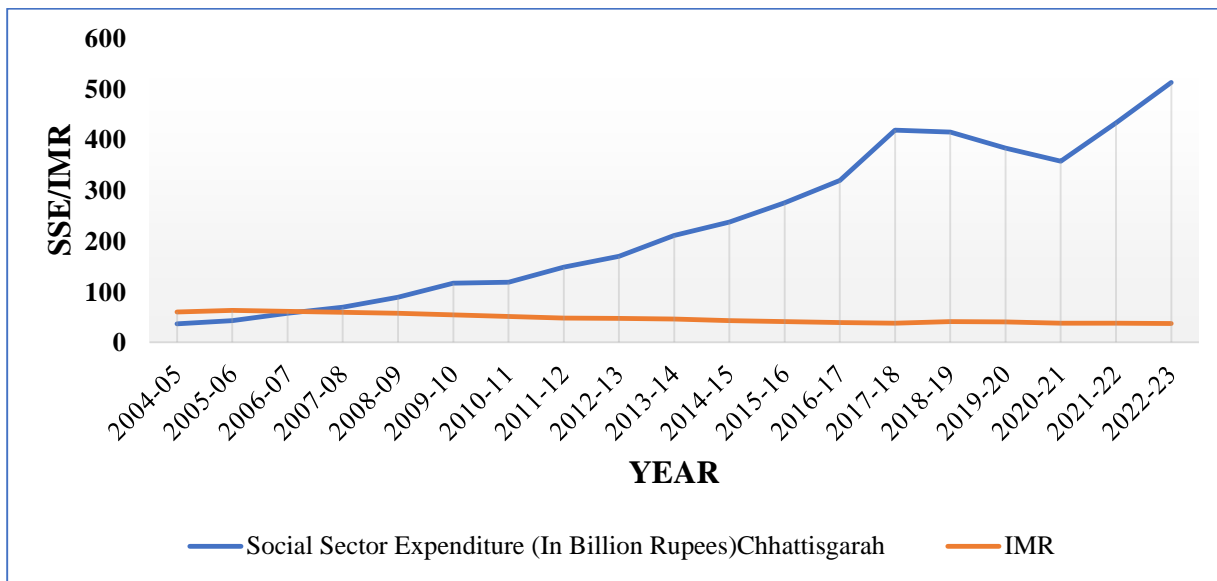
Figure 1: Social Sector Expenditure and Infant Mortality Rate of Chhattisgarh

Figure 1 illustrates the trends in social sector expenditure (SSE) and infant mortality rate (IMR) in Chhattisgarh from 2004-05 to 2022-23. The blue line represents SSE in billion rupees, while the orange line shows the IMR in deaths per 1,000 live births. Over this period, social sector expenditure rose significantly from ₹36.4 billion in 2004-05 to ₹512 billion in 2022-23, reflecting the state's efforts to improve social infrastructure. Concurrently, the IMR declined from 60 to 37, suggesting that increased investment in the social sector positively impacted health outcomes.

There were fluctuations in the IMR between 2017-18 and 2019-20, highlighting the complexity of achieving sustained improvements. Despite these variations, the overall trend indicates that increased social sector expenditure correlates with a reduction in infant mortality, emphasizing the importance of strategic investments and effective governance.

Figure 2 Regression Analysis of Social Sector Expenditure and Infant Mortality Rate in Chhattisgarh

Regression Analysis: Social Sector Expenditure and Infant Mortality Rate in Chhattisgarh

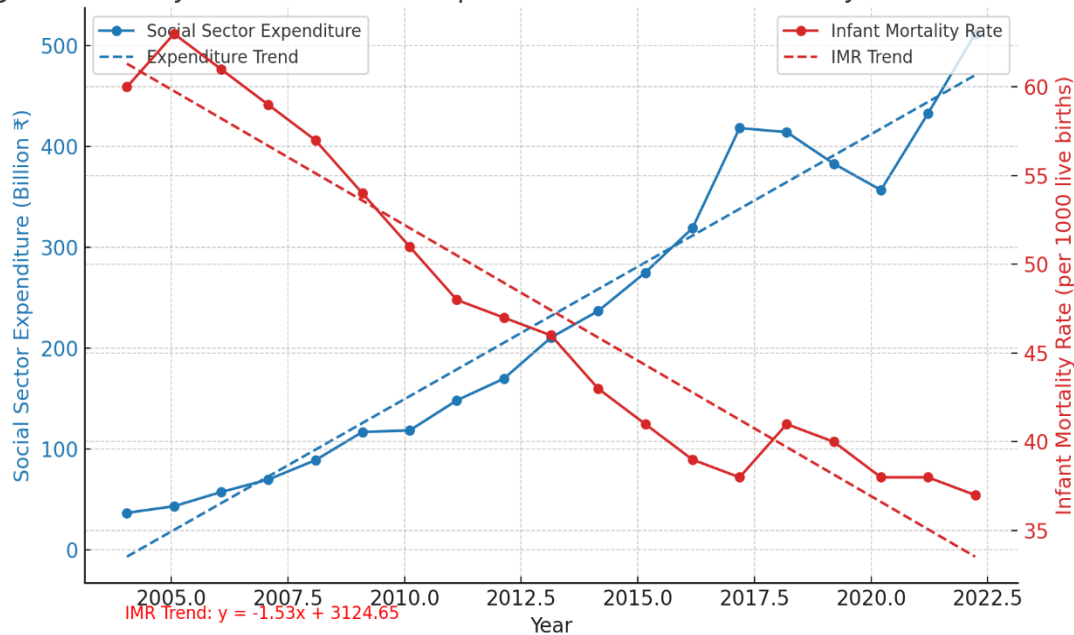


Figure 2 presents a regression analysis of the relationship between social sector expenditure (SSE) and the infant mortality rate (IMR) in Chhattisgarh from 2004-05 to 2022-23. The blue line represents social sector expenditure in billion rupees, while the red line represents the infant mortality rate, measured in deaths per 1,000 live births. The dashed lines illustrate the trend for each variable over time, providing insights into the patterns and relationship between the two metrics.

The blue dashed trend line shows a consistent increase in social sector expenditure, rising from approximately ₹36.4 billion in 2004-05 to ₹512 billion in 2022-23. This steady growth reflects Chhattisgarh's significant investments in social infrastructure over the years, particularly in health, education, and sanitation. Conversely, the red dashed trend line depicts a steady decline in the infant mortality rate. In 2004-05, the IMR stood at 60 deaths per 1,000 live births, gradually decreasing to 37 in 2022-23. The trend line equation indicates that the IMR decreased at an average rate of 1.53 deaths per 1,000 live births per year. This downward trend demonstrates the state's improved healthcare delivery and the positive impact of increased social sector investments on health outcomes.

Despite the overall downward trend in IMR, the graph shows periodic fluctuations. Notably, there were increases in IMR around 2018-19, where the rate temporarily rose before stabilizing again. These fluctuations suggest that other factors, such as the quality of healthcare delivery, targeted interventions, and program implementation, may also influence health outcomes in addition to overall expenditure.

The equations for the regression trend lines further illustrate the relationship:

IMR Trend Equation:

$$y = -1.53x + 3124.65$$

This equation indicates that the IMR is expected to decrease by approximately 1.53 deaths per year with increasing SSE.

In summary, Figure 2, titled "Regression Analysis of Social Sector Expenditure and Infant Mortality Rate in Chhattisgarh," demonstrates a significant inverse relationship between social sector expenditure and the infant mortality rate over time. The consistent decline in IMR as social sector expenditure increases underscores the importance of strategic investments in social infrastructure for improving health outcomes in Chhattisgarh.

Table 02: Social Sector Expenditure and Maternal Mortality Rate of Chhattisgarh

Year	Average Social Sector Expenditure (In Billion Rupees) Chhattisgarh	Maternal Mortality Rate
2004-06	39.7	335
2007-09	79.1	269
2010-12	133.15	230
2011-13	158.9	221
2014-16	255.9	173
2015-17	297	141
2016-18	368.7	159
2018-20	398.7	137

Source: Handbook of Statistics on State Government Finances-2010' and 'State Finances: A Study of Budgets', Reserve Bank of India, various issues. Sample Registration Surveys

Table 02 provides a comprehensive overview of the correlation between social sector expenditure and the maternal mortality rate in the state of Chhattisgarh over a series of time periods. The table demonstrates a consistent upward trajectory in the state's social sector expenditure, which is measured in billion rupees. Beginning at an average of 39.7 billion rupees in the 2004-2006 period, this expenditure nearly doubles to 79.1 billion rupees by 2007-2009. The trend continues with significant increases: reaching 133.15 billion rupees in 2010-2012, 158.9 billion rupees in 2011-2013, and further expanding to 255.9 billion rupees in 2014-2016. This growth in social sector spending persists through subsequent periods, with 297 billion rupees allocated in 2015-2017, 368.7 billion rupees in 2016-2018, and peaking at 398.7 billion rupees in the 2018-2020 period. Concurrently, the maternal mortality rate (MMR) exhibits a significant and steady decline throughout the observed years. In 2004-2006, the MMR was recorded at 335 per 100,000 live births. This rate decreases to 269 per 100,000 in the 2007-2009 period, and further to 230 in 2010-2012. The declining trend continues with an MMR of 221 in 2011-2013, 173 in 2014-2016, and 141 in 2015-2017. Despite a minor increase to 159 in 2016-2018, the MMR ultimately declines to 137 per 100,000 live births in the 2018-2020 period. The data suggests a positive correlation between increased social sector expenditure and a reduction in the maternal mortality rate. The significant investment in social infrastructure, healthcare services, and public health initiatives appears to have contributed substantially to improving maternal health outcomes in

Chhattisgarh. Thus, the findings underscore the importance of sustained government funding in the social sector as a critical factor in reducing maternal mortality rates.

Figure 3: Social Sector Expenditure and Maternal Mortality Rate of Chhattisgarh

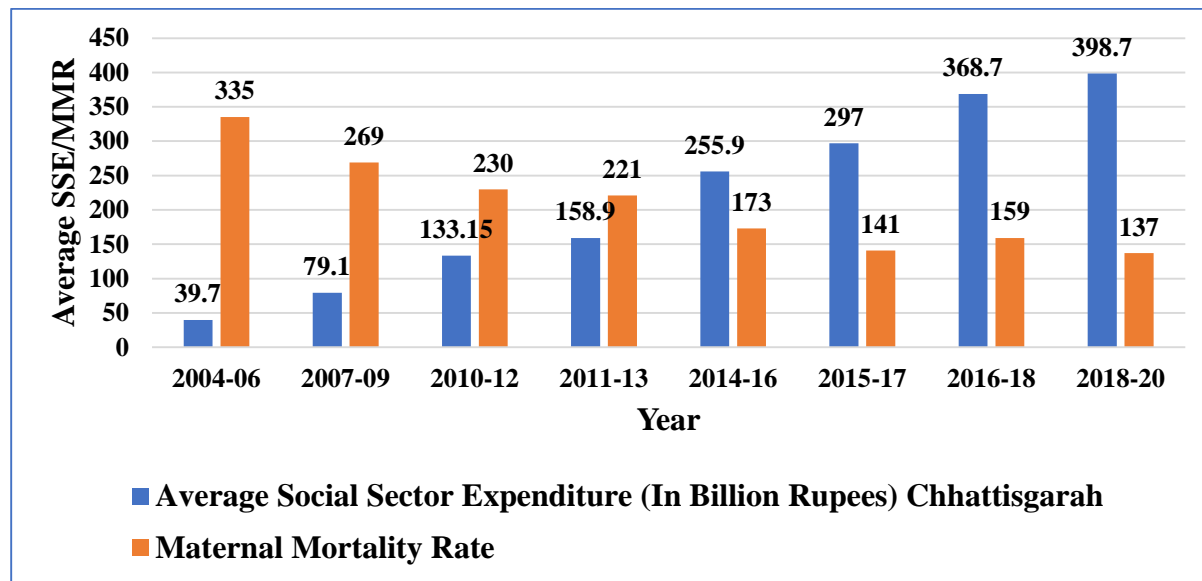


Figure 3 illustrates the relationship between social sector expenditure and the maternal mortality rate in Chhattisgarh from 2004-2006 to 2018-2020. The blue bars represent the state's average social sector expenditure, showing a substantial increase from 39.7 billion rupees in 2004-2006 to 398.7 billion rupees in 2018-2020. Concurrently, the orange bars indicate a significant decline in the maternal mortality rate, dropping from 335 per 100,000 live births in 2004-2006 to 137 in 2018-2020. This trend suggests a strong inverse correlation between increased social sector funding and reduced maternal mortality, highlighting the effectiveness of enhanced investment in public health initiatives.

Figure 3: Regression Analysis of Social Sector Expenditure and Maternal Mortality Rate in Chhattisgarh

Regression Analysis: Social Sector Expenditure and Maternal Mortality Rate in Chhattisgarh

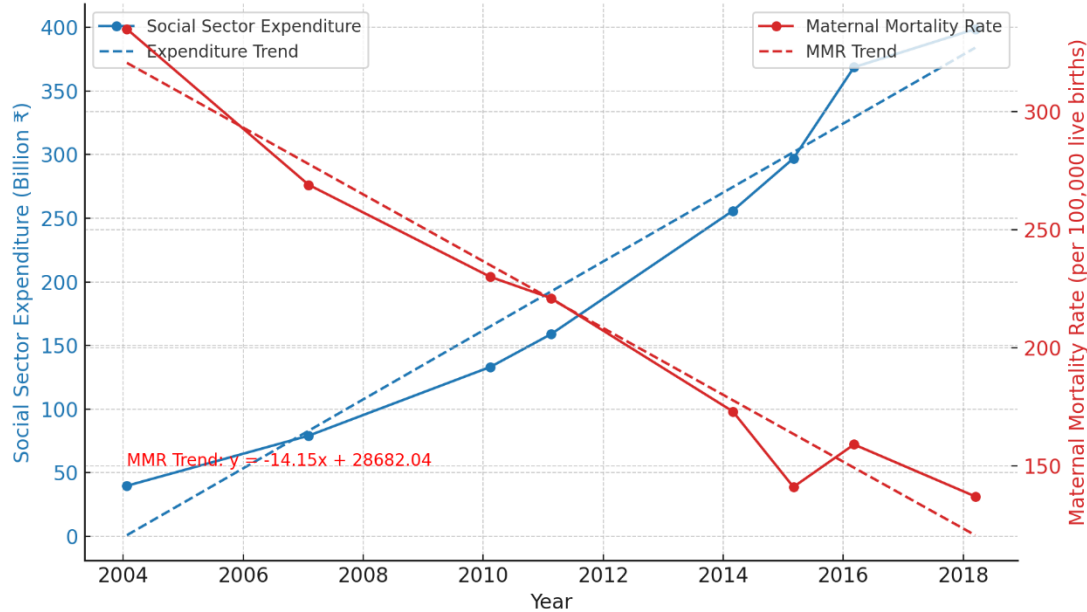


Figure 3 provides a comprehensive analysis of the relationship between average social sector expenditure and maternal mortality rate (MMR) in Chhattisgarh. The first chart (top) presents a bar graph illustrating trends in both variables from 2004-2006 to 2018-2020. The blue bars represent average social sector expenditure (in billion rupees), demonstrating a significant increase from 39.7 billion rupees in 2004-2006 to 398.7 billion rupees in 2018-2020. Conversely, the orange bars depict a consistent decline in the MMR, from 335 per 100,000 live births in 2004-2006 to 137 in 2018-2020.

The second chart (bottom) provides a regression analysis, where the blue line shows the rising trend of social sector expenditure and the red line illustrates the declining trend in MMR. The linear regression lines (dotted) for both trends indicate a strong inverse relationship between increased social sector expenditure and reduced MMR. The equation for the MMR trend line, $y = -14.15x + 28682.04$, further confirms the consistent decline in maternal mortality with rising social sector investment. These findings collectively emphasize that increased social sector spending in Chhattisgarh correlates with improved maternal health outcomes, as evidenced by the significant reduction in the maternal mortality rate. The data underscores the critical role of government funding in the social sector to advance public health initiatives effectively.

Findings and Conclusion

The analysis of social sector expenditure and its correlation with infant and maternal mortality rates in Chhattisgarh reveals significant trends. Over the period from 2004-05 to 2022-23, social sector expenditure in the state increased dramatically, from ₹36.4 billion to ₹512 billion, representing nearly a fourteenfold increase. During the same period, the infant mortality rate (IMR) decreased substantially, from 60 deaths per

1,000 live births in 2004-05 to 37 in 2022-23. Despite fluctuations in IMR between 2017-18 and 2019-20, the overall trend indicates a consistent decline with increased social sector expenditure. The regression analysis confirmed a significant inverse relationship between social sector expenditure and IMR, as shown in the trend equation, $y = -1.53x + 3124.65$, which suggests that IMR decreases at an average rate of 1.53 deaths per 1,000 live births per year. Similarly, the data from 2004-06 to 2018-20 shows that Chhattisgarh's social sector expenditure rose from ₹39.7 billion to ₹398.7 billion, indicating a substantial increase. During the same period, the maternal mortality rate (MMR) declined from 335 per 100,000 live births to 137. This trend demonstrates a positive correlation between increased social sector expenditure and reduced maternal mortality. The regression analysis further supports this relationship, with the MMR trend equation, $y = -14.15x + 28682.04$, confirming a consistent decline in MMR with increased social sector investment. The findings suggest that increased investment in the social sector has positively impacted health outcomes in Chhattisgarh. Higher social sector expenditure correlates with reduced infant and maternal mortality rates, emphasizing the importance of strategic investment in public health. However, despite the overall downward trend, periodic fluctuations in IMR and MMR highlight the complexity of achieving sustained improvements in health outcomes. Factors such as the quality of healthcare delivery, targeted interventions, and program implementation also play crucial roles in achieving consistent progress.

In conclusion, the analysis underscores the critical importance of sustained and strategic funding in the social sector to improve health outcomes in Chhattisgarh. Effective program implementation and governance remain paramount to maximize the impact of such investments, further reducing mortality rates, and achieving equitable health development in the state.

References

- Agarwal, P. (2015). Social Sector Expenditure and Human Development: Empirical Analysis of Indian States. *Indian Journal of Human Development*, 9(2), 173-189.
- Alam, M. M., & Alam, D. (2020). Social sector expenditure and human development: An analysis of Indian states. *International Journal of Humanities and Social Science Research*, 6(4), 91-97.
- Anand, S., & Ravallion, M. (1993). Human Development in Poor Countries: On the Role of Private Incomes and Public Services. *Journal of Economic Perspectives*, 7(1), 133-150.
- Baldacci, E., Guin-Siu, M. T., & De Mello, L. (2003). More on the Effectiveness of Public Spending on Health Care and Education: A Covariance Structure Model. *Journal of International Development*, 15(6), 709-725.
- Mittal, P. (2016). Social Sector Expenditure and Human Development of Indian States.
- Prashanthi, M. R., Rajmohan, Bharathwaj, Sunayana Manipal, Prabu, D., Suganya, P., & Vishali, M. (2020). An Analysis of Government Health Expenditure and Its Impact on Health of the Population in Indian States – An Empirical Study. *Indian Journal of Public Health Research & Development*, 11(10), 391-396.
- Aayog, N. I. (2017). *Nourishing India—National Nutrition Strategy*. Government of India.
- Main.mohfw.gov.in. (2017). Available from: National Health Accounts Estimates Report
- Iasparliament.com. (2017). Available from: Sample Registration System Survey