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Health and Development in Asia: Regional Priorities for a New Century

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Health and Development in Asia: Regional Priorities for a New Century

Abstract

Asia is one of the world's most rapidly developing regions. Even so, the majority of Asian countries continue to experience slow-moderate rates of economic growth, high inflation, rapid population growth, and comparatively high levels of ethnic tension and civil unrest. Poverty, ill-health, and broad-based maldevelopment also continue to be major features of Asian social development. In general, the absence of strong intra-regional cooperation on a broad range of social, political, economic, and health issues compounds Asia's asynchronous development patterns.

Keywords

health, development, asia

Disciplines

Medicine and Health Sciences | Social and Behavioral Sciences

HEALTH AND DEVELOPMENT IN ASIA : Regional Priorities for a New Century¹⁾

Richard J. ESTES*

Abstract

Asia is one of the world's most rapidly developing regions. Even so, the majority of Asian countries continue to experience slow-moderate rates of economic growth, high inflation, rapid population growth, and comparatively high levels of ethnic tension and civil unrest. Poverty, ill-health, and broad-based maldevelopment also continue to be major features of Asian social development. In general, the absence of strong intra-regional cooperation on a broad range of social, political, economic, and health issues compounds Asia's asynchronous development patterns.

INTRODUCTION

The Asian region is characterized by extraordinary contradictions and paradoxes. Certainly one of the most beautiful and resource rich regions on the planet, in recent decades Asia's social landscape has become marred by recurrent intra-regional wars and civil conflicts (Brogan, 1990), chronic human rights violations (Humana, 1992), corrupt governments (Human Rights Watch/Asia, 1994), and growing poverty (World Bank, 1990 ; UNDP, 1995). Population growth continues to be one of the most rapid in the world as is the region's rate of urban migration (UN, 1994). Asia's physical landscape has been seriously compromised as well ; today, the region's governments struggle against the effects of rapidly spreading deforestation, exhausted soil and animal resources, recurrent floods and other natural disasters, and the social consequences of depleted mineral and other natural resources (Goodman & Redclift, 1991 ; WRI, 1994). And, the governments of Asia's poorest countries must also seek to compete in an economic order that is governed by rules not of their own making and which, on balance, appears to better serve the interests of already economically advanced countries than their own (Adams, 1993). These and other issues have combined to confront Asia's leaders with unparalleled social, political, and economic challenges — including challenges to the region's rapidly changing health sectors (ESCAP, 1992a).

The response of the region's governments to these recurring problems has been direct, impassioned, and oriented to a more optimistic view of the region's future.²⁾ Their efforts to

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advance the health status of the region's most vulnerable populations have been particularly impressive (World Bank, 1993 ; WHO, 1992a, 1992b). Overall, these approaches have emphasized : 1) the creation of new paradigms for development that better reflect the region's own rich history and cultural traditions (ESCAP, 1988 ; ESCAP, 1990) ; 2) more fully integrated and cross-sectoral approaches to development (ESCAP, 1991) ; 3) increased economic and political self-sufficiency (ESCAP, 1992a) ; 4) the eradication of absolute poverty and other forms of "mal-development" in the region by the year 2000, or as soon thereafter as possible (ESCAP, 1991) ; 5) the enhancement of popular participation ; and 6) a more equitable sharing of the region's abundant resources. The attainment of increasingly higher levels of health is a central to the region's new social development agenda.

This paper assesses the extent to which the region's governments are succeeding in advancing Asia's new social development agenda, including its more progressive health agenda. In particular, the paper reports the results of a comprehensive survey of the region's successes and failures over a period of 20 years in responding to the basic social, material, and health needs of its rapidly increasing population. To that end, the paper :

1. reports the results obtained through application of a statistically weighted version of the author's previously developed *Index of Social Progress* to an analysis of health and development trends in Asia for the period 1970-90 ;
2. identifies Asia's major 20-year health and development accomplishments and failures ;
3. identifies Asia's health and development leaders and socially least developing countries ;
4. compares the major health and development trends occurring in Asia with those observed for other major world regions ;
5. identifies and briefly discusses the major forces that are likely to influence Asia's further health and development toward the year 2000 and beyond ; and,
6. provides baseline data against which future developments in Asia may be assessed.

METHODOLOGY

The present study is the third in a series of analyses of worldwide social development trends (Estes, 1984, 1988). The purpose of all three studies has been : 1) to identify significant changes in "adequacy of social provision"³⁾ occurring throughout the world ; and 2) to assess national and international progress in providing more adequately for the basic social and material needs of the world's growing population. This paper reports a time-series analysis of Asia's development performance over a 20-year period. Data are reported at three levels of analysis : 1) development trends occurring in Asia vis-a-vis those of other world regions

; 2) Asian subregional variations ; and, 3) development trends occurring in each of the region's 32 countries included in this analysis.

Index of Social Progress (ISP)

The primary instrument used in this study is the author's extensively pre-tested "Index of Social Progress" (ISP). In its present form the ISP consists of 46 social indicators that have been subdivided into 10 subindexes : *Education ; Health Status ; Women Status ; Defense Effort ; Economic ; Demographic ; Geography ; Political Participation ; Cultural Diversity ; and Welfare Effort* (Table 1).⁴⁾ All 46 of the ISP's indicators, including those to assess the region's changing health status, are known to be valid indicators of social development ; indeed, the majority of the ISP's indicators are employed regularly by other scholars of socioeconomic development.

Weighted Index of Social Progress (WISP)

Owing to the volume of data gathered for this analysis only statistically-weighted subindex and index scores will be reported. The study's statistical weights were derived through a two-stage varimax factor analysis in which each indicator and subindex was analyzed for its relative contribution toward explaining the variance associated with changes in social progress over time. Standardized subindex scores were then multiplied by the factor loadings to create weighted subindex scores. Composite Weighted Index of Social Progress (WISP) scores were obtained through a summation of the weighted subindex scores.⁵⁾

The WISP Versus Other Measures of Social Progress

The Index of Social Progress differs from other measures of social development in the number, range, and relevance of the indicators used in its construction. In all cases, the ISP is judged to be a more comprehensive, valid, and reliable instrument for assessing changes in social development than other indices of national and international progress (e. g., Gross National Product [GNP], Gross Domestic Product [GDP], the UNDP's recently developed "Human Development Index," among others).

Data Sources

The majority of the data used in the analysis were obtained from annual reports supplied by individual countries to the United Nations, the World Bank, the OECD, and other international data collection organizations. Data for the Political Participation and Geographic subindexes were obtained from independent scholars.

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Table 1. Index of Social Progress (ISP90) Indicators by Subindex (N = 46 Indicators, 10 Subindexes)

<p>I. EDUCATION SUBINDEX (N=6)</p> <p>Percent Age Group Enrolled, Primary Level (+)</p> <p>Percent Grade 1 Enrollment Completing Primary School (+)</p> <p>Percent Age Group Enrolled, Secondary Level (+)</p> <p>Percent Age Group Enrolled, Tertiary Level (+)</p> <p>Percent Adult Illiteracy (-)</p> <p>Percent GNP in Education (+)</p>	<p>GNP Per Capita Annual Growth Rate (+)</p> <p>Average Annual Rate of Inflation (-)</p> <p>Per Capita Food Production Index (+)</p> <p>External Public Debt as Percent of GNP (-)</p>
<p>II. HEALTH STATUS SUBINDEX (N=7)</p> <p>Life Expectation at 1 Year (+)</p> <p>Rate infant Mortality Per 1000 Liveborn (-)</p> <p>Under 5 Years of Age Child Mortality Rate (-)</p> <p>Population in Thousands Per Physician (-)</p> <p>Per Capita Daily Calorie Supply as % of Requirement (+)</p> <p>Percent Children Fully Immunized at Age 1, DPT (+)</p> <p>Percent Children Fully Immunized at Age 1, Measles (+)</p>	<p>VI. DEMOGRAPHY SUBINDEX (N=6)</p> <p>Total Population (Millions) (-)</p> <p>Crude Birth Rate Per 1000 Population (-)</p> <p>Crude Death Rate Per 1000 Population (-)</p> <p>Rate of Population Increase (-)</p> <p>Percent of Population Under 15 Years (-)</p> <p>Percent of Population Over 60 Years (+)</p>
<p>III. WOMEN STATUS SUBINDEX (N=6)</p> <p>Female Life Expectation At Birth (+)</p> <p>Female Adult Literacy Rate (+)</p> <p>Percent Married Women Using Contraception (+)</p> <p>Maternal Mortality Rate per 100,000 Live Birth (+)</p> <p>Female Primary School Enrollment as Percent of Males (+)</p> <p>Female Secondary School Enrollment As Percent of Males (+)</p>	<p>VII. GEOGRAPHY SUBINDEX (N=3)</p> <p>Percent Arable Land Mass (+)</p> <p>Natural Disaster Vulnerability Index (-)</p> <p>Average Annual Deaths From Natural Disasters Per Million Population (-)</p>
<p>IV. DEFENSE EFFORT SUBINDEX (N=1)</p> <p>Military Expenditures as Percent of GNP (-)</p>	<p>VIII. POLITICAL PARTICIPATION SUBINDEX (N=3)</p> <p>Violations of Political Rights Index (-)</p> <p>Violations of Civil Liberties Index (-)</p> <p>Composite Human Suffering Index (-)</p>
<p>V. ECONOMIC SUBINDEX (N=6)</p> <p>Per Capita Gross National Product in Dollars (+)</p> <p>Real Gross Domestic Product Per Head (+)</p>	<p>IX. CULTURAL DIVERSITY SUBINDEX (N=3)</p> <p>Largest Percent Sharing Same Mother Tongue (+)</p> <p>Largest Percent Sharing Same Basic Religious Beliefs (+)</p> <p>Largest Percent Sharing Same or Similar Racial/Ethnic Origins (+)</p>
	<p>X. WELFARE EFFORT SUBINDEX (N=5)</p> <p>Years Since First Law-Old Age, Invalidity, Death (+)</p> <p>Years Since First Law-Sickness & Maternity (+)</p> <p>Years Since First Law-Work Injury (+)</p> <p>Years Since First Law-Unemployment (+)</p> <p>Years Since First Law-Family Allowances (+)</p>

Country and Time Frame Selection

Thirty-two Asian countries were selected for inclusion in the analysis using two criteria : 1) a 1970 population size larger than one million persons ; and 2) the availability of timely, reliable, and comprehensive social indicator data. Countries with missing, inadequate, incomplete, or seriously distorted data were excluded from the analysis.

Time Frame

Index and subindex findings are reported separately for each of three time periods, i. e., 1970, 1980, and 1990 ; thus, the study provides a cross-sectional analysis of the "state" of Asian social development over a 20-year period. Current social indicator data for selected variables also are reported for 1991 and 1992 (Tables 2-4).

Table 2. Selected Social Indicators for Asia by Subregion, 1965-92 (N=31)

SUB-REGION Country	Pop. mid-1992 (Mil)	Average Annual Pop Growth 1980-92	Pop. Doubling Time-PDT (Years)	% Pop. 0-14 Years 1994	Pop. Urban 1992	Life Expect. at Birth 1992	Infant Mortality Rate % Change 1992 1965-90	Percent Adult Illiteracy 1992
EAST ASIA (N=7)	1382.0	1.4	57.8	24.8	66.4	72.0	20.9 -65.3	7.7
China	1162	1.4	50	28	27	69	31 -67.8	20
Hong Kong	6	1.2	50	...	94	78	6 -74.1	...
Japan	124	0.5	116	17	77	79	5 -72.2	1
Korea, North	23	1.8	39	29	59	71	25 -60.0	1
Korea, South	44	1.1	63	24	74	71	13 -72.6	3
Mongolia	2	2.7	25	...	59	64	60 -45.1	11
Taiwan	21	1.1	63	26	75	72	6 ...	10
SOUTH ASIA (N=7)	1233.0	2.8	27.8	41.7	26.9	58.4	87.3 -37.3	53.3
Afghanistan*	19	4.8	14	...	19	43	164 -20.4	68
Bangladesh*	114	2.3	30	44	18	55	91 -27.1	63
India	884	2.1	33	36	26	61	79 -41.3	50
Iran	60	3.5	19	47	58	65	65 -42.1	44
Nepal*	20	2.6	27	44	12	54	99 -29.2	73
Pakistan	119	3.1	22	44	33	59	95 -30.9	64
Sri Lanka	17	1.4	50	35	22	72	18 -69.8	11
SOUTHEAST (N=9)	456.0	2.2	31.4	30.3	35.8	62.7	52.0 -52.0	21.0
Indonesia	184	1.8	39	37	32	60	66 -52.3	16
Kampuchea	10	2.6	27	...	13	50	111 -12.7	50
Lao, PDR*	4	2.6	26	...	20	51	97 -30.4	55
Malaysia	19	2.5	27	36	45	71	14 -70.9	10
Myanmar*	44	2.1	33	36	25	60	72 -47.5	18
Philippines	64	2.4	29	39	44	65	40 -43.1	10
Singapore	3	1.8	32	23	100	75	5 -73.1	13
Thailand	58	1.8	39	2	23	69	26 -69.3	6
Viet Nam	70	2.1	33	39	20	63	37 -68.7	11
WEST ASIA (N=8)	133.0	3.4	24.3	39.9	67.9	66.9	44.4 -49.8	28.5
Iraq	19	3.6	19	48	73	66	59 -45.4	37
Israel	5	2.3	39	31	92	76	9 -63.0	8
Jordan	4	4.9	19	41	69	70	28 -60.8	18
Lebanon	3	2.1	33	33	85	68	35 -10.7	19
Saudi Arabia	17	4.9	15	43	78	69	28 -56.1	36
Syria	13	3.3	19	48	51	67	36 -62.3	33
Turkey	59	2.3	29	35	64	67	54 -64.5	18
Yemen*	13	3.8	22	...	31	52	106 -36.1	59
Total	3204							
Average	103.4	2.5	34.7	34.6	49.0	64.9	51.0 -50.6	27.9

*Indicates official classification by United Nations as a "Least Developing Country" (LDC).
Data Sources : Unicef, 1993 ; UNDP, 1994 ; World Bank, 1994 ; Almanac, 1995.

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ASIAN DEVELOPMENT IN THE CONTEXT OF WORLDWIDE DEVELOPMENT TRENDS

Figures 1 and 2 summarize the study's major findings on the WISP for all 124 countries included in the author's larger analysis of worldwide social development trends (Estes, 1995, 1996a, 1996b, 1997). These time-series data cover the period 1970-1990 and reflect comparative WISP performance for the study's seven continental regions, i. e., North America, Australia-New Zealand, Europe, the former USSR, Latin America, Asia, and Africa.

1. The world's most socially developed regions are North America, Australia-New Zealand, and Europe. These regions had already attained the most favorable WISP ratings by 1970 ; further improvements on the index continued to occur between 1970-1980 and 1980-1990 (Figure 1). Today, comparatively few differences characterize the development profiles of the highly advanced countries of North America (1990 Average=92), Australia-New Zealand (1990 Average=92), and Europe (1990 Average=90).
2. The world's least developed regions are Africa (1990 Average=20) and Asia (1990 Average=44). WISP scores for the African region were the lowest worldwide for the entire 20-year period studied.
3. As reported in Figure 2, substantial gains occurred on the WISP between 1970 and 1990 for five world regions : North America (+24%) ; Asia (+22%) ; Europe (+15%) ; Latin America (+14%) ; and, Australia-New Zealand (+13%).
4. By 1990 the social situations of the former USSR and Africa deteriorated to levels below those observed for 1970, i. e., by an average of -2.4% and -1.7%, respectively.

Considerable variation exists with respect to worldwide 20-year social development trends. In general, between 1970 and 1990 the world's most economically advanced regions continued to add to their overall levels of social development while the world's poorest region, Africa, experienced additional net social losses during the period. The social gains reported for Latin America and Asia are impressive. The dramatic fluctuations in WISP scores reported for the former USSR reflect the social, political, and economic chaos that led to the country's dissolution in December, 1991.

ASIAN DEVELOPMENT TRENDS

Twenty-year social development trends for Asia are summarized in Figures 3 and 4. WISP scores are reported in these figures both for the region-as-whole (N=32) and for each of Asia's four subregions : East Asia (N=7), South Asia (N=7), Southeast Asia (N=9), and

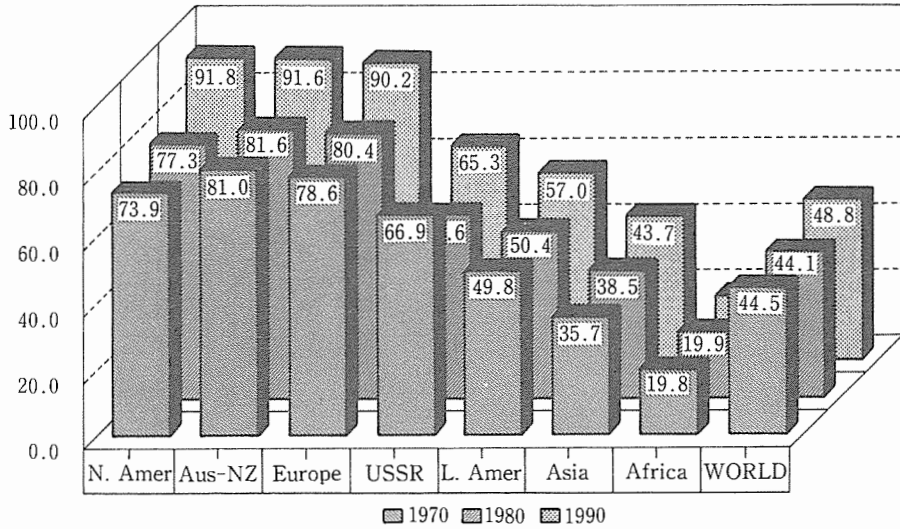


Fig. 1 Average WISP Scores By Continent 1970-90 (N=124)

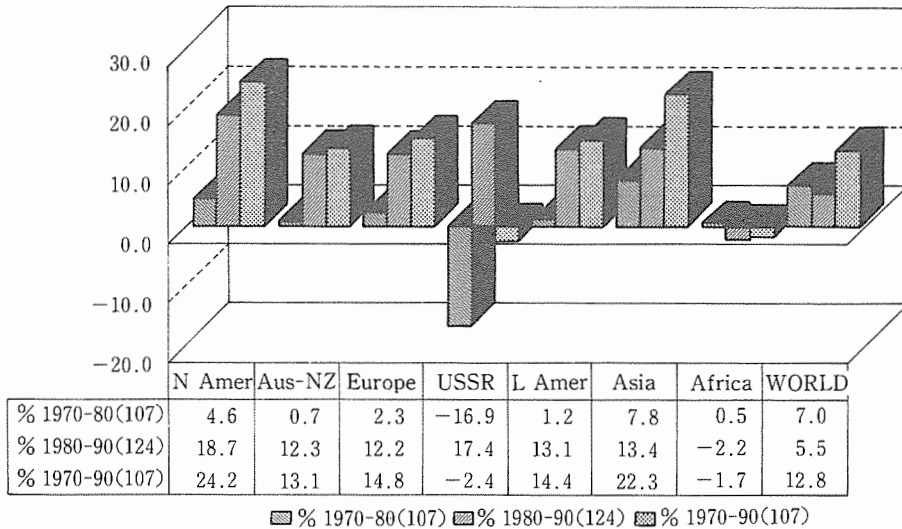


Fig. 2 Percent Change on the WISP By Continent, 1970-90 (N=107/124)

West Asia (N=9). Region-wide performances on the WISP's ten subindexes are reported separately in Figures 5 and 6. Country-specific WISP scores for 1970, 1980, and 1990 are reported in Figure 10 and Table 5. Current social indicator data for each country, subregion, and for the region-as-a-whole are presented in Table 2, 3, and 4.

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Table 3. Selected Social Indicators on Asia Women, 1980-1991 (N=30)

SUB-REGION Country	Maternal Mortality Per/100M 1980-90	Contracep- tive Prevalence 1985-92	Females in Pri. Schl/ 100 Males 1991	Females in Sec. Schl/ 100 Males 1991	Females as % of Males Tertiary 1990	% Adult Female Illiteracy 1990
EAST ASIA (N=6)	101.0	74.8	94.5	94.3	76.3	12.5
China	130	83	86	71	48	38
Hong Kong	6	81	92	104	55	4
Japan	15	56	95	99	...	4
Korea, North	130	...	100	96	...	...
Korea, South	80	79	94	87	49	4
Mongolia	250	...	100	109	153	...
SOUTH ASIA (N=7)	582.9	35.3	68.9	58.4	42.3	67.1
Afghanistan*	1000	2	52	45	50	86
Bangladesh*	650	40	81	49	19	78
India	550	43	71	55	45	66
Iran	250	65	86	74	44	57
Nepal*	850	23	47	40	32	87
Pakistan	600	12	52	41	41	79
Sri Lanka	180	62	93	105	65	17
SOUTHEAST (N=9)	379.3	48.0	91.3	91.1	65.8	25.9
Indonesia	300	50	93	82	...	32
Kampuchea	800	...	...	...	...	78
Lao, PDR*	750	...	77	66	50	24
Malaysia	120	48	95	104	89	30
Myanmar*	600	5	92	90	94	28
Philippines	250	40	94	99	...	11
Singapore	14	74	90	100	68	4
Thailand	180	66	95	97	...	10
Viet Nam	400	53	94	91	28	16
WEST ASIA (N=8)	259.4	32.0	80.3	73.4	69.6	39.5
Iraq	250	14	79	63	64	51
Israel	5	...	98	116	...	4
Jordan	200	35	94	105	118	30
Lebanon	200	53	...	72	58	27
Saudi Arabia	220	...	84	79	82	52
Syria	200	20	87	71	71	49
Turkey	200	63	89	63	54	29
Yemen*	800	7	31	18	40	74
Average	339.3	44.8	83.6	79.0	61.6	38.2

*Indicates official classification by United Nations as a "Least Developing Country" (LDC).

... Indicates data are not available.

Data Sources : UNICEF, 1993 ; UNDP, 1994 ; World Bank, 1994.

Table 4. Selected Economic Indicators for Asia by Subregion, 1980-92 (N=30)

SUB-REGION Country	Per Capita GNP Income (\$) 1992	Average Annual GNP Growth (%) 1980-92	Average Inflation (%) 1980-92	Per Capita Debt Levels		
				Total External Debt (Mil \$) 1992	P. C. External Debt 1992	P. C. Months Ext. Debt 1992
EAST ASIA (N=7)	\$ 10,302	6.2	4.1	\$ 112,695	\$ 421	1.6
China	\$ 470	7.6	6.5	\$ 69,321	\$ 46	1.5
Hong Kong	\$ 15,360	5.5	7.8	...	...	...
Japan	\$ 28,190	3.6	1.5	...	...	...
Korea, North	\$ 1,000	...	...	...	...	...
Korea, South	\$ 6,790	8.5	5.9	\$ 42,999	\$ 795	1.8
Mongolia	...	5.6	-1.3	\$ 375	...	...
Taiwan	\$ 10,000	...	...	...	...	...
SOUTH ASIA (N=7)	\$ 586	1.9	16.7	\$ 136,609	\$ 162	5.1
Afghanistan*	\$ 220	...	56.0	...	...	...
Bangladesh*	\$ 220	1.8	9.1	\$ 13,189	\$ 115	6.6
India	\$ 310	3.1	8.5	\$ 76,983	\$ 83	2.8
Iran	\$ 2,220	-1.4	16.2	\$ 14,167	\$ 162	0.8
Nepal*	\$ 170	2.0	9.2	\$ 1,790	\$ 86	6.1
Pakistan	\$ 420	3.1	7.1	\$ 24,072	\$ 184	5.8
Sri Lanka	\$ 540	2.6	11.0	\$ 6,401	\$ 344	8.8
SOUTHEAST (N=9)	\$ 2,514	3.5	7.6	\$ 183,422	\$ 467	7.9
Indonesia	\$ 670	4.0	8.4	\$ 84,485	\$ 381	8.0
Kampuchea	\$ 130	...	...	...	...	...
Lao, PDR*	\$ 250	...	...	\$ 1,951	\$ 259	15.6
Malaysia	\$ 2,790	3.2	2.0	\$ 19,837	\$ 1,089	5.6
Myanmar*	\$ 220	...	14.8	\$ 5,326	\$ 112	6.1
Philippines	\$ 770	-1.0	14.1	\$ 32,498	\$ 495	8.1
Singapore	\$ 15,730	5.3	2.0	...	...	...
Thailand	\$ 1,840	6.0	4.2	\$ 39,424	\$ 464	3.9
Viet Nam	\$ 230	...	...	...	...	...
WEST ASIA (N=8)	\$ 3,553	-0.4	28.8	\$ 87,712	\$ 1,174	12.9
Iraq	\$ 1,940	...	...	...	...	...
Israel	\$ 13,220	1.9	78.9	...	...	...
Jordan	\$ 1,1204	-5.4	5.4	\$ 7,929	\$ 2,399	23.2
Lebanon	\$ 1,000	...	...	\$ 1,932	\$ 716	8.6
Saudi Arabia	\$ 7,510	-3.3	-1.9	...	...	...
Syria	\$ 1,000	2.1	15.5	\$ 16,481	\$ 1,326	15.9
Turkey	\$ 1,980	2.9	46.3	\$ 54,772	\$ 876	6.4
Yemen*	\$ 650	...	...	\$ 6,598	\$ 552	10.2
Total Average	\$ 3,899	2.7	14.2	\$ 520,438 \$ 26,022	\$ 552	7.7

*Indicates countries official classified by the United Nations as "Least Developing" (LDCs).

... Indicates data are available.

Data Sources : Unicef, 1993 ; UNDP, 1994 ; World Bank, 1994 ; Almanac, 1995.

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Regional Performance on the WISP

Asia's regional scores on the WISP averaged 36, 39, and 44 for 1970, 1980 and 1990, respectively (Figure 1). Asia ranks sixth worldwide in overall level of social development, i. e., one rank above the world's least developed region, Africa. The region maintained its social development ranking relative to other world regions for all three intervals.

As reported in Figure 2, however, Asia is the world's second most rapidly developing region. The region's WISP performances increased steadily between 1970-1980 (+7.8%) and accelerated between 1980-1990 (+13.4%); as a result, the region's WISP scores increased by more than 22% between 1970 and 1990. The region's 20-year social development gains are second only to those observed for the North American region (+24.2%); they also are significantly higher than those observed for the European (+14.8%), Australia-New Zealand (+13.1%), USSR (-2.4), and African (-1.7%) regions. Hence, the Asian region is beginning to succeed in reversing the downward spiral that characterized much of the region's development prior to 1970 (Brandt, 1980). The social indicator data reported in Tables 2-4 offer further confirmation that important social development changes are continuing to occur throughout the region, especially in the defense and economic sectors. These data also suggest that the region's recent social development accomplishments are of a broad-based, integrative, and, hopefully, sustainable nature (Estes, 1993).

A variety of factors help to explain Asia's recent development accomplishments: 1) the rapid economic development of selected countries in East and West Asia (World Bank, 1995); 2) the end of several military conflicts that previously undermined peace and stability throughout the region (UNDP, 1995); 3) beginning reductions in military expenditures (World Bank, 1995); 4) modest gains in slowing the rate of population increase (World Bank, 1995); 5) new investments in social and political infrastructure (ESCAP, 1991); 6) a new commitment to advancing the economic and legal status of the region's women and children (Unicef, 1993); and, 7) region-wide cooperation on several plans of integrated social and economic development (ESCAP, 1988; ESCAP, 1991).

Subregional Performance on the WISP

Despite impressive gains at the regional level on the WISP, considerable variation exists in the 20-year social development trends observed for Asia's four subregions (Figure 3). East Asia, for example, is the region's most developed subregion (1990 Average WISP=64.9); South Asia is the least socially developed (1990 Average WISP=28.6). By comparison, 1990 WISP scores for West (40.9) and Southeast Asia (41.6) are nearly identical, but both are substantially lower than that of East Asia for all three time periods studied.

Considerable variation also exists with respect to the pace at which social development

is occurring in the four subregions (Figure 4). The most significant 20-year WISP improvements occurred in Southeast Asia (+24.1%) whereas average WISP scores for the East, South, and West Asia subregions improved by less than 10% between 1970 and 1990. Since 1980, however, East Asia (+22.4%) has been the region's most rapidly developing subregion. The pace of social development occurring in East, South (+13.7%), and Southeast Asia since

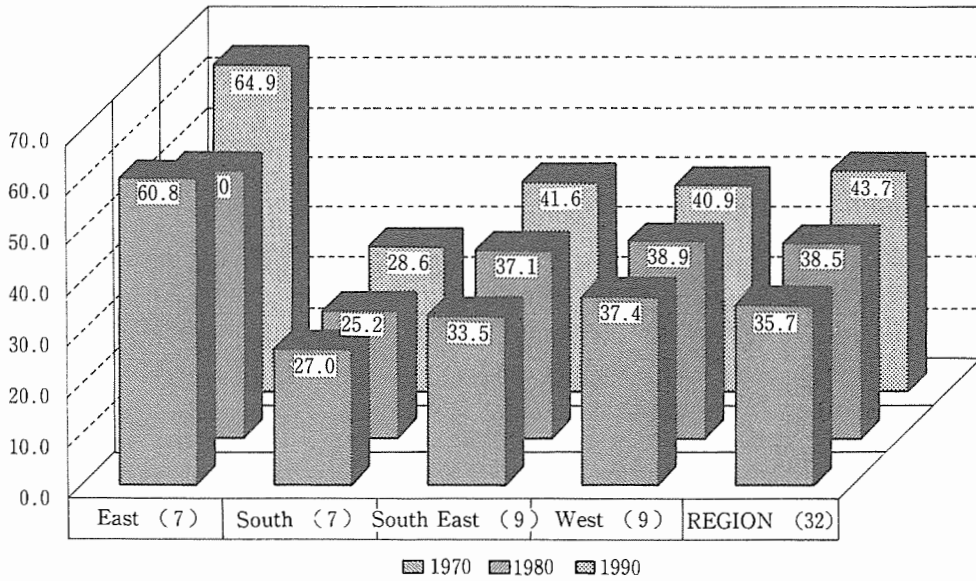


Fig. 3 WISP Scores For Asia by Subregion, 1970-90 (N=32)

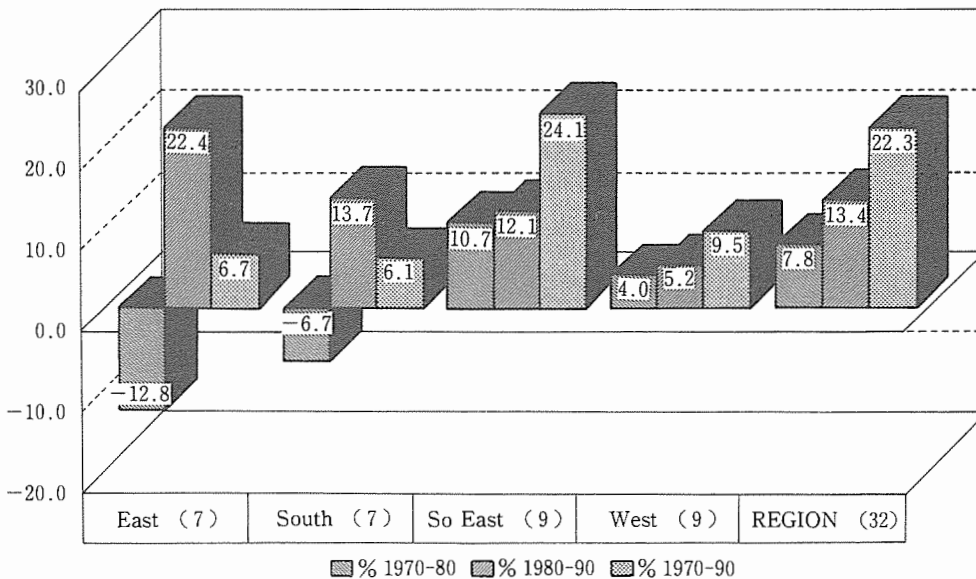


Fig. 4 Percent Change on WISP Scores for Asia by Subregion, 1970-90 (N=32)

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1980 is considerably more rapid than that observed for West Asia (+5.2%). Thus, Asian subregional development is characterized by considerable heterogeneity.

The tremendous variation that characterizes recent Asian social development trends results from a variety of related factors : 1) each subregion's level of social development *at the outset of the study* (Estes, 1984, 1988) ; 2) the nature and extent of the economic resources available to each subregion (i. e., ranging from land-locked, resource poor, countries to countries that are major exporters of oil and other products) ; 3) the size and cultural mix of each subregion's population (ranging from small and culturally homogenous societies to those with very large, highly diverse, populations) ; 4) the subregion's recent history of war or recurrent internal unrest ; and, 5) the recency of each subregion's colonization by power outside the region (i. e., ranging from none to centuries of political and economic domination).

Issues of cultural diversity — racial, ethnic, linguistic, and religious — also figure prominently in the explanation of variations in subregional social development trends. In general, the pace of social development is slower in Asian subregions, and countries, with higher levels of cultural diversity, more rapid in those characterized by higher levels of cultural homogeneity.

Regional Performance on the WISP Subindexes

The region's performance on the ten subindexes of the WISP is reported in Figures 5 and 6. As reported in these figures, the region's strongest performances in 1990 were on the Cultural Diversity (1990 Average=12), Economic (1990 Average=12), and Health Status subindexes (1990 Average=11). In each case, the region out-performed worldwide average scores on these subindexes.⁶⁾ Further, the region's subindex performance approximated world average scores on the Women Status (1990 Average=9), Education (1990 Average=9), and Geographic subindexes (1990 Average=9). The region's least favorable subindex performances occurred on the Defense Effort (1990 Average=3), Welfare Effort (1990 Average=4), Political Participation (1990 Average=8), and Demographic subindex (1990 Average=9). The region's highly unfavorable scores on the Defense Effort and Welfare Effort subindexes are especially perplexing given the known relationship between successes on these subindexes and more accelerated patterns of economic development (Nafziger, 1990 ; Simone, 1994 ; UNDP, 1995).

Subregional Performance on the Health Subindex

Subregional performance on the Health Subindex is reported in Figure 6. These data confirm that Eastern (1990 Average=17) and Western (1990 Average=11) Asia achieved the

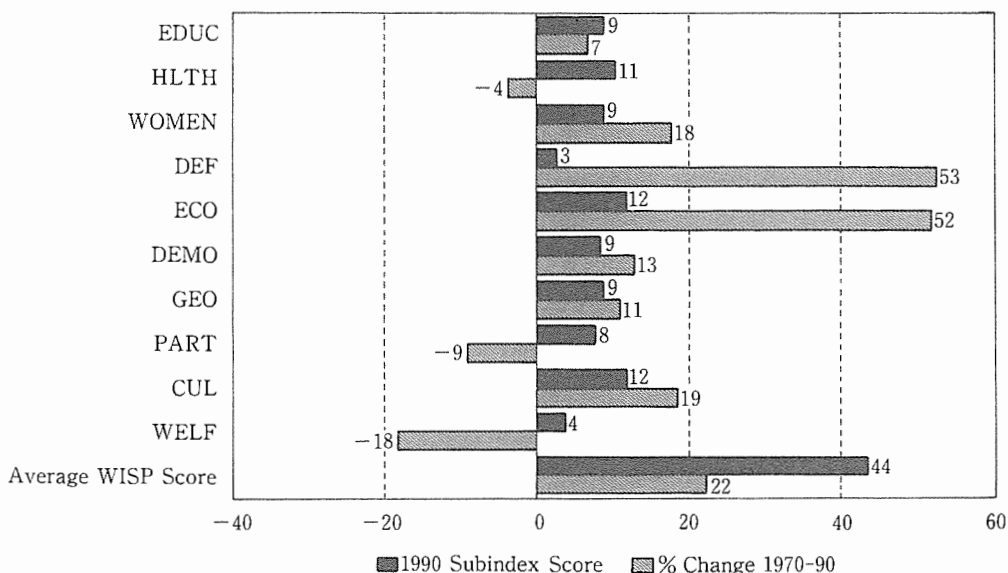


Fig. 5 WISP Subindex Scores For Asia, 1970-90 (N=32)

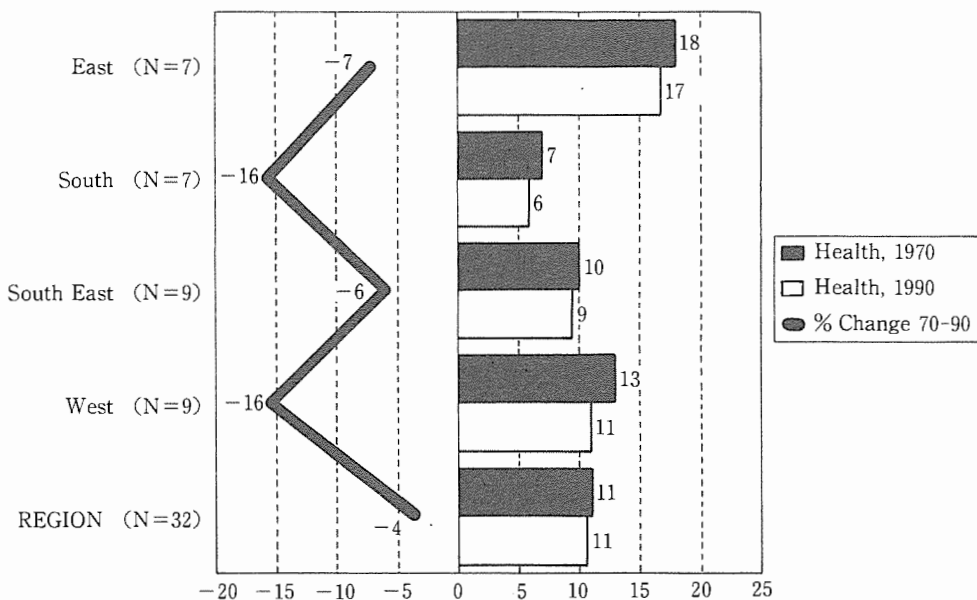


Fig. 6 Asian Health Status Subindex Scores by Subregion, 1970 & 1990 (N=32)

region's highest average scores on the Health subindex ; by contrast, the countries of the Southeast and Southern subregions scored the poorest on the Health Subindex with 1990 averages of 9 and 6, respectively. Of considerable concern is that all four subregions experienced net 20-year losses on the Health Subindex between 1970 and 1990. The most

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significant subindex losses on the subindex occurred in the Southern (−17%) and Western (−16%) subregions.

In the main, the region's consistently negative performance on the Health subindex — despite significant advances on the subindex by individual countries in the region — is closely associated with : 1) continuing high rates of population increase (Figure 8) ; 2) chronic

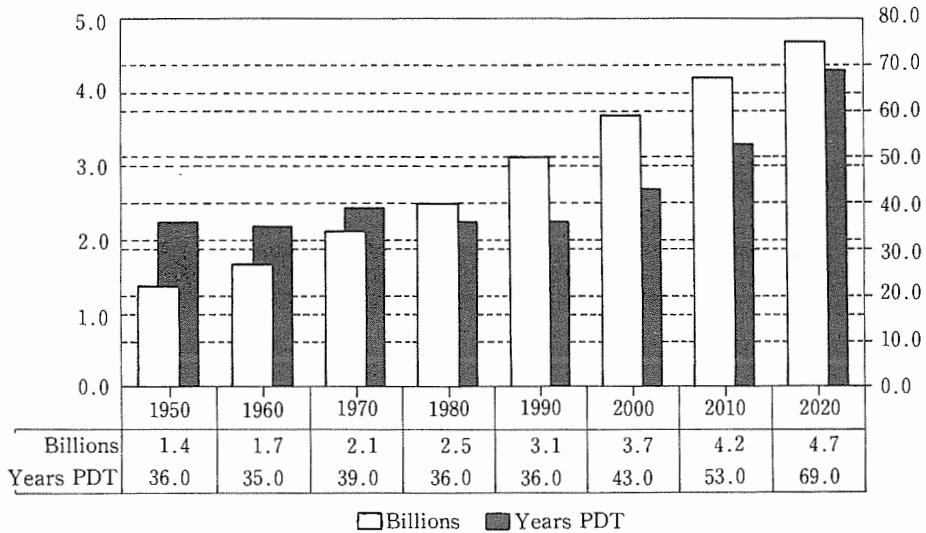


Fig. 7 Asian Population Growth, 1950-2020

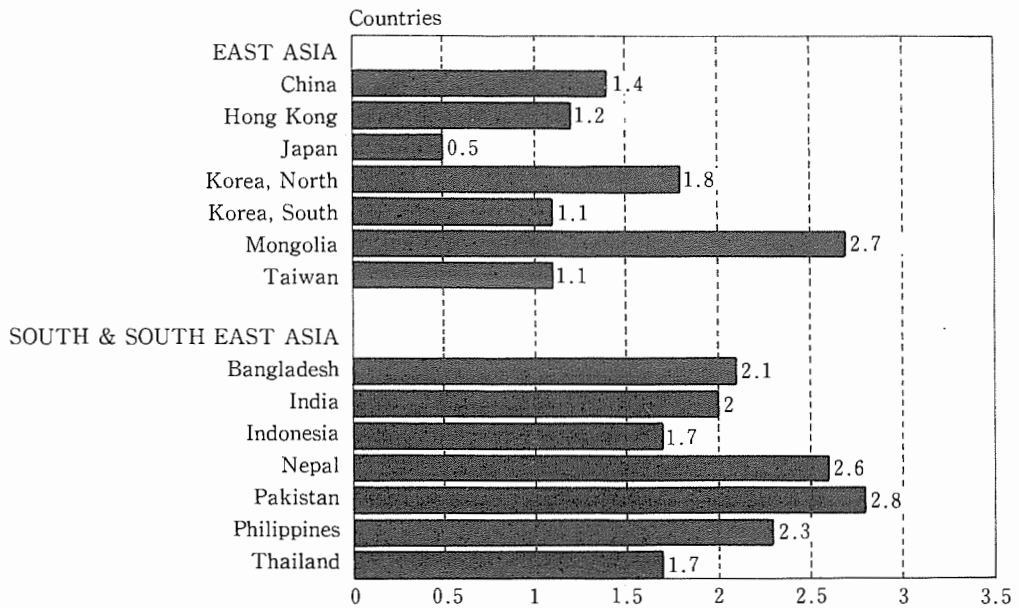


Fig. 8 Development Trends in Selected Countries Annual Population Growth Rate, 1980-93

under investments by many of the region's governments in human capital development (Figure 9) ; 3) persistent problems with sanitation and securing access to safe drinking water (UNDP, 1995) ; 4) continuously high levels of preventable, or easily treated, communicable diseases (World Bank, 1995) ; and 5) the appearance of new major epidemics in the region (including HIV/AIDS, hepatitis, and TB).

Asia's Asynchronous Development

Overall, the region's pattern of subindex findings suggest the asynchronous nature of Asia's social development, i. e., inconsistent and uneven development across a range of interdependent sectors. The region's economic successes since 1970 (Net Change=+37%), for example, contributed to the willingness of many governments to undertake initiatives directed at : 1) reducing defense expenditures (Net Change=+58%), albeit current expenditure patterns remain very high by world standards ; 2) promoting increases cooperation across culturally diverse population groups (Net Change=+19%) ; and, 3) advancing the education and health status of women and children (Net Change=+18%). These are important changes for the region and reflect at least a beginning commitment to redress several of the most fundamental problems that have thwarted the region's past development efforts.

However, the region's governments achieved only modest success in improving their performance on the Education (Net Change=7%) and Demographic subindexes (Net

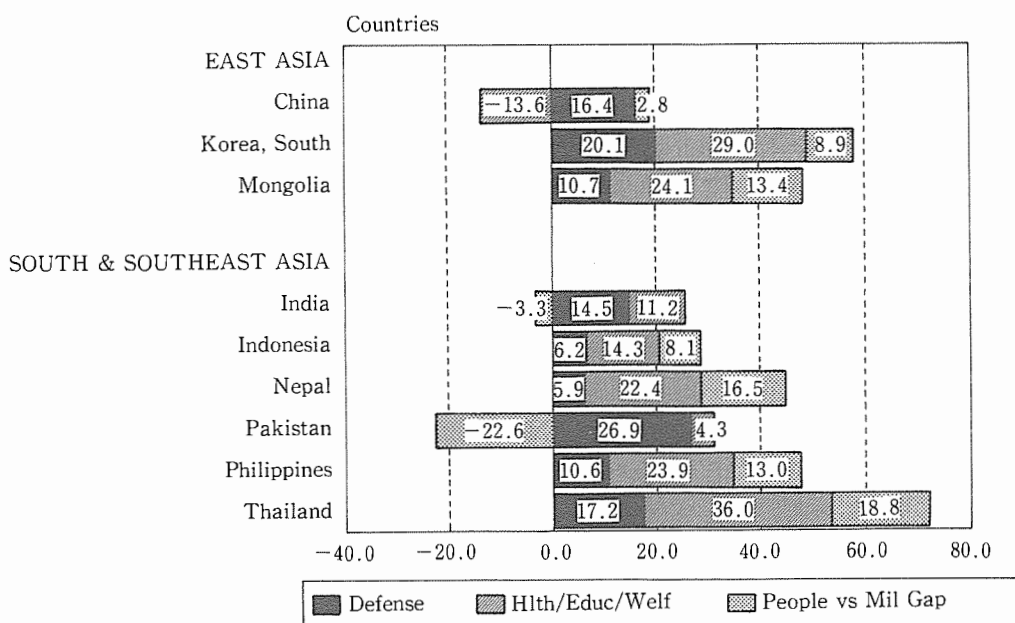


Fig. 9 Development Trends in Selected Countries Central Government Expenditures, 1993

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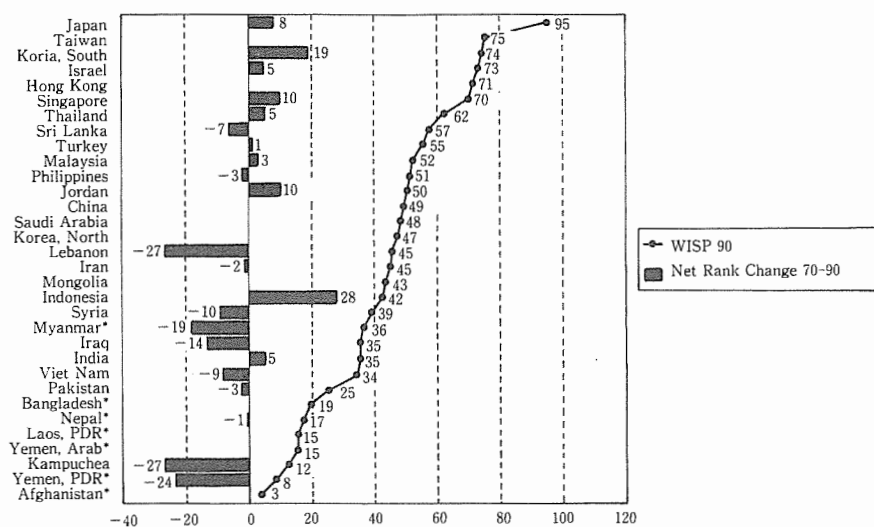


Fig. 10 Rank Ordered WISP Scores and Net Changes in WISP Ranks for Asia by Country, 1970-90 (N=32)

Change=13). Net 20-year social losses occurred on three subindexes: Welfare Effort (Net Change=-18%), Political Participation (Net Change=-9%), and Health (Net Change=-4%). No region of the world, indeed no country, has succeeded in advancing the overall social and economic status of its people without significant progress in these sectors (Estes, 1988, 1995, 1996a, 1996b, 1997). Significant improvement in all of these sectors will prove essential to the region's future development successes, including its future economic success (Jun, 1994; UNDP, 1995, World Bank, 1995).

REGIONAL SOCIAL LEADERS (SLs) AND SOCIALLY LEAST DEVELOPING COUNTRIES (SLDCs)

Figure 10 reports Asia's country-specific WISP scores for 1990. The figure both ranks the region's countries on the basis of their 1990 WISP performance and reports 20-year net changes in country rankings on the WISP. Table 5 contains a more detailed picture of country-specific WISP scores and changes to WISP rankings between 1970 and 1990. Both Figure 10 and Table 5 identify the region's "Social Leaders" (SLS), "Socially Least Developing Countries" (SLDCs), and "Middle-Range Performing" countries (MPCs) *relative to all 124 countries included in the author's larger studies of worldwide social development trends.*

Asia's Social Development "Leaders" (SLS)

The region's six "social development leaders" (SLS) are Japan (WISP=95), Taiwan (WISP=75), the Republic of Korea (WISP=74), Israel (WISP=73), Hong Kong (WISP=

Table 5. Country Rankings For Asia on the Weighted Index of Social Progress (WISP), 1970-1990 (N=32)

GROUPING Country	WISP SCORE 1970	WISP SCORE 1980	WISP SCORE 1990	Percent WISP Change 1970-80	Percent WISP Change 1980-90	Percent WISP Change 1970-90	WISP RANK 1990	Net Changes in WISP Ranking 1970-80	Net Changes in WISP Ranking 1980-90	Net Changes in WISP Ranking 1970-90
SOUCIAL LEADERS (N=6)	56.8	63.5	76.3	11.9	20.2	34.5	28.8	7.3	4.7	10.5
Japan	73	86	95	17.8	10.5	30.1	14	12	-4	8
Taiwan	...	58	75	...	29.3	...	28	...	11	...
Korea, South	49	55	74	12.2	34.5	51.0	30	3	16	19
Israel	55	63	73	14.5	15.9	32.7	32	5	0	5
Hong Kong	...	59	71	...	20.3	...	34	...	4	...
Singapore	50	60	70	20.0	16.7	40.0	35	9	1	10
MIDDLE RANGE (N=18)	34.9	40.6	45.8	16.3	13.0	31.5	66.2	0.7	-1.3	-2.8
Thailand	45	52	62	15.6	19.2	37.8	47	-1	6	5
Sir Lanka	51	55	57	7.8	3.6	11.8	49	-5	-2	-7
Turkey	44	49	55	11.4	12.2	25.0	53	-1	2	1
Malaysia	36	46	52	27.8	13.0	44.4	57	3	0	3
Philippines	42	41	51	-2.4	24.4	21.4	58	-6	3	-3
Jordan	29	39	50	34.5	28.2	72.4	60	5	5	10
China	...	36	49	...	36.1	...	62	...	11	...
Saido Arabia	...	29	48	...	65.5	...	62	...	19	...
Korea, North	...	40	47	...	17.5	...	66	...	-3	...
Lebanon	53	64	45	20.8	-29.7	-15.1	68	11	-38	-27
Iran	32	38	45	18.8	18.4	40.6	69	1	-3	-2
Mongolia	...	37	43	...	16.2	...	72	...	-2	...
Indonesia	9	42	42	366.7	0.0	366.7	73	41	-13	28
Syria	32	40	39	25.0	-2.5	21.9	74	0	-10	-10
Myanmar*	36	27	36	-25.0	33.3	0.0	78	-25	6	-19
Iraq	32	35	35	9.4	0.0	9.4	80	-10	-4	-14
India	19	27	35	42.1	29.6	84.2	81	1	4	5
Viet Nam	28	33	34	17.9	3.0	21.4	82	-4	-5	-9
SOCIAL LDCs (N=8)	18.3	15.1	14.3	-17.1	-5.8	-21.9	102.3	-14.0	2.1	-13.8
Pakistan	20	18	25	-10.0	38.9	25.0	88	-18	15	-3
Bangladesh*	...	18	19	...	5.6	...	94	...	...	...
Nepal*	13	17	17	30.8	0.0	30.8	97	-8	7	-1
Yemen, Arab*	...	10	15	...	50.0	...	100	...	14	...
Lao, PDR*	...	20	15	...	-25.0	...	101	...	-5	...
Kampuchea	23	12	12	-47.8	0.0	-47.8	108	-27	0	-27
Yeman, PDR*	17	22	8	29.4	-63.6	-52.9	114	-3	-21	-24
Afghanistan*	...	4	3	...	-25.0	...	116	...	5	...
Averages	35.8	38.5	43.7	7.8	13.4	22.3	68.2	-0.8	0.6	-2.4

*Indicates countries officially designated by United Nations as "least developing" (LDCs).

... Indicates that country was not included in the initial 1970 baseline study.

71), and Singapore (WISP=70) [Table 5]. With the exception of Israel and Singapore, the remaining four Asian SLS are located in the East Asia subregion.

WISP scores for the SLS averaged 76 in 1990, a net increase of +35% over their group average of 57 in 1970 (Table 5). The rate of social development among the SLS is unusually rapid ; indeed, the region's SLS are developing more rapidly than any other subregion worldwide. Between 1970 and 1990 four SLS increased their worldwide WISP rankings :

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Republic of Korea (+10 WISP Ranks), Singapore (+10 WISP Ranks), Japan (+8 WISP Ranks), and Israel (+5 WISP Ranks) [Figure 10]. Though their WISP scores increased appreciably over the period, WISP rankings for Singapore and Taiwan remained unchanged.

The significant social development gains occurring in the SLS are reflected in their lower population growth rates, longer average life expectation, reduced rates of infant and child mortality, and substantial improvements in child and adult literacy levels (Table 2). The pace of economic development also is more accelerated in the SLS than elsewhere in the region (Table 4). The SL economic situation is characterized by larger and stronger economies, higher per capita income levels, lower inflation rates, and more favorable exchange rates for their domestic currencies. Per capita debt levels also are lower in the region's SLS than other countries. The status of women in the SLS also has improved appreciably since 1970 and is reflected in nearly universal female primary and secondary school participation levels, higher levels of adult female literacy, significantly reduced maternal mortality rates, and improved access to contraception (Table 3). SLS women continue to lag behind SL men, however, in opportunities for post-secondary education, important legal protections (UN, 1992), and in economic security (Vickers, 1991).

Overall, Asian SLS are among the most rapidly developing countries both in the region and worldwide. Small initial population size in combination with slow population growth rates and high levels of cultural homogeneity are three additional factors responsible for the favorable social development trends occurring in the SLS. Unfortunately, less than 7% of Asia population of 3,204 million people currently reside in the region's SLS.

Asia's Socially Least Developing Countries (SLDCs)

The region's eight "socially least developing countries" (SLDCs) are identified in Table 5 : Pakistan (WISP=25), Bangladesh (WISP=19), Nepal (WISP=17), Arab Yemen (WISP=15), Laos (WISP=15), Kampuchea (WISP=12), PDR Yemen (WISP=8), and Afghanistan (WISP=3). WISP scores for the region's SLDCs averaged just 14.3 in 1990, an average well below that recorded for the SLS, *and -21% lower than the average WISP score recorded for the SLDCs in 1970* (Table 5).

The most significant 10- and 20-year net social losses on the WISP occurred for PDR Yemen⁷⁾ (-53%), Kampuchea (-48%), Laos (-25%), and Afghanistan (-25%). PDR Yemen experienced the most significant social losses between both 1970-80 and 1980-90. Three SLDCs succeeded in increasing their WISP scores between 1970 and 1990, i. e., Arab Yemen (+50%), Nepal (+31%), Pakistan (+25%), and Bangladesh (+6%). None of the region's SLDCs succeeded in advancing its ranking on the WISP ; instead, very significant WISP rank losses occurred in Kampuchea (-27 WISP Ranks) and Afghanistan (-24 WISP

Ranks).

Despite important and hard won gains on the part of four SLDCs, their overall social situation, as-a-group, remains among the worst in the world. Indeed, their situation is not unlike that described by the Independent Commission on International Development Issues in 1980 (Brandt, 1980) :

Many hundreds of millions of people in the poorer countries are preoccupied solely with survival and elementary needs. For them work is frequently not available or, when it is, pay is very low and conditions often barely tolerable. Homes are constructed of impermanent materials and have neither piped water nor sanitation. Electricity is a luxury. Health services are thinly spread and in rural areas only rarely within walking distance. Primary schools, where they exist, may be free and not too far away, but children are needed for work and cannot be easily spared for schooling. Permanent insecurity is the condition of the poor. There are no public systems of social security in the event of unemployment, sickness or death of a wage-earner in the family. Flood, drought or disease affecting people or livestock can destroy livelihoods without hope of compensation.

The poorest of the poor... will remain...outside the reach of normal trade and communication. The combination of malnutrition, illiteracy, disease, high birth rates, underemployment and low income closes off the avenues of escape ; and while other groups are increasingly vocal, the poor and illiterate are usually and conveniently silent (p. 49).

Today, some 10% of the region's population live in its SLDCs, i. e., more than 300 million people (Table 2) ; their population growth rates continue to be among the highest worldwide.

Middle Range Social Development Performing Countries (MPCs)

The majority of Asia's population (83%) reside in the 18 countries classified in this study as "Mid-Range Performing" (MPCs) countries on the WISP (Table 5). The MPCs include the world's two population giants — China and India — as well as Indonesia, the world's fourth most populous country. MPCs are located in all four Asian subregions.

WISP scores for the MPCs ranged from 34 to 62 in 1990 with a group average of 45.8. MPCs increased their average WISP performances by +16% between 1970 and 1980 and by an additional +13% between 1980 and 1990. Thus, 20-year net social gains on the WISP of +32% in the MPCs are unparalleled by changes reported for any other group of MPCs worldwide. In fact, 20-year net social losses on the WISP were observed to have occurred

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in only one of Asian MPCs, i. e., Lebanon (−15%), a country that has experienced severe political and intra-regional conflicts during much of the period covered by this study.

Viewed from a broader perspective, Asia's most impressive social development successes are those taking place in the region's MPCs. The reasons for this are two-fold : 1) the MPCs contains the bulk of the region's population (83% of the region's and 49% of the world's total) ; and 2) even small social changes in these countries — both positive and negative — have the potential of impacting the daily lives of hundreds of millions of people. Fortunately, the social indicator data reported in Tables 2-4 provide evidence that nearly all of the recent social changes occurring in the MPCs are moving in a positive direction (e. g., slowed population growth, decreased infant and child mortality rates, higher adult literacy levels, and more rapid rates of economic expansion, etc.). Today, the majority of governments of the MPCs are better able to provide for the basic social and materials needs of their people than in they were in the past. The governments of the Asian MPCs will need to do much more however both to consolidate the social gains they already have made and to sustain that positive change process into the future.

The most alarming negative findings for the MPCs concerns the negative changes in WISP rankings that occurred for eight countries between 1970 and 1990. As presented in Figure 10, significant net rank losses on the WISP occurred for : Lebanon (−27 WISP Ranks), Myanmar (−19 WISP Ranks), Iraq (−14 WISP Ranks), Syria (−10 WISP Ranks), Viet Nam (−9 WISP Ranks), Sri Lanka (−7 WISP Ranks), Iran (−2 WISP Ranks), and the Philippines (−3 WISP Ranks). In every case, these rank losses are associated with long-standing civil unrest or intra-regional wars in which these countries have been engaged (Brogan, 1990 ; Ross, 1993). The percentage of central government expenditures allocated to military and defense purposes is also comparatively higher in these countries than that of other MPCs (World Bank, 1995).

Six Asian MPCs, on the other hand, succeeded in advancing their WISP rankings between 1970 and 1990 (Figure 10) : Indonesia (+28 WISP Ranks), Jordan (+10 WISP Ranks), Thailand (+5 WISP Ranks), Malaysia (+3 WISP Ranks), India (+5 WISP Ranks), and Turkey (+1 WISP Rank). The net gain in WISP ranks recorded for India and Indonesia are impressive given : 1) the magnitude of the increase ; 2) the size of their populations ; 3) the high levels of poverty and human deprivation that traditionally has existed in these countries ; and, 4) the comparatively disadvantaged level of social development from which they began their social recoveries. Indonesia, in particular, has been the most rapidly developing countries worldwide (+366% between 1970 and 1990), albeit the point at which the country began its recovery in 1970 was also among the world's lowest (1970 WISP=9)!

Country Performances on the Health Subindex

Figures 11 and 12 identify the region's social leaders (SLS) and socially least developed countries (SLDCs) on the Health Subindex. In general, the patterns reflected in these figure conform to those country performances observed on the more comprehensive WISP (Figure 10). However, important differences do emerge when examining country performances on the Health Subindex alone. In Figure 11, for example, North Korea attained the region's highest 1990 score on the Health subindex (19) followed by Israel (18.9), Singapore (18.7), and Japan (18.2). North Korea's initial leadership on the Health subindex was not long-

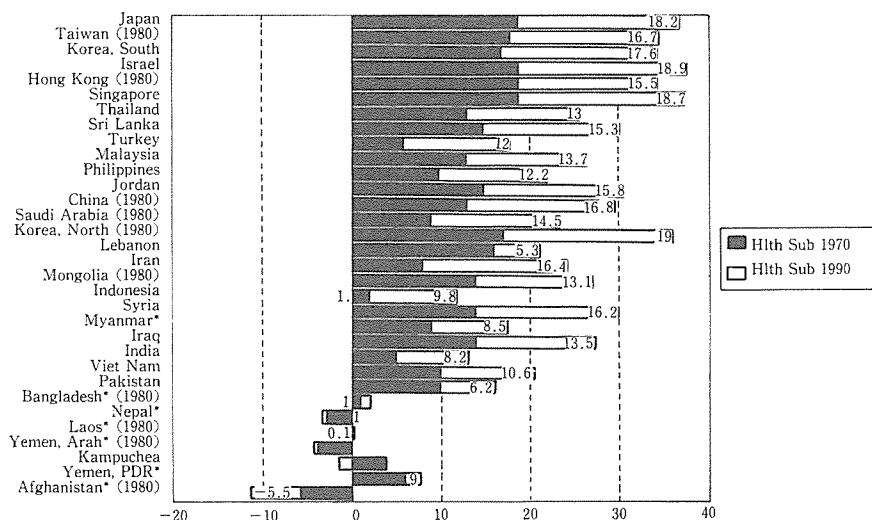


Fig. 11 Asian Health Subindex Scores Ordered by 1990 WISP Rank

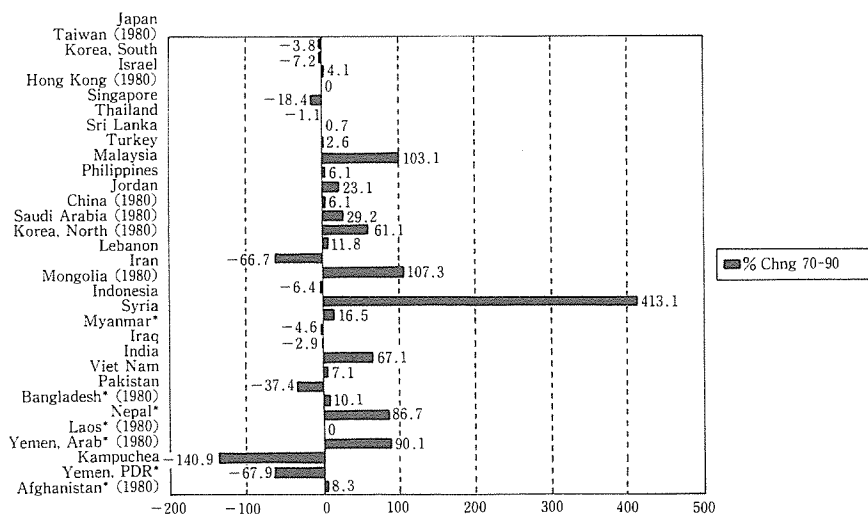


Fig. 12 Asian Health Subindex Scores by WISP Rank for 1990 and % Change 70-90

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lasting, though, due to the serious declines that country's overall economic situation following 1990 (UNDP, 1995).

As reported in Figure 12, the largest 20-year gains on the subindex were observed to have occurred in Indonesia (+413%), Iran (+107%), Turkey (+103%), Nepal (+87%), India (+67%), and Saudi Arabia (+61%). The region's most significant Health subindex losses occurred in Kampuchea (-141%), Yemen (-68%), Lebanon (-67%), and Pakistan (-37%) — all countries that had experienced serious wars during the time period covered. In general, country performances on the health subindex reflect: 1) general development trends occurring in the country and the region-as-a-whole; 2) national investments, or lack thereof, in the health, education, and other human development sectors; and, 3) the existence of wars or other forms of social unrest in particular countries and subregions. Rapid population growth, in combination with agricultural and economic failures, also account for many of the variations that observed for countries in the SLDCs grouping.

DISCUSSION

The governments of the Asian region have arrived at a critical crossroads. As reflected in this report, considerable progress has been realized in achieving the region's far-reaching social, political, and economic goals; however, much still remains to be done — especially in attaining its ambitious goals for the health sectors. The following issues loom large on the region's social development agenda, however, and must be resolved if further significant progress is to be achieved.

1. Continuing High Rates of Population Growth

Though lower than in the past, the region's overall rate of population increase averaged 2.5% in 1992 (Table 2). At this rate of growth the region's population is expected to double every 35 years. Hence, by the year 2020 the region's population is expected to exceed 4.7 billion persons, approximately 60% of the world's then total population (Figure 7). Even under the most optimistic of scenarios the majority of the region's governments are likely to experience challenges to their ability to respond to even the most basic social, material, and health needs of so many people.

2. Population Migration

Rapid population migration continues to be a dominant feature of Asian social development. The region's migration patterns are of two broad types, i. e., *internal* and *external*. Much of the region's migration has been of a *voluntary* nature, i. e., rural>urban migration or temporary resettlement abroad as contract workers. Much of the region's migration, though, has been *involuntary*, i. e., resulting from the region's recurrent wars (Brogan, 1990), civil unrest (Humana, 1992), and economic failures (World Bank, 1990). In general, then, the region's migration is driven by : 1) poverty ; 2) the search for new jobs ; 3) new social opportunities ; 4) the desire to be "modern" ; 5) the desire of many individuals to "distance themselves from the past" ; and, 6) wars and civil disturbances.

The social and economic impact of internal migration on the region has been tremendous. Migration has, for example : 1) accelerated growth in the number, size, and complexity of cities ; 2) given rise to enormous urban agglomerations in which 10 million or more persons reside ; 3) contributed to the appearance of new slums, "shanty towns," and other "temporary" communities in which large numbers of poor people live ; and 4) strained the capacity of local governments to make available even the most basic infrastructure required to sustain large numbers of people in deeply impoverished environments, e. g., water, sanitation, food, basic health and education services, etc.

The impact of external migration has been no less serious, especially given the drain of intellectual and other human resources from many of the region's poorest developing countries. The economic benefits associated with the foreign remittances sent home to remaining family members by migrants are small relative to the net social costs also associated with these remittances (e. g., breakdown of traditional family and kinship systems, accidents and injuries, non-transferability of social security benefits, etc.).

3. The Persistence of Diversity-Related Social Conflicts

Diversity-related social conflict remains a central challenge at the top of the region's social agenda. The most enduring of these conflicts are associated with : 1) *plurality* ; 2) *race* ; 3) *religion* ; 4) *ethnicity* ; 5) *language and accent* ; 6) *caste* ; and, 7) *social class*. In all cases the conflicts associated with the region's highly diverse populations results from asymmetric power relationships between members of more powerful and less powerful groups. The intensity of these conflicts is further accentuated during period of economic downturn and political uncertainty.

Today, diversity-related social conflicts can be found in every country of the region.

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These conflicts contribute directly to the region's on-going military conflicts and, both directly and indirectly, account for the slow rate of progress and high levels of disease observed to exist in the majority of SLDCs. These conflicts tend to be intense and pernicious ; they deprive the region of many resources that otherwise would be available to promote Asia's more rapid social, economic, and health development.

4. Economic Threats

The major economic threats confronting the region include : 1) unemployment ; 2) underemployment ; 3) participation in meaningless work ; 4) the absence of relaxation of even minimal occupational health and safety standards ; 5) continuing high levels of external indebtedness ; 6) increasing poverty ; and, 7) "aid fatigue" in the granting of Official Development Assistance (ODA) from OECD countries to the developing regions of Asia, Africa, and Latin America.

The region's on-going problems with widespread unemployment, underemployment, and promotion of at least minimal standards of occupational health and safety have been described fully elsewhere (Tabatabai, 1993). A summary of the region's current economic situation, including external debt levels, appears in Table 4. The region's changing poverty situation is summarized in Figure 13 and current patterns in the ODA flows to the Asia and other developing regions are identified in Figure 14.

All of these data confirm that, for the remainder of at least the present decade, the

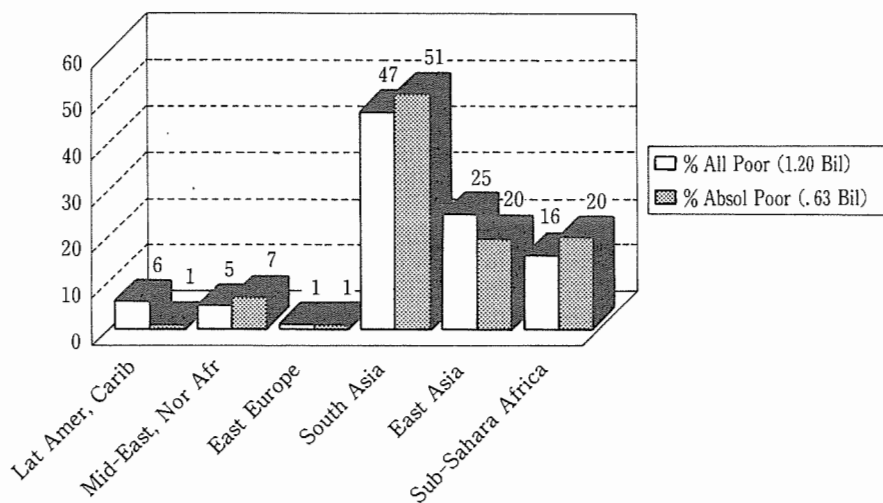


Fig. 13 World Poverty, 1985
Source : World Bank, 1990

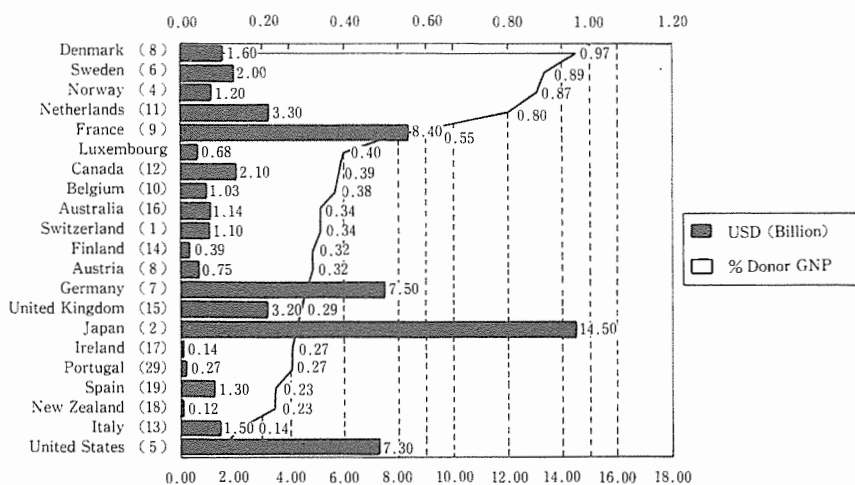


Fig. 14 Official Development Assistance, OECD Countries, 1995 (N=21)
 Source : OECD, 11 June 1996. [Brackets () indicates per capita income rank, 1993.]

majority of the region's poorest countries will be expected to "achieve more with less." Stringent controls are likely to continue to be placed on the range of choices available to national governments in their efforts to respond to local realities (including those that exist in the health sectors). ODA is likely to be even more "conditioned" than in the past, albeit greater attention is likely to be given to the social components of development than was the case in the recent past. Similarly, donor demands for "structural adjustment" and other macro-level economic reforms are likely to intensify in the immediate future. Even so, a broader mix of development "partners" will be needed by the region's governments in their efforts to implement large-scale projects.

5. Weakened Family and Kinship Systems

Traditional family and kinship systems are undergoing profound changes everywhere in the region. In the main, these changes are being driven by *economic* forces (e. g., subsistence agricultural failures, the availability of "high" paying jobs in urban factories and in countries both in and outside the region, etc.) but *social* and *political* forces figure centrally in the change process as well (e. g., rapid population aging, the desire of women to pursue careers outside the home, recurrent wars and civil conflict, the sudden emergence of tens of millions of political and economic refugees living away from their traditional homes and homelands, etc.).

Nearly all of these changes have occurred in the absence of adequate social welfare and effective health programs to assist people with the transition to other family forms (e. g.,

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unemployment and housing schemes, job training, work injury and illness support, child care, assistance to the aged, etc.). As a result, millions of persons — including entire families — have suddenly found themselves living in poverty and ill-health and unable to turn to traditional family and kinship systems for support. Today, neither Asia's more vulnerable families nor the majority of the region's developing economies are prepared to absorb the economic responsibilities associated with the profound social changes that are occurring in its traditional systems of social integration.

CONCLUSIONS

Asia has arrived at a crossroads with respect to its overall pattern of social, political, and economic development. Following decades of social deterioration, once again, the region is improving in its capacity to meet at least the basic social, health, and materials needs of its growing population. The region's recent development accomplishments have been particularly impressive in the economic and defense sectors. Significant gains also have been made in advancing the legal and economic status of the region's women and children, especially through substantially higher levels of female participation in formal programs of primary and secondary education. Modest, but important, improvements also are occurring in the education and demographic sectors — but considerably more progress must be made in these sectors if the region's recent economic successes are to be sustained over the long-term.

In general, the region's governments are succeeding less well in assuring universal access to basic health services — especially in the areas of secondary and tertiary health care. For many countries in the region, significant weaknesses also exist in their ability to control the spread of recurrent and new infectious diseases. Similarly, Asia's formal welfare efforts continue to be among the weakest worldwide. The absence of an even modest social safety net is especially troublesome given the reality that 70% of all the world's total poor reside in the Asian region. Popular participation in political decision-making also remains problematic in the region.

At the outset of a new century, the need is apparent for new — more dramatic — initiatives that will help to transform Asia into a more fully developed region. At a minimum, these initiatives must be informed by a renewed commitment to the three goals on which Asian leaders already agree: 1) the elimination of absolute poverty everywhere in the region; 2) enhanced popular participation in political decision-making; and, 3) a more equitable sharing of the region's abundant resources. The promotion of increasingly higher levels of health must also be at the center of Asia's new development strategies.

As emphasized by the region's heads of state who participated in the 1995 World Summit

on Social Development, the new initiatives also must foster more active participation in development planning and implementation on the part of a broader base of non-governmental and other private actors. The need also is apparent for greater integrative planning across sectors and, within sectors, between specialists working in both the governmental and non-governmental sectors. To be successful, a considerably strengthened approach to social development for the region will place people and the satisfaction of their basic needs at the center of the development process.

Notes

- 1) Portions of this paper were previously published as "Trends in Asian Social Development," *Social Indicators Research* 37(2) : 119-148. Reprinted with permission.
- 2) The region's clearest expressions of its development priorities are outlined in : ESCAP (1992b) *Social Development Strategy for the ESCAP Region Towards the Year 2000 and Beyond* and ESCAP (1988) *The Jakarta Plan of Action on Human Resources Development*.
- 3) "Adequacy of social provision" refers to the changing capacity of governments to provide for the basic social, material, and other needs of the people living within their borders, e. g., for food, clothing, shelter, and access to at least basic health, education, and social services, etc. (Estes, 1984).
- 4) For methodological reasons, the ISP's 46 indicators are divided between positive and negative indicators of social progress. On the Education Subindex, for example, higher *adult illiteracy* rates are negatively associated with social progress whereas gains in *primary school enrollment* levels are positively associated with overall improvements in development. Thus, the ISP achieves balance with respect the range of positive and negative factors that are used to assess changes in social progress over time.
- 5) For a fuller explanation of these procedures see Estes, 1988 : 199-209.
- 6) The world average for each subindex was set statistically at 10.0 (Estes, 1988 : Appendix C).
- 7) Arab Yemen and the People's Democratic Republic of Yemen were formally united as the Republic of Yemen in May 1990. The social development patterns that existed in each country prior to unification, then, are reported in this study.

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