

# FINANCING OF DISEASE CONTROL PROGRAMS IN INDIA

SUNIL NANDRAJ  
RAVI DUGGAL

February 1996

**Centre for Enquiry Into Health & Allied Themes**



Centre for Enquiry into Health and Allied Themes, Research Centre of Anusandhan Trust, Survey No. 2804 & 2805, Aaram Society Road, Vakola, Santacruz East, Mumbai – 400055, Maharashtra, India; Ph:(+91-22) 26673154, 26673571; Fax : 26673156; Email : [cehat@vsnl.com](mailto:cehat@vsnl.com); [www.cehat.org](http://www.cehat.org)

## FINANCING OF DISEASE CONTROL PROGRAMS IN INDIA

Preventable communicable diseases continue to be the main cause of morbidity and mortality in India inspite of the requisite technology being available now for over four decades. The major maimers are diseases like malaria, tuberculosis, leprosy, blindness, tetanus, measles, filaria, goitre etc.... The extent of their prevalence and the estimated deaths per year continues to be high. The high incidence of communicable diseases themselves viral, bacterial and parasitic in origin, is in turn due to poverty, poor nutritional status of the people and the lack of safe drinking water. Much of the policy focus over the years was organising mass campaigns to eradicate these diseases. Many of them were constituted as vertical National Programmes, funded and sponsored by the centre. The state instead of solving basic problems of the people with regard to nutrition, proper drinking water supply and sanitation, education, employment etc.. opted for treating the problem at a superficial level through the means of a fire-fighting approach for which it put in place an elaborate bureaucracy.

### Historical Context

While historic evidence does indicate that the State has paid attention to public health measures in urban areas right since the days of the Indus Valley Civilisation, through the Ashoka period and right upto the era of Mughals, a well organised structure to tackle public health problems is still far from being realised. The Indian systems of medicine like Ayurveda, Siddha and Unani did have a holistic approach which viewed health problems in the wider environmental context, but at the technological level they have been unable to cope with mass epidemics of diseases like malaria and cholera or endemic like leprosy and tuberculosis. Anyway the high density of population in India is clearly indicative that at that stage of development India was performing much better on the health front than most other countries in the world. But technological changes, followed by economic and social changes, due to the industrial revolution in the West made rapid progress in public health and medical care possible and changed drastically the disease profiles of many of these countries.

Modern medicine was introduced in India by the British but the policy of the British with regard to health was mainly to look after their own colonial settlers and their armed forces. Large scale extension of medical services to the rural areas and general public occurred only during periods of massive epidemic diseases such as plague, cholera and small-pox. Only a small elite segment of the Indian population had access to medical facilities set up by them, the rest of the population continued to rely upon the indigenous practitioners or what little medical care they could get from the few government dispensaries, private practitioners, missionaries and philanthropic institutions (**Banarjee. D, 1985**).

At the turn of nineteen forties, the report of the Health Survey and Development committee (Bhore Committee) submitted to the government in 1946, gave the following dismal description of health conditions in the country. The general death rate was 22.4 per 1000 population, infant mortality rate 162 (?) per 1000 live births,

maternal mortality rate 20 per 1000 births, expectation of life at 26.46 yrs for females and 26.91 yrs for males. Death rate of children under 10 yrs was 48%. The major killers were Cholera 2.4% of all deaths, Small-pox 1.1%, Plague 0.5%, Fevers (including malaria) 58.4%, Dysentery 4.2%, Respiratory diseases 7.6%, Others 25.8%. (All figures are for British India of 1944) (GOI, 1946). These conditions which were responsible for high morbidity and mortality typified the health problems of the Indian people at large.

### **Policy Perspectives of Disease Programs**

Communicable diseases were accorded adequate priority in overall health policy during the first two Five Year Plans (FYP). The policy with regard to disease programmes was with having mass campaigns to eradicate diseases. Vertical programmes were launched against malaria, small-pox, tuberculosis, leprosy, filarisis, trachoma and cholera. The bulk of the expenditure on disease programmes in the first two plans went into the vertical programmes. Entire cadres of workers were trained in control, eradication, surveillance for various diseases. This indicated that the state accepted the idea that modern medicine along with vaccination, inoculation, immunization etc. could solve the problem of eradication of various diseases. The Mudaliar Committee was set up in 1959 to evaluate the progress made in the first two plans and make recommendations about the future path of development of health services. The report records the substantial achievements in controlling certain virulent epidemic diseases. Malaria was considered to be under control. A majority of units in the country were at the surveillance stage in the operation and the motto of eradication was substituted by 'Control'. Deaths from malaria, cholera, small-pox were halved or sharply reduced and the overall morbidity and mortality rates had decreased. The crude death rate had fallen to 21.6 per 1000 for the period 1956-61. Infant mortality rate (IMR) was 135 per 1000 live births and the expectancy of life at birth had increased to 42 years. The report also stated that for a million and a half estimated open cases of tuberculosis there were not more than 30,000 beds available. (GOI, 1961) In terms of outlays nearly 20% on an average of the total outlay on health went into control of communicable diseases, 13.09% in the 1st plan and 22.40% in the 2nd plan were spent on disease programmes.

While this approach demonstrated a limited success it was not adequate to tackle the overall health problems of a nation where poverty often was the underlying cause. There was no cohesive policy of looking at people in totality. The basic cause of the various diseases was social i.e. inadequate nutrition, clothing and housing. There was no inter-sectoral co-ordination in the government. The policies and priorities of various programmes kept shifting. The high priority to disease programmes and especially malaria was due to the fact that malaria constituted an international threat. The national malaria eradication programme was started with the technical co-operation of the US and technical advice of the WHO. The tuberculosis programme involved vaccination with BCG, clinics, domiciliary services and after care. The emphasis was on prevention through BCG. These programmes depended on international agencies like UNICEF and WHO for necessary chemicals and vaccines. The policy with regard to the disease programmes was dictated by imperialist powers, as in other sectors of the economy. Along with financial aid came

political and ideological influence. The entire policy framework, programme, design and financial commitment etc. was decided by experts of various international organisations. **(Duggal, R., 1988).**

In the 3rd FYP the emphasis shifted to population control. This shift was due to the recommendation in 1966 of the UN advisory mission visiting India. In the fifth five year plan the focus in health was primary health care approach which was being imparted as the most appropriate solution to the health problems of the third world. The entire epidemiological trend was reversed in 1966 when the incidence of malaria cases rose from 100,000 cases annually between 1963-65 to 149,102 cases. There was sustained increase thereafter reaching a climax in 1971, and from 1974 onwards deaths due to malaria once again began to be reported. The extent of resurgence was the largest in Gujarat, Haryana, Orissa, Punjab, Uttar Pradesh, Maharashtra, Karnataka, and Madhya Pradesh, while Orissa and the North Eastern states have accounted for the largest number of malaria deaths **(GOI, 1982).**

Each vertical program had its own army of workers who were specially trained for that disease, but this resource was underutilised due to bad planning and allocative inefficiencies. In the same geographical area workers of different vertical programmes functioned without proper co-ordination and this resulted in a colossal waste of resources, human and financial. Presently there are more than a dozen national programs functioning in the country. The NMEP alone employed 150,000 workers spread over 400 units across the country to tackle both preventive and curative aspects of malaria control. The Chaddha Committee in 1963 had recommended the integration of health and family planning services and its delivery through one male and one female multi purpose worker per 10,000 population **(GOI, 1963).** The recommendation remained unimplemented until the eighties. Being vertical in nature the disease control programs became watertight compartments and got immersed in the rigidities of bureaucracy and became empires in themselves. The PHCs which were set up under the new pattern as suggested by the Kartar Singh Committee failed to integrate the disease programs with the rest of health care; on the contrary the obsession with family planning ruined the objectives set for achieving health care for all. The 4th plan accepted the failure of the communicable disease programme.

It was in the 5th Five Year Plan that the policy again changed, the government acknowledged that despite advances in terms of the infant mortality rate going down, life expectancy going up; health facilities were inadequate in the rural areas. With regard to the disease programmes intensification of the control and eradication of communicable disease was the objective laid down, this was to be done through the multi purpose worker (MPW) Scheme. Control of communicable diseases would become fully integrated with other health care programmes and made available to the common man through a network of MPW's. **(GOI, 1973).** Any increase in the incidence or any revision of strategy for a particular disease would thereafter be taken care of only by increase in the number of MPWs in localised areas coupled with technical expertise at district/state level. The scheme was launched with the objective of retraining the existing cadre of vertical programme workers. The various vertical programmes were to be fully integrated with the other health programmes and the delivery of services was to be done through the male and female MPW. Another major innovation in health strategy was launched, programme for training

village based health auxiliaries called the Community Health Volunteers (CHV) Scheme. They were part-time workers selected by the village, trained for 3 months in simple promotive and curative skills both in allopathy and the indigenous system of medicine. They were to be supervised by the MPW's. This step was taken on the recommendations of the Shrivastava Committee in 1975 (**GOI, 1975**). The main recommendation of the committee concerned having part-time health personnel selected by the community from within the community. They would act as a link between the MPW at the sub-Centre and the Community.

The National Health Policy of 1983 also spoke of comprehensive health care services. In this policy we find the commitment of India to the ALMA ATA 1978 conference's goal of health for all by 2000 A.D (**GOI, 1984**). This is clearly reflected in the philosophy, approach, strategies and targets set by the policy. The policy also emphasised an epidemiological approach to deal with health care problems. The establishment of a nation-wide chain of sanitary cum epidemiological stations providing an integrated package of services to eradicate/control diseases, besides tackling specific local environmental health problems was recommended. The policy also mentions the provision of an organised back-up support through the establishment of a well worked out referral system.

The sixth FYP document very clearly brings out the present status of the delivery of health care, "In spite of several significant achievements, the health care system obtaining in the country suffers from some weaknesses and deficiencies. There has been preoccupation with the promotion of curative and clinical services through city based hospitals which have by and large catered to certain sections of the urban population. The infrastructure of sub-centres, primary health centres and rural hospitals built up in the rural areas touches only a fraction of the rural population. The concept of health in its totality with preventive and promotive health care services in addition to the curative, is still to be made operational. Doctors and para-medicals are reluctant to serve in the rural areas. They are generally city oriented and their training is not adequately adapted to the needs of the rural areas particularly in the field of preventive and promotive health. The involvement of the people in solving their health problems has been almost non-existent". (**GOI, 1980-85**).

### **Research Studies on Prevalence of various Diseases**

There have been studies conducted by different organisations at various points in time which examined various aspects of the diseases prevalent in the country. These have been conducted by both government & non- government organisations. They have examined the prevalence, incidence of various diseases and evaluated the performance of national programs in operation to control them.

### **Studies on the National Programs**

The studies with regard to the national programs have broadly examined the program efficiency, management, nature and efficiency of the organisation, delivery systems, strategies & plans of action, utilisation, coverage, quality of care provided,

training and performance of staff, Knowledge Attitude Practice Behavior (KAPB), finances, overall performance and impact of the program. These studies could also be referred to as evaluation studies of the national disease programs.

These include one case study of the National Malaria Eradication Program (**Khan M E and Dey A. S, 1988**), one country wide survey of the National Leprosy Eradication Program (**DGHS, 1991**) and one in-depth study of the National Tuberculosis Program (**ICORCI, 1988**). No significant studies have been conducted on the National Filaria Eradication Program, National STD control program and National AIDS control program. The National AIDS control program is a new entrant in the list of the national disease control programs, but surprisingly no baseline studies have been conducted to calculate its prevalence and incidence. The various studies on AIDS that have been conducted are primarily KAPB in certain pockets of the country (**NICD, 1990, Sehgal PN et al, 1992**). Among the non-communicable diseases only the National Program for Control of Blindness (NPCB) (**ORG 1990**), has been assessed in different parts of the country. A review of research studies conducted by the Foundation for Research in Community Health (FRCH) found that there was an absence of studies with regard to the National Goitre Control program, National Mental health program and National Diabetes Control Program. In contrast special programs for mothers and children have been reviewed more frequently and at all levels. (**FRCH, 1994**)

The major findings of the studies with regard to national programs found that the national control programs were plagued by insufficient drugs, non-availability of transport facilities, over emphasis on family planning, lack of logistical support, inadequate infrastructural facilities, poor/deficient training of health workers, vacant posts, inefficient management among other problems. The above studies also found that there was gap between targets and achievements.

### **Studies on Incidence, Prevalence and Mortality**

There were three broad areas of studies which examined the incidence, prevalence, morbidity and mortality of various diseases present in the country. These were epidemiological surveys, epidemiology studies and other studies generating epidemiological information. These included studies conducted on utilisation, expenditure and baseline studies conducted which generated data on the incidence and prevalence of various diseases. The various studies examined the incidence and prevalence of the various kinds of morbidity and mortality in a given population. They broadly covered the extent, spread, trends and patterns of various diseases afflicting a community. Most of the studies covered small geographical areas ranging from a population within a single or few villages and very few drew samples from a national level. In many of the studies only certain specific diseases were covered. Many of the studies were also institutional based.

In the epidemiological surveys the primary objective was generating disease specific prevalence or incidence rates. The major diseases covered were diarrhoea, ARI, goiter and TB. With regard to TB, one epidemiological longitudinal study was conducted in 3 talukas of Bangalore district. This study examines the trend of TB infection over a 23 year period (**Chakraborty A K et al, 1992**). With regard to

morbidity studies the study conducted in West Bengal by AllHPH found that the estimated prevalence of TB to be 1.12 per 1000 (**AllHPH, 1993**). The results in Bihar of the study by the same institution found that the estimated prevalence of TB to be 7.61 per 1000 and leprosy at 6.77 per 1000. The study in the command areas of the Indira Nahar project in Rajasthan showed the main causes of morbidity to be malaria, gastro-enteritis and skin diseases (**Bhinde AS, 1991**). The epidemiological survey of two areas in Uttar Pradesh and West Bengal under the Ganga Action Plan found that the overwhelmingly dominant causes of morbidity in both the areas are water borne diseases, diarrhoea and parasitic diseases. (**Nath C.K.K. 1992**).

In the studies which have been conducted not with the objective of eliciting epidemiological data, but have generated some data the National Leprosy Eradication Programs independent evaluation has shown a rise in the proportion of multibacillary cases and childhood cases and a reduction in the disability rate. (**DGHS, 1991**). The evaluation of the blindness control program has shown the common causes of morbidity among patients with eye complaints to be conjunctivitis, refractive errors, cataract and vitamin A deficiency (**ORG, 1990**). Baseline studies of two districts in Tamil Nadu estimated a very high one-month prevalence of sickness of 15.4% while TB and leprosy prevalence has been estimated to be 5.3 and 1.8 per 1000 population (**NTI, 1988**).

Recently a the National Family Health Survey was carried out by the International Institute for Population Sciences. The survey elicited information for 5 health conditions which were malaria, blindness, TB, leprosy and physical impairment. Out of the 5 malaria was found to have the highest incidence, afflicting 3,324 per 100,000 population, blindness (partial or complete) 3,001 per 100,000, Tuberculosis 467, leprosy 120 and physical impairment 639 per 100,000 population (**IIPS, 1995**).

In spite of the various national programs for the various diseases in the country, the morbidity and mortality has not reduced. In fact there has been a resurgence of the diseases such as Malaria, TB, gastroenteritis etc. This, as seen earlier has been due to the failure of the national programs as the basic problem lies with its approach, prioritisation, funding and method of controlling the diseases. The basic health care services that needed to be developed in an integrated approach keeping the common person in focus was never present among the health planners. The sixth five year plan document commenting on the prevalence of various diseases brings out clearly the present situation existing with regard to the various diseases in the country. *Nearly 2% of the total population in the country is estimated to suffer from radiologically acute lesion of which 25% are sputum positive and infectious cases. The control measures adopted under the TB programme do not appear to have made any appreciative dent on the dimension of the problem and the incidence of TB continues to be high. With regard to leprosy 3.2 million leprosy patients are in the country, 20% are infectious and another 20% suffer from various deformities. According to a survey by the ICMR out of an estimated 9 million blind persons in the country about 5 million could be cured by proper surgical intervention. In addition 45 million persons reported to be otherwise visually impaired. It was also observed that the existing backlog of 5 million cases of cataract were likely to go up by another million cases every year. Diseases like TB, gastrointestinal infection, malaria, filaria, infectious hepatitis, rabies and hookworm accounted for 17.2% of morbidity and 20.8% of mortality in 1970. Other preventable diseases like diphtheria, whooping*

*cough, polio and tetanus accounted for 1.0% of morbidity and 0.4% mortality” (GOI, 1980).* Preventable diseases still continue to take their toll in terms of precious lives and these are of those mainly from the poorer sections of the population. One of the major reasons among others has been the underfinancing of expenditure on general health care and the allocative inefficiencies of funds assigned for the disease control programs across the various plan periods.

### **Sources, Methods and Related Issues**

The present compilation of data has been mainly from two sources, namely the Comptroller and Auditor General of India (CAG) and the Demand for Grants (DG) of the state governments. The CAG publishes the fiscal transactions of all states and the union government in a single document called the "Combined Finance and Revenue Accounts" (CFRA). These are the audited statement of accounts presented to the parliament and passed every year. The publication of the document takes a long time and there is a gap of nearly 3 to 5 years after the accounts are submitted. Although the CFRA contains accurate data on government health expenditures, the information is available only upto the major head level. e.g. under public health account expenditure on prevention and control of diseases incurred is available but further disaggregation on each of the disease programs and their break-up is not available. However, the DGs contain detailed and disaggregated information under various minor heads also. The DGs are by constitutional provisions submitted to the legislatures of the respective states by the respective departments / ministries to seek authorisation for spending. These documents usually contain Budget Estimates (BE) for the following year, revised estimates for the current year and actual expenditures for the previous years.

The data used in this study upto 1985-1986 is from the Combined Finance and Revenue Accounts" (CFRA) and for the subsequent periods is from Demand for Grants for each state governments. The present compilation only refers to expenditure incurred under the revenue account. Revenue account expenditure in the various programs refers to salaries, commodity purchases, travel, current transfers etc. Some times it also contains expenditure incurred on minor repairs, maintainance and minor works involving capital outlay below a monetary ceiling. To cull out expenditure on capital account though possible could not be carried out within the time limit and resources.

The present study's main objective is to analytically document patterns of expenditure incurred on some of the major selected diseases such as Malaria, Tuberculosis, Leprosy, Blindness and AIDS by various state governments in India. The present data compilation has been done for a period of 6 years, 1989-1990 to 1994-1995, Revised Estimates (RE) were taken for the year 1993-1994 and Budget Estimates (BE) for 1994-1995 and actual expenditures for other years.

Although the national disease programs fall under the sub-major head of prevention and control of diseases in the public health account, expenditure is incurred for the selected diseases under the medical account also. The study incorporated the expenditure incurred under both these accounts. The items of expenditure under the medical account for e.g. were TB hospitals, clinics and sanatorium, mobile units,

training of ophthalmologists, upgradation of hospitals, blood banks, surveillance units etc. The classification and booking of expenditures across states has some differences. In some of the states expenditure on each of the national programs was incurred under special programs such as Tribal Area Sub Plan, Border area Plan, sixth schedule etc. In addition expenditures were given separately in terms of plan expenditures, non-plan expenditures, centrally sponsored schemes, etc. Expenditure on AIDS, which is a recent national program, for majority of the states comes under the Medical Account.

A major problem faced during the compilation of data was the non availability of break up of expenditure by some of the states. As the present focus is on state level spending we have not been able to provide the totals for India as the detailed break up of expenditure was not available for some of the states for certain years.

One of the issues with regard to the expenditure on disease programs is that of the relationship between central and state governments. In India the provision of social services which include health is primarily the responsibility of the state governments. Though health is a state subject the centre exercises its discretion to initiate and fully or partly finance centrally sponsored schemes through the mechanisms of specific purpose grants to the states. The central government provides matching funds to the states for its various national diseases programs. e.g. the National Malaria Eradication Program is funded on an 50-50 matching basis by state and central budgets. The state government have little independent say in the formulation and design of such national programs. New schemes initiated during the plan period would be included under plan expenditure. After the period plan schemes revert to non-plan schemes after 5 years. States are wary of participating in projects initiated by the central government under plan budgets, since participation implies that the state will bear the responsibility for recurrent costs in subsequent plan periods. With regard to centrally sponsored program (other than FW) central financing component is usually the plan part of the expenditure. The average share of Central financing of communicable disease control programs is less than 25% (**World Bank, 1995**).

### **Expenditure on Overall Health**

The investments by the government for the health sector has been inadequate and insufficient to meet the demands of the people. It is clearly brought out that the state has over the years not been spending more than 3.5% of its resources on the health sector. The budgeted expenditure for 1994-1995 was at 2.63% of total govt. expenditure which is the lowest ever. In terms of proportion to the Gross Domestic Product the expenditure on health has been around only 1%, woefully short of the World Health Organisation's (WHO) recommendation of 5%. In terms of growth rates we find that the growth of expenditures on total government spending has been at a faster rate than on health. Expenditure on health has not kept pace with increase in government expenditures.

Various studies conducted on household level utilisation and expenditure on health have brought out the fact that the private household expenditure is nearly four to five times more than that of the state. The households due to the inadequate provision of public health services are forced to utilise the private health sector to meet their

health care needs. A substantial amount of their consumption expenditure is spent on health care. In addition to the underfunding of health services there are further cuts in the allocation to the health sector due to the Structural Adjustment Program being pursued in the country. In an effort to bring down the fiscal deficit to the desired level there is a compression on spending on health across the last decade. Analysis of data by National Institute of Public Finance and Policy gives evidence for this compression. It shows the state's share in health spending has increased from 71.6% in 1974-82 to 85.7% in 1992-93 and that of the grants from centre declined drastically from 19.9% in 1974-82 to 3.3% in 1992-93. Further the breakdown of central assistance to states reveal that central programmes or centrally sponsored programmes are the most severely affected. The Share of central grants for public health declined from 27.92% in 1984-85 to 17.17% in 1992-93 and for disease programmes from 41.47% in 1984-85 to 18.50% in 1992-93 (**NIPFP, 1993**). The investment by the state in the health sector is very small both in the overall economy as well as within the public domain.

In terms of per capita expenditure we find that the state spends a meager amount of Rs. 85 per year (1994-95) on health. This amount is inadequate to meet the needs of the people. Raising this to 5% of GDP would mean an additional expenditure of Rs. 300 billion. This sounds like a lot of money. But given a population of 860 million the total expenditure would be Rs. 435 per capita. At present day prices this amount is equivalent to 35 kgs. of wheat or 40 kgs. of rice or 7 kgs of ordinary cooking oil or a one way ordinary rail ticket between Bombay and Calcutta or payment for a well known medical consultant's fees for a single consultation or 9 GP consultations or 4 days wages of an organised sector industrial worker or 20 litres of petrol. This is not a very extraordinary demand. Given a political commitment, financing of the health sector along with other social sectors needs to be substantially strengthened because ultimately it is these provisions that become the foundation for improvement in the quality of life (**Duggal R, Nandraj S, Shetty S, 1992**).

As explained earlier health is a state subject and the states account for more than 90% of all expenditure on health, with the central government providing the balance of grants to certain areas of health care such as family welfare, disease programs etc. The trends across most of the states shows that expenditure on health as a proportion to government spending is on the decline. This is more sharper especially after 1985-86. The states which are better off in terms of socio-economic indices such as Maharashtra, Punjab, Gujarat, Karnataka, Harayana and Goa spend a higher per capita expenditure on health as compared to other states of Bihar, Rajasthan, Orissa, Madhya Pradesh. Kerala inspite of it being low socio-economically spends a higher percentage on health. The high percapita expenditure, especially in the North-East states should not be taken to mean a higher spending on health. This is due to two main reasons, having a sparse population living in hilly regions and a very high central assistance for the various programs. These states are no different from the other states in terms of health status of the people.

### **Expenditure on Prevention & Control of Diseases**

The expenditure on prevention and control diseases refers to expenditure incurred under the major head of public health account. As seen earlier there is long list of

programs and new ones keep getting added. These programs are for both communicable diseases and non-communicable diseases. On an average around 12% to 13% of total health expenditures are expended on the diseases control program, except during the first decade of planning (1950-51 to 1960-61) when expenditures were around one fourth of total health expenditures, which was the period of war against malaria. Out of a total outlay of Rs 723.79 millions for health, 23.69% was allocated for anti-malarial operations during the first plan period. The expenditure on diseases control programs has shown a declining trend as percentage to government expenditures. One of the major reasons has been the decline in central government grants to the states under the centrally sponsored schemes. The decline of expenditures on disease programs has been considerable in the states of Assam, Karnataka, Madhya Pradesh, Punjab, Rajasthan and Tamil Nadu. In terms of percapita spending what is allocated to the various disease control programs is minuscule. On an average only Rs 7 per capita per annum is spent by the major states such as Bihar, West Bengal, Assam, Bihar, Karnataka, Rajasthan and Tamil Nadu. In spite of the increase in morbidity and mortality due to various diseases the funding and allocation for these diseases continue to be inadequate to meet the needs of the people and shows a declining trend. In spite of the resurgence of the various diseases in the country there has been no indication of increase in funding for the control of various diseases afflicting the population.

Further, disaggregation of expenditure on disease programs shows that more than 50% of the expenditure is incurred on malaria. Leprosy accounts for 15% to 20% and TB averages just 3% to 4% of the total disease program allocations. Blindness is given even less than 1%. AIDS being a new entrant to the National programs, the expenditure is reflected in only some of the state budgets. The pattern of expenditure on the disease programs shows a sharp decline for the various diseases during the period under review in terms of proportion to total health and total disease programs expenditures, except with regard to the AIDS program. Further disaggregation of expenditure on each of the selected disease programs reveals that the major item of expenditure is incurred to maintain a huge army of personnel employed rather than on the provision of health services. This becomes clear as we examine the expenditures on various line items under each of the programs.

## **Malaria**

Malaria is one of the most common diseases prevalent in India and its resurgence is causing apprehension at various levels in the government. This apprehension does not get reflected in terms of allocation and expenditure for the malaria program. Though across the states we find that a major proportion of expenditure in the disease programs goes into malaria it does not mean that the entire amount is expended on the malaria control program. This is because in the past malaria workers constituted the largest workforce among the various vertical programs and changes in accounting structures usually lag, thus erstwhile malaria workers who may now be doing other jobs are still paid from the malaria account head! Presently under the Multi Purpose Worker scheme most male workers perform a variety of tasks but continue to get their salaries from the 'malaria' account head.

The severity of the malaria prevalence can be seen from data made available under the NFHS study done in 1992-93. This study recorded a 3 month incidence of 3324 per 100,000 population, that is over 3% of the population affected in a three month span. When multiplied by four we get a whopping 105 million cases of symptomatic malaria in a year. The rural-urban differential was also very sharp with the rural areas recording a prevalence nearly twice that of urban areas (NFHS). The situation post-1993 has worsened in a number of states like Rajasthan, Assam, Maharashtra and Orissa.

To combat this disease in the country the National Malaria Control Program was launched in 1953. The program was very successful in the initial stages. The number of malaria cases decreased from an estimated of 75 million in 1947 to less than 0.1 million and annual mortality fell from 0.8 million to almost zero. However the program suffered serious setbacks as the entire epidemiological trend was reversed in 1966 when the incidence of malaria cases started rising from 100,000 cases annually between 1963-65 to 1,49,102 cases. There was a sustained increase thereafter and from 1974 onwards deaths due to malaria once again began to be reported. Presently the country is facing a resurgence of malaria and the resurgence has been very high in the states of Rajasthan, Assam, Maharashtra, Andhra Pradesh etc. This is due to the growing resistance of the parasites to anti malarials, lack of basic health services, inadequate supply of drugs, and ofcourse environmental factors, etc.

Inspite of the morbidity and mortality levels increasing due to malaria the expenditure incurred by various states has been around 6% to 7% of the health expenditure, the exception being Haryana where the average expenditure works out to 12%. The expenditure on malaria across the selected years shows a declining trend both as a percentage to total health and disease programs, the exception being Gujarat. Ironically this decline has been sharp in Rajasthan, Tripura, Karnataka, Assam and Bihar. In Rajasthan it came down from 82.37% in 1989-90 as a proportion to disease programs to 70.19% in 1994-95. There should have been an increase in expenditure in the states of Rajasthan, Assam and Bihar as the resurgence of Malaria has been high in these states, but surprisingly expenditures have declined. Only in the state of Meghalaya there is an increase as a proportion to disease programs. Major states such as Andhra Pradesh, Assam, Bihar, Gujarat, Madhya Pradesh, Maharashtra, Uttar Pradesh on an average spend around 5-9 percent of their total health expenditure on this program. The states of Kerala, Karnataka and the North- eastern states spend less than 5% of their health expenditures on Malaria. Disaggregating expenditures as a proportion of total disease programs we find that except for Kerala and Goa, the rest of the states are spending more than half such expenditures on the malaria program, with Rajasthan spending around 70% and Haryana around 80% on malaria control.

As discussed earlier due to accounting problems the expenditure on malaria appears to be huge in comparison with other programs. Inspite of this it is clear from the tables that more than 75 to 80 percent of the expenditure is on salaries and establishment costs.

The expenditure on malaria program clearly reveals that there is a decline of expenditure inspite of the morbidity and mortality levels going up across various

states of the country. The NMEP has been a complete failure to combat the disease, the main reason being inadequate funding for the program and problems of allocative efficiencies especially with regard to the amount spent on non-salary components, like drugs, laboratory expenses etc...

### **Tuberculosis (TB)**

Expenditure on the TB control program is very paltry as compared to the incidence and deaths taking place in the country. On an average the states spend around only 2% on TB control as a proportion to total health expenditure and further there is a declining trend. About 1.5% of the total population is estimated to be suffering from radiologically active tuberculosis. Some 500,000 deaths occur every year most of them in children below 15 years. The incidence rate of infection is 0.8 percent in the 0-4 year age groups, 1.1 in the 5-9 age group and 2 percent in the 10-14 age group. Estimates suggest that by the year 2000 India may have at least 20 million active TB patients if present rates persist, with one-fifths of those being infectious.

The NFHS study recorded a point-prevalence of 467 per 100,000 population and here too the rural population recorded much higher prevalence of 512 per 100,000 in contrast to 314 in urban areas. Gender differences too were very high with prevalence among males being 564 per 100,000 and among females being 365. Age differentials revealed that the working age group and the 60+ age category recorded much higher rates than other ages, 546 and 1600 respectively (**IIPS, 1995**)

The expenditure on TB control across states as proportion to disease programs reveals a marked difference in terms of expenditure. The states of Gujarat, Arunachal Pradesh, Nagaland and Tamil Nadu spend more than 20%, Maharashtra and West Bengal around 10%, Andhra Pradesh, Assam Kerala and Rajasthan spend around 5% and Bihar, Haryana, Punjab and Madhya Pradesh spend around 1%. The expenditure on TB for many states gets reflected not only under the public health account but also the medical account, as expenditure on TB hospitals, clinics, dispensaries etc. In spite of TB being a major problem the expenditure on it is very meager to combat it. The TB program has failed miserably. A National evaluation of the TB program by a joint GOI-WHO-SIDA team revealed that TB cases tended to concentrate in the district TB centres and the drug supply was so poor that effective supply was available for less than one-third of the registered cases. (**Duggal R, 1993**). It must be noted that while drug allocations appear to be much better than other programs the overall budget is too low to handle the caseload of TB in the population.

The major problems facing the TB program include weak management, inadequate utilisation of health workers and sectoral resources, reliance on and abuse of radiology for diagnosis with low case finding rates and holding rates. There is an urgent need to use existing allocations more efficiently as also allocate more funds for this program.

### **Leprosy**

After malaria, leprosy is the second largest program in terms of expenditure across the major states of the country. The magnitude of the problem is very severe. Based

on the 1981 census population figures it was projected that there were an estimated 4.2 million leprosy patients in India at an average prevalence rate of 5.77 per thousand population. Some 25% of the total cases have deformities of varying degrees, 20 percent are children below the age of 15 years and 15 - 20 percent are infectious. Nearly half the total cases are concentrated in the states of Tamil Nadu (7.33 lakhs) and Andhra Pradesh (6.28 lakhs). These states, along with West Bengal, Bihar, Maharashtra, Orissa and Uttar Pradesh, account for 91.5% of the cases in India. About 4 lakh new cases develop annually and about 3 lakh cases are eliminated either due to cure or death.

The states of Andhra Pradesh, Kerala, Madhya Pradesh, Maharashtra, Orissa and West Bengal spend around 25% of their disease programs expenditure on leprosy followed by Karnataka, Assam and Gujarat who spend around 10% to 15% on the program. As in other programs the major share of expenditure on leprosy goes into salaries right across the various states, with some of the states such as Andhra Pradesh, Bihar, Kerala, Punjab, Tamil Nadu, West Bengal spending around 90% on the salary component of the program.

The Leprosy control program has been in operation since 1955 but only after 1980 it received high priority and it was redesignated as National Leprosy Eradication Program in 1983. The southern and western states have demonstrated excellence in implementation of the leprosy program with the result their endemicity has been substantially lowered in comparison to the central, northern and eastern states. The NFHS study recorded a prevalence rate of 120 per 100,000 substantially lower than the rate of 557 per 100,000 recorded in the 1981 census. Leprosy is perhaps better managed and is still a very strong vertical program but such a structure will not work beyond a point. This should be kept in mind for future planning. The use of resources under this program is also quite efficient and allocations too are quite adequate. Another reason perhaps for the much better success of this program is that the private practitioners generally avoid treating leprosy patients because of its long-drawn treatment where the private sector's irrationality in use of drugs will get exposed very easily.

The major problems facing the leprosy control program is the inadequacy of coverage, disability and ulcer care, detection of female patients, public awareness and social stigma.

## **Blindness**

The National Prevention and Control of Blindness was launched in 1976. The aim is to reduce blindness in the country from 1.4% to 0.3% by the year 2000 AD. This program is almost 100% centrally funded. There are about 9 million blind persons and another 45 million suffer from visual impairment. Roughly 8 out of 100 persons need eye care in some form or the other. The strategy changed in 1990 by setting up district level societies and district mobile units and involving medical colleges and NGOs.

For many of the states the expenditure on this item and its break up is not provided in the state budgets. The expenditure incurred on Blindness control program is less

than 1% as a proportion to the health expenditure across the various states in the country. There are volatile shifts in terms of expenditure as a proportion to total disease programs and in terms of trends across the selected years. This could be due to the problem of accounting as many state governments are booking only certain heads under this account for certain years e.g. Ophthalmic assistants training, holding eye camps etc. Here too we find that the major expenditure being incurred is on salaries.

### **Acquired Immuno Deficiency Syndrome (AIDS)**

AIDS is a newly emerging problem and has spread within the high risk segments of the population. Currently it is estimated that 1.6 million people are HIV positive in the country. It was recognised for the first time in 1981. An AIDS cell has been established in the Directorate General of Health Services. The focus is on promoting public awareness, blood safety, surveillance, clinical skills and sexually transmitted diseases control.

As the AIDS program is a recent addition to the national disease program we find that the expenditure is being incurred only from the year 1992-93, except for Maharashtra, Goa & and Mizoram where the expenditure is available for the previous year. Not all the states in the country are incurring expenditure under the AIDS program. The pattern of expenditure on this program reveals that as a proportion to the health expenditure it is less than 1%. As a proportion to the total disease programs the AIDS program started initially as a small program but it rapidly increased its share in the budget in subsequent years. In Andhra Pradesh during the year 1992-93 it was around 10.21% and in 1994-95 it went upto 24.45% as proportion to diseases program. This trend is seen across most of the states who are incurring expenditure on the AIDS program. This priority on AIDS is at the cost of other programs which are as fatal but unlike AIDS are easily curable. Another reason for the high priority is due to the international focus being on AIDS. This has been the major problem in our country right from the first plan, the priority given to a disease program is based on the agenda of international agencies. The experience appears to be similar to malaria in the fifties and sixties, and family planning after that.

### **Concluding Remarks**

While it has been possible above to present a critical discussion on the financing aspect of various disease programs it has very little meaning if it is not related to the actual prevalence of the diseases and how treatment is given to the population. A number of utilisation studies have been done in recent years which clearly indicate that the utilisation of public health facilities, especially in the rural areas has been quite restricted because the provisions and infrastructure are very inadequate. (**see Duggal R, Nandraj S, Vadair A, 1995**). These studies reveal that use of various public facilities range between 10% to 30% of illness episodes, the lower end being for rural health infrastructure like PHCs. However for specific diseases like leprosy, tuberculosis and sometimes even malaria the use of public facilities is a higher as revealed by the NSS 42nd round data which is at present being analysed by Gujarat Institute of Development Research.

Thus expenditure data must be viewed in this context of low utilisation of public health facilities. What this means is that the allocations in the public budget for these diseases may be adequate given the fact that utilisation is low, and it also means there is a lot of inefficiency in the system which needs immediate correction.

However the data on prevalence of each of the diseases discussed above is very inadequate. This is because health programs lack an epidemiological basis in planning and implementation. Though not very accurate the only organised set of national data on these diseases is available through the NFHS studies and we will use it here as a tool for a proximate analysis of expenditure in the context of prevalence of the selected diseases. The last two tables appended make an attempt at converting the absolute expenditures on each of these diseases into meaningful numbers by working out the per prevalent case expenditure. Since the NFHS data is for 1992-93 we have also taken the expenditure data for 1992-93 to work this out. The tables are self-explanatory and help make some sense of the financial data which has been discussed in the preceding paragraphs.

Thus we see that the performance of the leprosy program is perhaps the best in terms of fund allocations, and tuberculosis and malaria are more or less similar and the blindness program comes out to be the worst performer. While this judgment for leprosy is true and demonstrated by various evaluation studies, that for TB and malaria is only academic for the reasons discussed in the preceding paragraphs; that is, the malaria budget is eaten away mostly by salaries and often of workers who may not be doing any malaria work, that actual budget needed to fight malaria is not as high because drugs and chemicals are not as expensive, and the TB budget genuinely needs much higher allocations if it has to treat effectively patients which come to the public facilities.

To conclude we would like to say that this dissipated and program based approach is itself responsible for the large wasteful expenditure. We have created a monstrous bureaucracy which now perpetuates itself and wants to keep its empire intact. For the sake of comprehensive health care we will have to forgo this program based approach and work out a structure which provide comprehensive health care universally for all. Its high time we began to talk about such an approach which of necessity will have to be one of a public-private mix, but a highly organised and regulated one.

*(We gratefully thank Ms Kawaljeet Kaur and Ms. Asha Vadair, Research assistants who with great care collected the data from the voluminous state budgets. We also take this opportunity to thank The Division of Fiscal Analysis, Department of Economic Analysis and Policy, Reserve Bank of India, Bombay for giving access to the budget documents.)*

## **References**

Banarjee. D, Health & Family Planning Services in India, New Delhi Lokprakash, 1985.

Bhinde AS, Health Impact of Indira Gandhi Nahar Project, NCAER, New Delhi, 1991).

Chakraborty A K Chaudhuri K, et al, Tuberculosis Infection in a rural population of South India : 23 year Trend, NTI, Bangalore, 1992).

Comptroller & Auditor General of India, Combined Finance & Revenue Accounts, New Delhi, respective Years

Demand for Grants, Respective State Governments, respective years

DGHS, National Leprosy Eradication Program - 4th Independent Evaluation, Leprosy Division, New Delhi, 1991.

Duggal R., Health Policy & Financing, (Papers & Notes of Ravi duggal), 1993.

Duggal R, Nandraj S, Shetty S, State Sector Health Expenditures, A Database : All India and States 1951-85, FRCH, Bombay, 1992.

Duggal R., Nandraj S., Vadair A., Health Expenditure Across States Part I & Part II, Special Statistics 10, Economic & Political Weekly, April 15th & 22nd 1995, Bombay.

FRCH Health Research Studies in India, A review & Annotated Bibliography, 1994, Bombay.

Duggal R, Health Care, Health Policy and Underdevelopment in India, Radical Journal of Health, June 1988.

GOI Committee on Integration of Health Services (Chadha Committee) Report, New Delhi, Ministry of Health, 1963.

GOI, Committee on Multipurpose workers under Health & Family Planning Program (Kartar Singh Committee), Report, New Delhi, Ministry of Health & Family Planning, 1973.

GOI, DGHS, pocket book of health statistics of India 1981 N. Delhi CBHI 1982.

GOI, Group on Medical Education and Support Manpower (Shrivastava Committee), Health Services & Medical Education : A Program for Immediate Action, New Delhi, Ministry of Health & Family Planning, 1975)

GOI, Health Survey & Planning Committee (Mudaliar Committee), Report Vol I, New Delhi, Manager of Publications, 1961

GOI, Health Survey and Development Committee (Bhore committee) Report vol. 1-4, (New Delhi: manager of publications, 1946).

GOI, Planning Commission, 6th Five year plan, 1980-85, New Delhi, Planning commission, 1980.

AIHPH, Evaluation of the Impact on Community Health & Environment of the River valley Project - Kangsabatti, 1993.

GOI, The National Health Policy, New Delhi, Ministry of Family Welfare, 1984.

ICORCI, Indepth Study of National Tuberculosis Program in India, 1988.

International Institute for Population Sciences, National Family Health Survey, 1992-93, All India, , Bombay, August 1995.(Pg. 205, Tables 8.2)

Khan M E and Dey A. S, An Indepth Evaluation of National Malaria Eradication Program. A case Study of Bihar & Haryana, ORG, 1988,

Nath C.K.K. Impact Assesment of Ganga Action Plan on Public Health, AIHHPH, Calcutta, 1992.

National Institute of Public Finance and Policy (NIPFP), (Draft Report), 1993 April, Structural Adjustment Program- Its impact on the Health Sector, New Delhi.

NTI, Report on the Base line survey - DANIDA health care project - Vol 1 - Household survey and program implications, Bangalore, 1988.

ORG, The National Program for Control of Blindness - A situational Analysis, 1990).

World Bank, India, Policy & Finance Stragies for Strengthening Primary Health Services, Report No. 13042-In, Washington, May 1995

**Table No : 17**

**Expenditure Incurred Per case  
(in rupees)**

*The per case expenditure is a normative figure because it is well known that a) actual utilisation of these government programs is only by one fourth to one third of the population and b) the establishment costs (salaries etc.) takes away about three fourth of this expenditure.*

STATE	MALARIA	TUBERCULOSIS	LEPROSY	BLINDNESS
ANDHRA PRADESH	77	186	2445	3
ASSAM	29	52	2448	24
BIHAR	37	19	1175	2
GUJARAT	29	587	4693	18
HARYANA	210	567	189	43
JAMMU & KASHMIR*	NA	NA	NA	NA
KARNATAKA	157	1001	427	5
KERALA	274	96	5875	12
MADHYA PRADESH	14	214	811	9
MAHARASHTRA	33	529	3002	2
ORISSA	13	146	2185	4
PUNJAB	76	567	390	22
RAJASTHAN	22	207	281	6
TAMIL NADU	NA	167	1438	28
UTTAR PRADESH	15	158	891	8
WEST BENGAL	109	448	2484	25
ARUNACHAL PRADESH	43	658	2431	280
GOA	212	3426	24070	47
MIZORAM	52	1985	12444	136
HIMMACHAL PRADESH	186	593	3628	49
MANIPUR	46	270	1690	56
MEGHALAYA	42	733	19265	139
NAGALAND	116	1386	2919	68
SIKKIM	NA	NA	NA	NA
TRIPURA	33	124	NA	59
INDIA	NA	NA	NA	NA

**Notes :** 1) \* = Refers only to Jammu region.

2) The expenditure figures for Orissa and Manipur refer to year 1991-92

**Source :** *Prevalance data* : National Family Health Survey 1992-93, All India, International Institute for Population Sciences, Bombay, August 1995. (Pg. 205, Tables 8.2)

*Expendiute data* : Respective state government Demand for Grants, Various Years

\*\*\*\*\*TO INSERT FIGURES FROM TABLE 2

**Table No : 1**

**Revenue Expenditure on Health**  
(as percentage of total government revenue expenditure)  
(Figures in parenthesis are in rupees per capita)

YEARS	1950-51	1955-56	1960-61	1965-66	1970-71	1975-76	1980-81	1985-86	1991-92	1992-93	1993-94	
<b>Union Government</b>	0.47	1.30	2.53	0.49	0.58	0.51	0.48	0.52	0.45	0.42	0.45	
<b>Andhra Pradesh</b>	-	13.74 (0.60)	8.89	7.83	8.74	7.88	7.55	6.61	5.82	5.87	5.75	
<b>Assam</b>	6.74	6.25	7.51	7.26	6.20	7.11	6.51	6.75	5.23	5.57	5.14	
<b>Bihar</b>	6.32	10.40	9.02	7.05	6.53	6.33	5.72	5.68	5.66	5.87	6.24	
<b>Gujarat</b>	-	-	6.22	7.44	9.75	8.96	7.11	7.51	5.42	4.79	5.09	
<b>Haryana</b>	-	-	-	-	8.09	6.84	5.94	7.00	4.19	4.56	3.60	
<b>Jammu &amp; Kashmir</b>	-	-	8.58	6.18	6.68	5.03	7.35	7.61	6.37	6.87	7.71	
<b>Karnataka</b>	0.35	6.06	5.83	5.69	6.32	8.82	6.74	6.60	5.96	6.44	6.56	
<b>Kerala</b>	-	8.48	9.67	10.41	9.16	9.51	8.55	7.85	6.92	6.29	7.13	
<b>Madhya Pradesh</b>	2.48	15.30	8.42	8.67	9.66	7.24	6.77	6.69	5.78	5.48	5.65	
<b>Maharashtra</b>	6.22	7.13	7.60	6.45	8.38	6.95	6.53	5.97	5.25	5.33	5.34	
<b>Orissa</b>	5.80	4.88	7.29	7.59	7.69	7.13	7.47	7.38	5.94	5.63	6.00	
<b>Punjab</b>	3.80	5.57	7.12	6.65	7.22	7.03	7.04	7.24	4.32	5.78	5.32	
<b>Rajasthan</b>	-	11.17	9.89	9.24	9.64	8.52	8.28	8.11	6.85	6.64	6.34	
<b>Tamil Nadu</b>	7.05	8.03	9.12	7.72	8.66	9.17	7.66	7.70	6.72	5.73	6.64	
<b>Uttar Pradesh</b>	5.79	5.02	5.13	6.01	6.79	6.77	6.50	9.75	6.00	5.81	5.48	
<b>West Bengal</b>	9.89	8.52	9.48	8.80	8.80	10.94	9.83	8.92	7.31	7.55	7.15	
<b>Arunachal Pradesh</b>	-	-	-	-	-	9.25	6.86	5.85	6.28	6.37	5.64	
<b>Goa, Daman &amp; Diu</b>	-	-	-	15.23	15.01	12.67	10.29	8.22	8.33	8.10	7.87	
<b>Mizoram</b>	-	-	-	-	-	5.82	7.03	6.80	5.21	5.10	4.97	
<b>Pondicherry</b>	-	-	-	15.12	13.96	14.56	10.60	9.11	8.91	7.93	8.07	
<b>Himachal Pradesh</b>	-	10.85	-	7.33	6.39	7.46	8.24	7.89	7.24	7.73	8.08	
<b>Manipuri</b>	-	-	-	5.61	7.17	7.39	7.68	6.15	5.74	6.01	5.24	
<b>Meghalaya</b>	-	-	-	-	11.04	6.83	11.12	9.20	6.73	7.19	7.51	
<b>Nagaland</b>	-	-	-	5.85	7.24	6.74	6.11	6.96	4.17	*	5.39	
<b>Sikkim</b>	-	-	-	-	-	4.98	4.17	4.83	6.01	6.81	6.10	
<b>Tripura</b>	-	-	-	7.71	7.91	7.01	5.07	6.53	5.54	4.90	5.16	
<b>All India</b>	<b>2.69</b>	<b>4.36</b>	<b>5.13</b>	<b>3.28</b>	<b>3.84</b>	<b>3.49</b>	<b>3.29</b>	<b>3.29</b>	<b>3.11</b>	<b>2.71</b>	<b>2.71</b>	

Notes : 1) - = Not applicable

2) 1993-94 are Revised Estimates

3) 1994-95 are Budget Estimates

**Source:** Up to 1985-86, Combined Finance & Revenue Accounts, Comptroller and Auditor General of India, respective years

Others years, Demand for Grants, respective states.

**Table No : 2**

**Revenue Expenditure on Health**  
(In Rupees per capita)

Year	1950-51	1955-56	1960-61	1965-66	1970-71	1975-76	1980-81	1985-86	1991-92	1992-93	1993-94	1994-95
Andhra Pradesh		0.60	2.10	3.15	5.96	8.20	16.36	30.66	55.09	60.51	65.06	68.91
Assam	0.76	1.58	2.74	4.55	5.12	7.39	11.69	30.67	49.51	59.37	61.56	79.93
Bihar	0.42	1.33	1.41	1.72	2.88	3.96	7.78	15.82	30.69	42.62	49.35	58.81
Gujarat	-	-	1.55	3.57	8.01	11.24	18.83	39.35	67.25	69.09	76.01	80.00
Haryana	-	-	-	-	7.53	11.13	18.43	40.89	56.39	62.49	71.32	76.22
Jammu & Kashmir	-	-	2.92	4.90	10.02	13.54	32.84	61.35	122.13	149.77	162.08	152.96
Karnataka	0.02	0.75	1.97	2.70	5.44	11.37	16.28	33.81	64.30	76.80	88.49	103.84
Kerala	-	1.09	2.63	4.45	7.03	14.43	22.43	41.64	75.43	76.86	103.77	122.07
Madhya Pradesh	0.27	1.56	1.72	2.94	4.73	6.61	13.18	25.37	40.40	48.33	58.14	62.67
Maharashtra	-	-	2.29	3.50	7.64	11.26	19.94	38.09	65.13	74.15	80.74	77.87
Orissa	0.48	0.70	1.48	3.51	4.90	8.15	15.50	25.54	48.48	52.05	66.72	64.40
Punjab	0.85	2.10	3.78	6.73	7.26	12.90	23.06	45.55	87.53	93.68	102.09	105.03
Rajasthan	-	1.56	2.23	4.04	8.23	9.87	16.61	31.36	61.76	71.30	77.62	92.56
Tamil Nadu	-	-	2.47	3.73	6.76	11.42	18.23	36.25	66.82	84.98	95.46	100.75
Uttar Pradesh	0.47	0.62	1.00	1.93	3.18	5.50	10.07	29.74	43.76	50.44	50.18	52.02
West Bengal	1.41	1.70	2.52	3.72	6.02	12.03	20.08	32.89	55.82	59.85	68.71	71.90
Arunachal Pradesh	-	-	-	-	-	33.47	66.78	110.55	189.97	235.50	235.81	283.74
Goa, Daman & Diu	-	-	-	15.18	22.69	38.27	49.16	100.74	232.25	254.55	280.01	280.65
Mizoram	-	-	-	-	-	45.49	77.35	151.36	232.15	254.52	276.40	245.22
Pondicherry	-	-	-	12.86	23.30	4.46	58.37	119.44	219.12	250.76	286.43	285.36
Himachal Pradesh	-	1.33	-	4.21	11.53	16.71	36.13	69.02	133.94	164.29	197.09	227.24
Manipuri	-	-	-	4.55	10.18	16.10	37.77	59.20	114.57	122.65	109.68	92.46
Meghalaya	-	-	-	-	10.54	15.99	49.67	80.60	127.08	145.98	185.16	182.78
Nagaland	-	-	-	13.02	34.27	44.20	72.62	158.73	159.22	*	256.35	205.84
Sikkim	-	-	-	-	-	17.54	39.97	104.08	227.90	284.44	277.32	324.00
Tripura	-	-	-	5.47	8.84	12.86	21.56	27.80	96.54	91.30	106.73	116.91
All India	0.61	1.27	2.45	3.41	6.11	9.91	17.35	35.52	60.13	70.15	79.44	85.10

**Notes :** 1) - = Not applicable

2) 1993-94 are Revised Estimates

3) 1994-95 are Budget Estimates

**Source:** Up to 1985-86, Combined Finance & Revenue Accounts, Comptroller and Auditor General of India, respective years

Others years, Demand for Grants, respective states.

**Table : 3**

**Plan outlay on Diseases Programmes India**  
(in millions of Rs.)

Period	Diseases program	Health	Health & Family Planning	Ratios
--------	------------------	--------	--------------------------	--------

	(1)	(2)	(3)	1 as % to 2	1 as % to 3
1st Plan (1951-56)	171.52@	723.79	749.19	23.69	22.89
2nd Plan (1956-61)	580.00	1750.00	1830.00	33.14	31.69
3rd Plan (1962-66)	705.00	2095.00	2364.00	33.65	29.80
Plan Holiday (1966-69)	-	1401.00	2153.00	-	-
4th Plan (1969-74)	1270.10	4335.30	7485.30	29.29	16.96
5th Plan (1974-79)	1686.10	7690.00	13120.00	21.18	12.85
6th Plan (1980-85)	5240.00	18210.50	28310.50	28.77	18.50
7th Plan (1985-90)	10126.70	33928.90	66419.50	29.84	15.23

Note : @ refers only to anti-malaria programmes.

Source : Plan Documents various years.

## COMBINE TABLES 5 AND IF POSSIBLE 6

Table : 4

### Expenditure on National Disease Program (in rupees million)

Year	1950-51	1955-56	1960-61	1965-66	1970-71	1975-76	1980-81	1985-86	1991-92	1992-93	1993-94	1994-95
Union Government	3.80	42.58	157.91	40.28	52.73	23.02	61.20	114.40	207.59	366.49	342.00	\$
Andhra Pradesh	-	2.39	10.72	17.19	28.03	53.93	131.61	312.37	648.66	711.41	841.02	947.7
Assam	1.14	2.67	3.14	4.97	3.83	25.27	40.19	121.46	111.23	*	134.72	136.7
Bihar	1.85	16.15	24.10	23.12	24.47	31.71	70.26	134.70	*	445.24	537.00	576.3
Gujarat	-	-	5.87	18.99	51.09	83.28	93.70	208.59	337.89	364.20	435.87	494.5
Haryana	-	-	-	-	24.27	19.62	47.72	124.07	144.45	158.06	202.82	214.0
Jammu & Kashmir	-	-	1.15	1.96	*	*	9.88	13.04	*	*	*	*
Karnataka	0.12	0.91	7.52	7.42	11.44	39.30	73.74	138.80	158.52	190.19	252.77	283.1
Kerala	-	0.05	0.53	2.12	1.14	18.63	29.95	139.80	84.15	105.13	166.63	224.8
Madhya Pradesh	1.56	1.35	8.59	20.97	33.38	50.96	106.79	168.90	291.95	33.66	388.97	407.4
Maharashtra	3.37	8.78	12.26	18.83	72.72	139.91	192.48	431.95	630.16	727.41	774.23	807.5
Orissa	0.60	2.39	6.01	20.54	18.97	26.66	76.59	117.08	201.14	213.66	254.05	242.4
Punjab	1.09	0.80	11.44	17.77	25.23	34.44	53.15	114.08	154.60	201.53	142.66	159.5
Rajasthan	-	0.01	9.85	14.57	19.09	47.75	104.11	145.97	254.43	295.12	322.50	372.7
Tamil Nadu	3.13	2.32	16.69	5.17	6.38	18.30	37.13	54.58	459.66	568.28	650.54	370.5
Uttar Pradesh	4.33	5.41	3.38	40.04	59.39	118.97	216.96	502.00	1160.86	1389.79	1243.00	1388.
West Bengal	2.73	4.16	1.35	1.71	12.49	53.78	95.63	163.94	386.84	401.11	462.84	495.5
Arunachal Pradesh	-	-	-	-	-	4.43	8.71	19.75	16.87	28.62	39.57	32.6
Goa, Daman & Diu	-	-	-	2.69	0.88	3.50	5.92	8.22	13.40	17.47	19.29	18.0
Mizoram	-	-	-	-	-	2.99	6.58	12.21	18.38	21.36	27.62	23.4
Pondicherry	-	-	-	0.10	0.54	1.87	4.03	8.28	161.29	19.07	22.17	23.5
Himachal Pradesh	-	0.02	-	2.41	5.38	8.68	23.53	41.72	77.21	115.44	123.60	143.2
Manipuri	-	-	-	1.04	2.27	3.86	17.31	161.19	39.80	*	*	*
Meghalaya	-	-	-	-	0.04	5.51	17.29	16.31	33.31	12.41	11.18	14.8
Nagaland	-	-	-	0.54	1.36	4.11	8.28	22.03	32.93	*	46.41	51.6
Sikkim	-	-	-	-	-	0.67	1.50	3.89	8.31	11.40	9.32	12.6
Tripura	-	-	-	0.96	1.85	3.81	6.10	19.81	17.13	25.55	28.84	34.6
All India	23.73	89.49	280.51	263.40	456.86	824.95	1540.33	3174.14	5505.76	6722.49	7479.62	7477.

Notes : 1) - = Not applicable

2) \* = Not Available; ...

3) \$ = 1994-95 (BE) union government breakup not available.

4) 1993-94 are Revised Estimates

5) 1994-95 are Budget Estimates

Source: Up to 1985-86, Combined Finance & Revenue Accounts, Comptroller and Auditor General of India, respective years

Others years, Demand for Grants, respective states.

**Table No : 5**

**Expenditure on National Disease Program  
(as percentage of total health expenditure)**

Year	1950-51	1955-56	1960-61	1965-66	1970-71	1975-76	1980-81	1985-86	1991-92	1992-93	1993-94	1994-95
<b>Union Government</b>	19.03	60.54	58.97	26.52	18.54	4.35	5.99	4.47	5.41	6.56	4.93	\$
<b>Andhra Pradesh</b>	-	12.06	14.19	13.75	10.81	13.55	15.02	17.00	17.29	16.85	18.09	18.79
<b>Assam</b>	18.12	17.46	10.32	8.49	5.11	19.18	17.28	18.77	9.90	*	9.41	7.26
<b>Bihar</b>	11.23	28.53	36.92	26.18	15.06	12.68	12.91	10.90	*	11.55	11.75	10.34
<b>Gujarat</b>	-	-	18.41	22.50	23.89	24.37	14.60	14.09	11.91	12.24	13.04	13.76
<b>Haryana</b>	-	-	-	-	32.11	15.35	20.04	20.75	15.17	14.58	15.95	15.33
<b>Jammu &amp; Kashmir</b>	-	-	11.06	9.78	*	*	5.02	3.10	*	*	*	*
<b>Karnataka</b>	26.09	5.61	16.22	10.39	7.17	1.040	12.22	10.02	5.37	5.28	5.96	5.58
<b>Kerala</b>	-	0.30	1.19	2.49	0.76	5.52	5.25	12.33	3.78	4.57	5.29	5.98
<b>Madhya Pradesh</b>	22.25	8.44	15.44	19.25	16.94	16.44	15.53	11.25	10.63	9.90	9.34	8.84
<b>Maharashtra</b>	7.56	13.05	13.52	11.96	18.87	21.95	15.37	16.03	11.95	11.81	11.26	11.87
<b>Orissa</b>	8.61	21.13	23.20	29.66	17.63	13.54	18.74	15.84	12.84	12.46	11.33	10.98
<b>Punjab</b>	13.92	3.75	27.17	21.39	25.66	17.60	13.73	13.55	8.53	10.18	6.48	6.90
<b>Rajasthan</b>	-	0.04	21.90	15.70	9.00	16.12	18.30	11.91	9.10	8.89	8.66	8.18
<b>Tamil Nadu</b>	7.47	5.30	20.08	3.71	2.29	3.58	4.21	2.89	12.13	11.61	11.65	6.20
<b>Uttar Pradesh</b>	14.42	12.78	4.57	25.64	21.09	21.70	19.44	13.52	18.60	18.83	16.51	17.35
<b>West Bengal</b>	7.34	8.00	1.53	1.16	4.68	9.04	8.72	8.14	9.93	9.37	9.20	9.18
<b>Arunachal Pradesh</b>	-	-	-	-	-	24.06	20.70	23.82	9.98	13.21	17.66	11.73
<b>Goa, Daman &amp; Diu</b>	-	-	-	23.95	4.51	9.43	11.05	6.92	4.85	5.67	5.60	5.13
<b>Mizoram</b>	-	-	-	-	-	16.03	17.36	13.67	11.00	11.19	12.81	11.83
<b>Pondicherry</b>	-	-	-	1.85	4.93	7.79	11.51	9.90	8.96	8.84	8.70	8.97
<b>Himachal Pradesh</b>	-	0.58	-	18.24	13.49	13.42	15.22	12.86	10.92	13.04	11.40	11.24
<b>Manipuri</b>	-	-	-	24.59	20.84	19.18	32.28	16.88	18.38	*	*	*
<b>Meghalaya</b>	-	-	-	-	0.38	29.45	25.98	13.06	14.32	4.50	3.10	4.04
<b>Nagaland</b>	-	-	-	9.42	7.63	14.31	14.81	13.88	16.16	*	12.66	16.62
<b>Sikkim</b>	-	-	-	-	-	14.69	11.73	10.38	8.68	9.32	7.64	8.66
<b>Tripura</b>	-	-	-	13.01	13.42	16.46	13.80	16.20	6.23	9.49	8.86	9.42
<b>All India</b>	<b>10.86</b>	<b>17.55</b>	<b>26.05</b>	<b>15.62</b>	<b>13.63</b>	<b>13.50</b>	<b>12.96</b>	<b>11.69</b>	<b>10.59</b>	<b>10.84</b>	<b>10.41</b>	<b>9.51</b>

- Notes : 1) - = Not applicable  
2) \* = Not Available; ...  
3) \$ = 1994-95 (BE) union government breakup not available.  
4) 1993-94 are Revised Estimates  
5) 1994-95 are Budget Estimates

Source: Up to 1985-86, Combined Finance & Revenue Accounts, Comptroller and Auditor General of India, respective years

Others years, Demand for Grants, respective states.

**Table No : 6**

**Expenditure on National Disease Program  
(in rupees per capita)**

Year	1950-51	1955-56	1960-61	1965-66	1970-71	1975-76	1980-81	1985-86	1991-92	1992-93	1993-94	1994-95
<b>Andhra Pradesh</b>	-	0.01	0.30	0.43	0.64	1.11	2.46	5.21	9.52	10.20	11.77	12.95
<b>Assam</b>	0.14	0.28	0.28	0.39	0.26	1.46	2.02	5.76	4.90	*	5.79	5.80
<b>Bihar</b>	0.05	0.38	0.52	0.45	0.43	0.50	1.01	1.72	*	4.92	5.80	6.08
<b>Gujarat</b>	-	-	0.28	0.80	1.91	2.74	2.75	5.54	8.01	8.45	9.91	11.01
<b>Haryana</b>	-	-	-	-	2.42	1.71	3.69	8.49	8.55	9.11	11.38	11.68
<b>Jammu &amp; Kashmir</b>	-	-	0.32	0.48	*	*	1.65	1.90	*	*	*	*
<b>Karnataka</b>	0.01	0.04	0.32	0.28	0.39	1.18	1.99	3.39	3.35	4.06	5.28	5.79

Kerala	-	...	0.03	0.11	0.05	0.80	1.18	5.13	2.85	3.51	5.49	7.30
Madhya Pradesh	0.06	0.04	0.27	0.57	0.80	1.09	2.05	2.85	4.30	4.78	5.43	5.54
Maharashtra	-	-	0.31	0.42	1.44	2.47	3.07	6.11	7.78	8.76	9.09	9.25
Orissa	0.04	0.15	0.34	1.04	0.86	1.10	2.90	4.05	6.23	6.48	7.56	7.07
Punjab	0.12	0.08	1.03	1.44	1.86	2.27	3.17	6.17	7.47	9.54	6.61	7.25
Rajasthan	-	...	0.49	0.63	0.71	1.59	3.04	3.74	5.62	6.34	6.74	7.57
Tamil Nadu	-	-	0.50	0.14	0.15	0.41	0.77	1.05	8.10	9.87	11.12	6.25
Uttar Pradesh	0.07	0.08	0.05	0.49	0.67	1.19	1.96	4.02	8.14	9.50	8.29	9.03
West Bengal	0.10	0.14	0.04	0.04	0.28	1.09	1.75	2.68	5.55	5.61	6.32	6.60
<b>Other states</b>												
Arunachal Pradesh	-	-	-	-	-	8.05	13.83	26.33	18.96	31.11	41.65	33.29
Goa, Daman & Diu	-	-	-	3.64	1.02	3.61	5.43	6.97	11.26	14.44	15.68	14.41
Mizoram	-	-	-	-	-	7.29	13.43	20.69	25.53	28.48	35.41	29.00
Pondicherry	-	-	-	0.24	1.15	3.46	6.72	11.83	19.63	22.17	24.91	25.60
Himachal Pradesh	-	0.01	-	0.77	1.55	2.24	5.50	8.88	14.62	21.42	22.47	25.53
Manipuri	-	-	-	1.12	2.12	3.09	12.19	9.99	21.06	*	*	*
Meghalaya	-	-	-	-	0.04	4.71	12.90	10.52	18.20	6.57	5.73	7.39
Nagaland	-	-	-	1.23	2.62	6.32	10.75	22.03	25.73	*	32.45	34.21
Sikkim	-	-	-	-	-	2.58	4.69	10.81	19.79	26.51	21.18	28.04
Tripura	-	-	-	0.71	1.19	2.12	2.98	4.50	6.01	8.66	9.46	11.01
<b>All India</b>	<b>0.07</b>	<b>0.22</b>	<b>0.64</b>	<b>0.53</b>	<b>0.83</b>	<b>1.34</b>	<b>2.25</b>	<b>4.15</b>	<b>6.37</b>	<b>7.60</b>	<b>8.27</b>	<b>8.09</b>

Notes : 1) - = Not applicable

2) \* = Not Available; ...

3) \$ = 1994-95 (BE) union government breakup not available.

4) 1993-94 are Revised Estimates

5) 1994-95 are Budget Estimates

Source: Up to 1985-86, Combined Finance & Revenue Accounts, Comptroller and Auditor General of India, respective years

Others years, Demand for Grants, respective states.

## INSERT FIGURES FROM TABLE 9 LAST COLOUMN

TABLE : 7

### EXPENDITURE ON SELECTED DISEASES PROGRAM (actuals in rupees millions)

Year	Malaria	TB	Leprosy	Blindness	AIDS	Diseases program	Health program
<b>Andhra Pradesh</b>							
1989 - 1990	288.84	48.10	143.95	12.29	.00	488.01	2991.10
1990 - 1991	336.46	41.85	153.69	7.05	.00	535.69	3325.10
1991 - 1992	389.67	51.15	185.15	9.06	.00	648.66	3752.55
1992 - 1993	417.27	52.90	201.34	11.93	10.21	711.41	4221.63
1993 - 1994	463.47	67.37	230.36	13.41	24.45	841.01	4648.96
1994 - 1995	495.42	71.58	250.64	14.36	24.45	947.73	5043.53
<b>Assam</b>							
1989 - 1990	58.53	18.63	16.10	3.59	.00	114.20	910.90
1990 - 1991	69.32	13.43	14.02	7.10	.00	162.78	941.22
1991 - 1992	61.03	17.11	18.45	6.18	.00	202.48	1123.45
1992 - 1993	72.77	7.63	20.25	5.98	.00	153.85	1364.43
1993 - 1994	70.15	18.53	25.55	14.60	.00	196.81	1432.41
1994 - 1995	73.51	18.20	24.91	15.06	.00	151.06	1883.92
<b>Bihar</b>							
1989 - 1990	161.32	20.75	83.24	1.15	.00	275.00	2262.27
1990 - 1991	*	*	*	*	*	354.04	2677.47
1991 - 1992	*	*	*	*	*	2713.31	
1992 - 1993	191.25	10.34	130.74	4.63	.00	3856.38	
1993 - 1994	288.67	10.40	166.60	4.63	.00	4570.34	
1994 - 1995	301.39	10.49	161.19	4.63	.00	5574.54	
<b>Gujarat</b>							
1989 - 1990	122.82	52.07	35.83	17.91	.00	2272.00	
1990 - 1991	113.95	61.47	44.22	21.02	.00	2478.16	

1991 - 1992	153.24	82.21	48.72	21.75	.00	2837.20
1992 - 1993	159.30	77.86	58.63	26.03	.00	2976.32
1993 - 1994	208.20	91.62	52.70	25.52	11.00	3343.67
1994 - 1995	256.03	105.85	57.67	28.10	14.59	3593.73
<b>Haryana</b>						
1989 - 1990	103.63	12.18	.50	1.60	.00	781.55
1990 - 1991	98.41	16.61	.74	2.21	.00	917.60
1991 - 1992	129.07	13.92	.38	1.94	.00	952.41
1992 - 1993	135.88	32.18	.46	6.21	.00	1084.23
1993 - 1994	169.60	48.10	.71	9.22	.00	1271.64
1994 - 1995	161.51	60.83	.66	10.54	7.02	1396.29
<b>Karnataka</b>						
1989 - 1990	91.16	51.21	24.02	9.16	.00	1619.20
1990 - 1991	91.97	48.82	22.67	7.85	.00	2698.20
1991 - 1992	117.78	52.01	20.71	14.28	.00	2953.10
1992 - 1993	134.49	63.84	26.43	11.63	9.62	3602.05
1993 - 1994	159.25	82.42	42.03	21.45	21.50	4237.73
1994 - 1995	166.27	96.65	48.48	23.80	35.00	5077.72

contd. Table : 7

Year	Malaria	TB	Leprosy	Blindness	AIDS	Disease Programme	Health
<b>Kerala</b>							
1989 - 1990	27.75	10.82	16.30	3.15	.00	69.41	2211.42
1990 - 1991	31.95	17.90	22.04	4.46	.00	88.04	2224.32
1991 - 1992	29.86	12.36	20.80	3.64	.00	84.14	2226.61
1992 - 1993	36.71	16.80	31.66	5.01	.00	105.13	2301.31
1993 - 1994	49.86	25.81	45.48	14.10	1.11	166.63	3151.60
1994 - 1995	65.86	37.90	57.37	16.92	2.00	224.87	3759.77
<b>Madhya Pradesh</b>							
1989 - 1990	144.03	50.99	49.19	16.84	.00	246.47	2146.45
1990 - 1991	190.22	10.04	62.72	18.66	.00	291.95	2647.20
1991 - 1992	252.20	70.68	63.27	21.43	2.25	306.62	2745.41
1992 - 1993	188.20	64.84	76.93	24.19	4.53	333.65	3371.80
1993 - 1994	352.66	83.13	80.68	34.44	13.80	388.96	4165.00
1994 - 1995	328.04	106.56	85.95	39.46	27.63	407.41	4609.97
<b>Maharashtra</b>							
1989 - 1990	*	*	*	*	*		3659.91
1990 - 1991	372.50	121.84	130.39	4.43	3.25	622.47	4341.15
1991 - 1992	380.34	108.62	139.00	4.00	3.63	630.16	5273.76
1992 - 1993	415.62	128.79	179.51	4.70	52.33	727.40	6158.17
1993 - 1994	416.52	168.71	193.06	5.36	18.71	774.27	6877.81
1994 - 1995	448.81	168.50	194.07	5.04	28.21	807.95	6803.92
<b>Orissa</b>							
1989 - 1990	76.75	20.96	52.30	1.79	.00	161.80	1432.98
1990 - 1991	83.14	22.72	56.88	2.79	.00	175.08	1550.21
1991 - 1992	89.68	26.21	67.75	4.22	.00	201.16	1565.99
1992 - 1993	*	*	*	*	*		1715.06
1993 - 1994	*	*	*	*	*		2242.48

1994 - 1995	*	*	*	*	*	2208.12	
<b>Punjab</b>							
1989 - 1990	.00	29.01	1.64	.08	.00	193.41	1558.45
1990 - 1991	148.98	30.41	2.48	3.23	.00	209.86	1765.76
1991 - 1992	130.68	32.95	2.41	4.74	.00	202.21	1811.89
1992 - 1993	164.21	28.51	2.31	3.94	2.61	236.14	1979.53
1993 - 1994	124.91	43.29	2.74	6.97	11.19	373.54	2201.98
1994 - 1995	131.15	53.50	4.48	8.75	11.19	446.26	2312.75
<b>Rajasthan</b>							
1989 - 1990	194.84	53.72	9.43	4.63	.00	236.53	2229.77
1990 - 1991	170.37	65.61	10.24	6.77	.00	221.18	2555.20
1991 - 1992	190.49	64.24	12.92	8.95	.00	254.43	2795.12
1992 - 1993	213.42	69.75	16.72	13.00	3.78	295.11	3319.08
1993 - 1994	234.28	84.67	16.02	20.59	6.35	322.50	3715.71
1994 - 1995	261.60	101.57	16.59	19.85	6.35	372.70	4556.96
<b>Tamil Nadu</b>							
1989 - 1990	*	*	*	*	*		2886.84
1990 - 1991	*	*	*	*	*		3406.85
1991 - 1992	*	*	*	*	*		3790.05
1992 - 1993	*	67.53	173.10	13.66	1.78	236.28	4894.22
1993 - 1994	*	89.92	206.41	14.96	8.42	296.47	5582.60
1994 - 1995	*	94.00	217.01	15.75	.91	315.26	5982.37

contd. Table : 7

Year	Malaria	TB	Leprosy	Blindness	AIDS	Disease Programme	Health
<b>Uttar Pradesh</b>							
1989 - 1990	465.50	139.46	58.63	27.80	.00	923.25	5686.61
1990 - 1991	457.20	179.33	143.09	30.16	.00	1029.44	5826.32
1991 - 1992	448.80	157.26	111.61	20.56	.00	1160.86	6242.31
1992 - 1993	639.27	129.24	289.53	34.54	.00	1389.79	7378.80
1993 - 1994	516.49	179.10	145.08	29.64	7.28	1243.00	7529.23
1994 - 1995	569.33	172.87	154.19	27.20	11.39	1388.78	8003.05
<b>West Bengal</b>							
1989 - 1990	147.75	96.05	63.36	4.82	.00	305.23	3168.90
1990 - 1991	243.27	132.11	86.01	8.40	.00	429.74	3526.13
1991 - 1992	220.68	106.30	76.97	9.99	.04	386.84	3894.12
1992 - 1993	211.50	114.48	83.47	16.30	.00	398.30	4278.69
1993 - 1994	223.36	147.95	80.88	10.03	8.10	457.07	5033.53
1994 - 1995	230.59	165.56	87.87	12.56	8.10	485.98	5397.64
<b>Arunachal Pradesh</b>							
1989 - 1990	15.24	4.37	1.90	.52	.00	24.54	*
1990 - 1991	3.78	3.25	1.25	.49	.00	27.73	144.86
1991 - 1992	*	*	*	*	*		169.07
1992 - 1993	6.70	5.68	2.46	2.61	.00	28.74	216.66
1993 - 1994	13.74	8.78	2.94	2.05	.00	39.75	224.02
1994 - 1995	12.71	6.67	1.89	.59	.00	32.78	278.07
<b>Goa</b>							
1989 - 1990	1.89	5.26	3.07	.73	.00	10.51	197.89
1990 - 1991	2.32	6.44	3.95	.84	.00	12.79	232.15
1991 - 1992	2.25	6.79	4.62	.92	.05	13.40	276.38
1992 - 1993	2.49	7.42	4.66	1.56	1.56	17.47	308.00
1993 - 1994	3.11	8.64	4.93	1.37	.85	19.29	344.41

1994 - 1995	2.70	8.10	5.00	1.16	1.00	18.01	350.86
<b>Mizoram</b>							
1989 - 1990	6.35	2.85	2.50	.82	.00		137.07
1990 - 1991	6.20	3.90	3.06	.87	.00		152.10
1991 - 1992	6.74	3.33	2.81	1.01	1.50		167.15
1992 - 1993	7.28	4.63	3.08	1.55	1.04		190.89
1993 - 1994	9.89	4.75	3.65	1.90	.00		215.59
1994 - 1995	7.78	5.65	3.35	1.65	.09		198.63
<b>Himmachal Pradesh</b>							
1989 - 1990	35.05	10.39	7.21	2.55	.00	77.99	537.96
1990 - 1991	31.54	6.29	8.94	3.77	.00	65.92	651.42
1991 - 1992	*	*	*	*	*	115.44	707.22
1992 - 1993	45.72	7.74	10.95	3.67	3.66	123.60	885.55
1993 - 1994	51.38	10.52	13.36	5.70	.00	1084.00	
1994 - 1995	53.20	12.21	15.52	5.94	9.19	1274.81	
<b>Manipur</b>							
1989 - 1990	7.95	3.72	5.57	1.23	.00	165.10	
1990 - 1991	*	*	*	*	*	181.17	
1991 - 1992	5.89	4.96	6.56	1.57	.00	216.53	
1992 - 1993	*	*	*	*	*	239.17	
1993 - 1994	*	*	*	*	*	220.45	
1994 - 1995	*	*	*	*	*	191.40	

contd. Table : 7

Year	Malaria	TB	Leprosy	Blindness	AIDS	Health
<b>Meghalaya</b>						
1989 - 1990	13.83	.53	4.77	.19	.00	189.61
1990 - 1991	18.61	.54	4.34	1.27	.00	212.45
1991 - 1992	18.18	3.61	4.85	1.76	.00	232.56
1992 - 1993	18.03	4.45	6.19	2.00	.00	275.90
1993 - 1994	21.44	7.48	7.12	3.80	.00	361.06
1994 - 1995	22.03	1.31	7.35	3.74	2.18	367.38
<b>Nagaland</b>						
1989 - 1990	*	*	*	*	*	*
1990 - 1991	16.27	7.71	5.16	.61	.00	*
1991 - 1992	15.54	8.05	5.38	2.58	.00	203.80
1992 - 1993	17.46	9.19	6.03	1.26	.00	*
1993 - 1994	19.05	10.65	6.96	1.09	6.87	366.58
1994 - 1995	20.27	11.05	7.39	1.11	10.06	310.82
<b>Sikkim</b>						
1989 - 1990	*	*	*	*	*	*
1990 - 1991	3.47	.80	.80	.41	.00	70.80
1991 - 1992	4.49	.80	.80	1.67	.00	95.72
1992 - 1993	3.49	.80	1.20	.40	.00	122.31
1993 - 1994	3.40	.90	2.10	.42	.00	122.02
1994 - 1995	4.60	.60	2.10	1.00	.00	145.80
<b>Tripura</b>						
1989 - 1990	16.93	3.51	4.75	1.35	.00	240.74
1990 - 1991	29.22	1.69	6.67	2.37	.00	259.86
1991 - 1992	14.59	1.00	5.69	3.40	.02	275.13
1992 - 1993	10.32	1.06	5.29	2.51	1.79	269.33
1993 - 1994	16.59	2.28	7.19	3.70	3.29	325.54
1994 - 1995	17.91	2.98	8.50	6.50	5.64	368.26

Notes : \* Expenditure data for various heads not available for the following states and years.

Bihar : 1990 - 1991, 1991 - 1992  
 Maharashtra : 1989 - 1990  
 Orissa : 1992 - 1993, 1993 - 1994, 1994 - 1995  
 Tamil Nadu : 1989 - 1990, 1990 - 1991, 1991 - 1992  
 Arunachal Pradesh : 1991 - 1992  
 Himmachal Pradesh : 1991 - 1992  
 Manipur : 1990 - 1991, 1992 - 1993, 1993 - 1994, 1994 - 1995  
 Nagaland : 1989 - 1990  
 Sikkim : 1989 - 1990

1993-94 are Revised Estimates

1994-95 are Budget Estimates

Source: Demand for Grants, respective states and years.

TABLE NO : 8

**EXPENDITURE ON SELECTED DISEASES PROGRAM**

(as percentages to health)

Year	Malaria	TB	Leprosy	Blindness	AIDS	Health
<b>Andhra Pradesh</b>						
1989 - 1990	9.65	1.60	4.81	.41	.00	2991.10
1990 - 1991	10.11	1.25	4.62	.21	.00	3325.10
1991 - 1992	10.38	1.36	4.93	.24	.00	3752.55
1992 - 1993	9.88	1.25	4.77	.28	.24	4221.63
1993 - 1994	9.97	1.45	4.96	.29	.53	4648.96
1994 - 1995	9.82	1.42	4.97	.28	.48	5043.53
<b>Assam.</b>						
1989 - 1990	6.42	2.04	1.76	.39	.00	910.90
1990 - 1991	7.36	1.42	1.48	.75	.00	941.22
1991 - 1992	5.43	1.52	1.64	.55	.00	1123.45
1992 - 1993	5.33	.56	1.48	.44	.00	1364.43
1993 - 1994	4.90	1.29	1.78	1.02	.00	1432.41
1994 - 1995	3.90	.97	1.32	.80	.00	1883.92
<b>Bihar.</b>						
1989 - 1990	7.13	0.91	3.67	0.05	.00	2262.27
1992 - 1993	4.96	.27	3.39	.12	.00	3856.38
1993 - 1994	6.32	.23	3.65	.10	.00	4570.34
1994 - 1995	5.41	.19	2.89	.08	.00	5574.54
<b>Gujarat.</b>						
1989 - 1990	5.40	2.29	1.57	0.78	.00	2272.00
1990 - 1991	4.59	2.48	1.78	0.84	.00	2478.16
1991 - 1992	5.40	2.90	1.72	.77	.00	2837.20
1992 - 1993	5.35	2.62	1.97	.87	.00	2976.32
1993 - 1994	6.23	2.74	1.58	.76	.33	3343.67
1994 - 1995	7.12	2.95	1.60	.78	.41	3593.73
<b>Haryana.</b>						
1989 - 1990	13.25	1.55	.06	.20	.00	781.55
1990 - 1991	10.72	1.81	.08	.24	.00	917.60
1991 - 1992	13.55	1.46	.04	.20	.00	952.41
1992 - 1993	12.53	2.97	.04	.57	.00	1084.23
1993 - 1994	13.34	3.78	.06	.73	.00	1271.64
1994 - 1995	11.57	4.36	.05	.75	.50	1396.29
<b>Karnataka.</b>						
1989 - 1990	5.62	3.16	1.48	.56	.00	1619.20
1990 - 1991	3.40	1.80	.84	.29	.00	2698.20
1991 - 1992	3.99	1.76	.70	.48	.00	2953.10
1992 - 1993	3.73	1.77	.73	.32	.27	3602.05
1993 - 1994	3.76	1.94	.99	.51	.51	4237.73
1994 - 1995	3.27	1.90	.95	.47	.69	5077.72
<b>Kerala.</b>						

1989 - 1990	1.25	.48	.73	.14	.00	2211.42
1990 - 1991	1.43	.80	.99	.20	.00	2224.32
1991 - 1992	1.34	.56	.93	.16	.00	2226.61
1992 - 1993	1.60	.73	1.38	.22	.00	2301.31
1993 - 1994	1.58	.82	1.44	.45	.04	3151.60
1994 - 1995	1.75	1.01	1.53	.45	.05	3759.77

(cont. Table : 8)

Year	Malaria	TB	Leprosy	Blindness	AIDS	Health
<b>Madhya Pradesh.</b>						
1989 - 1990	6.71	2.37	2.29	.78	.00	2146.45
1990 - 1991	7.18	.37	2.36	.70	.00	2647.20
1991 - 1992	9.19	2.57	2.30	.78	.08	2745.41
1992 - 1993	5.58	1.92	2.28	.72	.13	3371.80
1993 - 1994	8.47	2.00	1.94	.83	.33	4165.00
1994 - 1995	7.12	2.31	1.86	.86	.60	4609.97
<b>Maharashtra.</b>						
1990 - 1991	8.58	2.80	3.00	.10	.07	4341.15
1991 - 1992	7.21	2.06	2.64	.08	.07	5273.76
1992 - 1993	6.75	2.09	2.91	.08	.85	6158.17
1993 - 1994	6.06	2.45	2.81	.08	.27	6877.81
1994 - 1995	6.60	2.48	2.85	.07	.41	6803.92
<b>Orissa.</b>						
1989 - 1990	5.35	1.46	3.64	.12	.00	1432.98
1990 - 1991	5.36	1.46	3.66	.17	.00	1550.21
1991 - 1992	5.73	1.67	4.33	.27	.00	1565.99
<b>Punjab.</b>						
1989 - 1990	*	1.86	.10	.05	.00	1588.45
1990 - 1991	8.43	1.72	.14	.18	.00	1765.76
1991 - 1992	7.21	1.82	.13	.26	.00	1811.89
1992 - 1993	8.30	1.44	.12	.20	.13	1979.53
1993 - 1994	5.67	1.97	.12	.32	.51	2201.98
1994 - 1995	5.67	2.31	.19	.38	.48	2312.75
<b>Rajasthan</b>						
1989 - 1990	8.73	2.40	.42	.20	.00	2229.97
1990 - 1991	6.66	2.56	.40	.26	.00	2555.20
1991 - 1992	6.82	2.30	.46	.32	.00	2795.12
1992 - 1993	6.43	2.10	.50	.39	.11	3319.08
1993 - 1994	6.31	2.28	.43	.55	.17	3715.71
1994 - 1995	5.74	2.23	.36	.44	.14	4556.96
<b>Tamil Nadu.</b>						
1992 - 1993	*	1.38	3.54	.28	.04	4894.22
1993 - 1994	*	1.61	3.70	.27	.15	5582.60
1994 - 1995	*	1.57	3.63	.26	.02	5982.37
<b>Uttar Pradesh.</b>						
1989 - 1990	8.18	2.45	1.03	.48	.00	5686.61
1990 - 1991	7.84	3.07	2.45	.51	.00	5826.32
1991 - 1992	7.19	2.52	1.79	.33	.00	6242.31
1992 - 1993	8.66	1.75	3.92	.47	.00	7378.80
1993 - 1994	6.86	2.38	1.93	.39	.10	7529.23
1994 - 1995	7.11	2.16	1.93	.34	.14	8003.05
<b>West Bengal.</b>						
1989 - 1990	4.66	3.03	1.99	.15	.00	3168.90
1990 - 1991	6.89	3.74	2.43	.23	.00	3526.13
1991 - 1992	5.67	2.73	1.98	.26	.00	3894.12
1992 - 1993	4.94	2.68	1.95	.38	.00	4278.69
1993 - 1994	4.44	2.94	1.61	.20	.16	5033.53
1994 - 1995	4.27	3.07	1.63	.23	.15	5397.64

(cont. Table : 8)

Year	Malaria	TB	Leprosy	Blindness	AIDS	Health
<b>Arunachal Pradesh.</b>						
1990 - 1991	2.60	2.24	.86	.33	.00	144.86
1992 - 1993	3.09	2.62	1.14	1.20	.00	216.66
1993 - 1994	6.13	3.92	1.31	.92	.00	224.02
1994 - 1995	4.57	2.40	.68	.21	.00	278.07
<b>Goa</b>						
1989 - 1990	.95	2.65	1.55	.36	.00	197.89
1990 - 1991	.99	2.77	1.70	.36	.00	232.15
1991 - 1992	.81	2.46	1.67	.33	.02	276.38
1992 - 1993	.81	2.41	1.51	.51	.51	308.00
1993 - 1994	.90	2.51	1.43	.40	.25	344.41
1994 - 1995	.77	2.31	1.43	.33	.29	350.86
<b>Mizoram.</b>						
1989 - 1990	4.80	2.15	1.89	.62	.00	132.07
1990 - 1991	4.07	2.56	2.01	.57	.00	152.10
1991 - 1992	4.03	1.99	1.68	.60	.90	167.15
1992 - 1993	3.81	2.43	1.61	.81	.54	190.89
1993 - 1994	4.59	2.20	1.69	.88	.00	215.59
1994 - 1995	3.92	2.84	1.69	.83	.05	198.63
<b>Himachal Pradesh.</b>						
1989 - 1990	6.51	1.93	1.34	.47	.00	537.96
1990 - 1991	4.84	.96	1.37	.57	.00	651.42
1992 - 1993	5.16	.87	1.24	.41	.41	885.55
1993 - 1994	4.74	.97	1.23	.53	.00	1084.00
1994 - 1995	4.17	.96	1.22	.47	.72	1274.81
<b>Manipur.</b>						
1989 - 1990	4.81	2.25	3.37	.74	.00	165.10
1991 - 1992	2.72	2.29	3.03	.73	.00	216.53
<b>Meghalaya.</b>						
1989 - 1990	7.29	.27	2.51	.10	.00	189.61
1990 - 1991	8.71	.25	2.03	.59	.00	212.45
1991 - 1992	7.82	1.55	2.09	.76	.00	232.56
1992 - 1993	6.53	1.61	2.24	.72	.00	275.90
1993 - 1994	5.94	2.07	1.97	1.05	.00	361.06
1994 - 1995	6.00	.36	2.00	1.02	.59	367.38
<b>Nagaland.</b>						
1991 - 1992	7.63	3.95	2.64	1.27	.00	203.80
1993 - 1994	5.20	2.91	1.90	.30	1.87	366.58
1994 - 1995	6.52	3.56	2.38	.36	3.24	310.82
<b>Sikkim.</b>						
1990 - 1991	4.90	1.12	1.12	.57	.00	70.80
1991 - 1992	4.69	.84	.84	1.74	.00	95.72
1992 - 1993	2.85	.65	.98	.33	.00	122.31
1993 - 1994	2.79	.74	1.72	.34	.00	122.02
1994 - 1995	3.16	.41	1.44	.69	.00	145.80
<b>Tripura.</b>						
1989 - 1990	7.03	1.45	1.97	.56	.00	240.74
1990 - 1991	11.24	.65	2.56	.91	.00	259.86
1991 - 1992	5.30	.36	2.07	1.24	.01	275.13
1992 - 1993	3.83	.39	1.96	.93	.66	269.33
1993 - 1994	5.10	.70	2.21	1.14	1.01	325.54
1994 - 1995	4.86	.81	2.31	1.77	1.53	368.26

**Notes :** \* Expenditure data Not Available for the following states and years.

Bihar : 1990 - 1991, 1991 - 1992  
 Maharashtra : 1989 - 1990  
 Orissa : 1992 - 1993, 1993 - 1994, 1994 - 1995  
 Tamil Nadu : 1989 - 1990, 1990 - 1991, 1991 - 1992  
 Arunachal Pradesh : 1991 -1992

Himmachal Pradesh : 1991 - 1992  
 Manipur : 1990 -1991, 1992 - 1993, 1993 - 1994, 1994 - 1995  
 Nagaland : 1989 -1990  
 Sikkim : 1989 -1990  
 Nagaland 1990 -91 Total Health not available  
 1993-94 are Revised Estimates  
 1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**TABLE : 9**

**Expenditure on selected diseases and total disease program**  
 (actuals in rupees millions)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Diseases program
<b>Andhra Pradesh.</b>						
1989 - 1990	288.40	20.92	143.95	12.29	.00	488.01
1990 - 1991	336.17	13.54	153.69	7.05	.00	535.69
1991 - 1992	389.34	20.30	185.15	9.06	.00	648.66
1992 - 1993	416.93	17.90	201.34	11.93	10.21	711.41
1993 - 1994	463.05	24.64	230.36	13.41	24.45	841.01
1994 - 1995	494.95	26.43	250.64	14.36	24.45	947.73
<b>Assam.</b>						
1989 - 1990	50.47	4.73	16.10	.00	.00	114.20
1990 - 1991	62.22	2.23	14.02	.00	.00	162.78
1991 - 1992	60.19	2.76	18.45	.00	.00	202.48
1992 - 1993	72.77	3.23	20.25	.00	.00	153.85
1993 - 1994	64.65	2.53	19.75	.00	.00	196.81
1994 - 1995	67.51	2.14	18.76	.00	.00	151.06
<b>Bihar.</b>						
1989 - 1990	160.22	.29	.00	.00	.00	275.00
1992 - 1993	173.75	.30	.00	.00	.00	354.04
1993 - 1994	243.67	.30	.00	.00	.00	507.39
1994 - 1995	256.39	.34	.00	.00	.00	503.09
<b>Gujarat.</b>						
1989 - 1990	122.82	52.07	35.83	.00	.00	254.91
1990 - 1991	113.95	61.47	44.22	.00	.00	269.91
1991 - 1992	153.24	82.21	48.72	.00	.00	337.88
1992 - 1993	159.30	77.86	58.63	.00	.00	364.19
1993 - 1994	208.20	91.62	52.70	.00	11.00	435.86
1994 - 1995	256.03	105.85	57.67	.00	14.59	494.50
<b>Haryana.</b>						
1989 - 1990	103.63	1.22	.50	1.60	.00	117.07
1990 - 1991	98.41	1.28	.74	2.21	.00	112.90
1991 - 1992	129.07	1.20	.38	1.94	.00	144.45
1992 - 1993	135.88	1.54	.46	6.21	.00	158.06
1993 - 1994	169.60	1.74	.71	9.22	.00	202.81
1994 - 1995	161.51	1.73	.66	10.54	7.02	214.03
<b>Karnataka.</b>						
1989 - 1990	91.16	.00	24.02	9.16	.00	135.25
1990 - 1991	91.97	.00	22.67	7.85	.00	126.77
1991 - 1992	117.78	.00	20.71	14.28	.00	158.51
1992 - 1993	134.49	.00	26.43	11.63	9.62	190.18
1993 - 1994	159.25	.00	42.03	21.45	21.50	252.76
1994 - 1995	166.27	.00	48.48	23.80	35.00	283.12
<b>Kerala.</b>						
1989 - 1990	27.75	1.58	16.30	3.15	.00	69.41
1990 - 1991	31.95	5.50	22.04	4.46	.00	88.04
1991 - 1992	29.86	1.68	20.80	3.64	.00	84.14
1992 - 1993	36.71	4.79	31.66	5.01	.00	105.13
1993 - 1994	49.86	8.67	45.48	14.10	.58	166.63
1994 - 1995	65.86	17.03	57.37	16.92	1.00	224.87

**Madhya Pradesh.**

1989 - 1990	144.03	4.03	49.19	.00	.00	246.47
1990 - 1991	175.08	3.85	62.72	.00	.00	291.95
1991 - 1992	177.20	3.85	62.72	.00	.00	306.62
1992 - 1993	188.20	4.26	76.93	.00	.00	333.65
1993 - 1994	228.46	4.73	80.13	.00	.00	388.96
1994 - 1995	238.04	4.98	85.40	.00	.00	407.41

(cont. Table : 9)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Total D.P
<b>Maharashtra.</b>						
1990 - 1991	372.50	62.23	130.16	4.43	.00	622.47
1991 - 1992	380.34	42.52	138.69	4.00	.00	630.16
1992 - 1993	415.62	54.07	179.19	4.70	.00	727.40
1993 - 1994	416.52	81.73	192.67	5.36	.00	774.27
1994 - 1995	448.81	88.02	193.70	5.04	.00	807.95
<b>Orissa.</b>						
1989 - 1990	76.75	.00	47.94	1.20	1.00	161.80
1990 - 1991	83.14	.00	51.78	2.01	.00	175.08
1991 - 1992	89.68	.00	63.22	3.83	.00	201.16
<b>Punjab.</b>						
1989 - 1990	.00	4.51	1.64	.08	.00	193.41
1990 - 1991	148.98	4.18	2.48	3.23	.00	209.86
1991 - 1992	130.68	4.62	2.41	4.74	.00	202.21
1992 - 1993	164.21	4.69	2.31	3.02	2.61	236.14
1993 - 1994	124.91	3.78	2.74	5.97	11.19	373.54
1994 - 1995	131.15	5.90	4.48	6.95	11.19	446.26
<b>Rajasthan.</b>						
1989 - 1990	194.84	11.02	7.49	4.63	.00	236.53
1990 - 1991	170.37	12.00	9.03	6.77	.00	221.18
1991 - 1992	190.49	11.42	11.72	8.95	.00	254.43
1992 - 1993	213.42	8.57	15.31	13.00	3.78	295.11
1993 - 1994	234.28	14.03	14.34	20.59	6.35	322.50
1994 - 1995	261.60	24.22	14.84	19.85	6.35	372.70
<b>Tamil Nadu.</b>						
1992 - 1993	.00	50.57	173.10	.00	1.70	236.28
1993 - 1994	.00	77.96	206.41	.00	.48	296.47
1994 - 1995	.00	83.68	217.01	.00	.62	315.26
<b>Uttar Pradesh.</b>						
1989 - 1990	465.50	.00	.00	.00	.00	923.25
1990 - 1991	457.20	.00	.00	.00	.00	1029.44
1991 - 1992	448.80	.00	.00	.00	.00	1160.86
1992 - 1993	639.27	.00	.00	.00	.00	1389.79
1993 - 1994	516.49	.00	.00	.00	7.28	1243.00
1994 - 1995	569.33	.00	.00	.00	11.39	1388.78
<b>West Bengal.</b>						
1989 - 1990	147.75	30.09	63.36	.00	.00	305.23
1990 - 1991	243.18	37.10	86.01	.00	.00	429.74
1991 - 1992	220.68	27.40	76.97	.00	.04	386.84
1992 - 1993	211.50	28.37	83.47	.00	.00	398.30
1993 - 1994	222.41	43.53	80.88	.00	8.10	457.07
1994 - 1995	228.79	49.11	87.87	.00	8.10	485.98
<b>Arunachal Pradesh.</b>						
1989 - 1990	15.24	4.37	1.90	.52	.00	24.54
1990 - 1991	3.78	3.25	1.25	.49	.00	27.73
1992 - 1993	6.70	5.68	2.46	2.61	.00	28.74
1993 - 1994	13.74	8.78	2.94	2.05	.00	39.75
1994 - 1995	12.71	6.67	1.89	.59	.00	32.78
<b>Goa.</b>						
1989 - 1990	1.89	.74	1.76	.73	.00	10.51
1990 - 1991	2.32	1.21	2.31	.84	.00	12.79
1991 - 1992	2.25	1.56	2.46	.92	.05	13.40
1992 - 1993	2.49	1.75	2.56	1.56	1.56	17.47
1993 - 1994	3.11	2.58	3.03	1.37	.85	19.29
1994 - 1995	2.70	1.60	3.05	1.16	1.00	18.01

(cont. Table : 9)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Total D.P
<b>Mizoram.</b>						
1989 - 1990	4.06	2.85	2.50	.82	.00	*
1990 - 1991	4.81	3.90	3.06	.87	.00	*
1991 - 1992	5.74	3.33	2.81	1.01	1.50	*
1992 - 1993	6.23	4.63	3.08	1.55	1.04	*
1993 - 1994	8.89	4.75	3.65	1.90	.00	*
1994 - 1995	7.68	5.65	3.35	1.65	.09	*
<b>Himachal Pradesh.</b>						
1989 - 1990	35.05	1.90	7.21	2.55	.00	77.99
1990 - 1991	31.54	2.28	8.94	3.77	.00	65.92
1992 - 1993	45.72	2.52	10.95	3.67	3.66	115.44
1993 - 1994	51.38	3.95	13.36	5.70	.00	123.60
1994 - 1995	53.20	4.61	15.52	5.94	9.19	143.23
<b>Manipur.</b>						
1989 - 1990	7.95	3.72	5.57	1.23	.00	*
1991 - 1992	5.89	4.96	6.56	1.57	.00	*
<b>Meghalaya.</b>						
1989 - 1990	13.83	.00	4.75	.00	.00	35.53
1990 - 1991	18.61	.00	4.34	.00	.00	31.92
1991 - 1992	18.18	.00	4.85	.00	.00	33.31
1992 - 1993	18.03	.00	6.19	.00	.00	43.83
1993 - 1994	21.44	.00	7.10	.00	.00	44.04
1994 - 1995	21.98	.00	7.33	.00	2.18	47.24
<b>Nagaland.</b>						
1990 - 1991	16.27	5.10	5.16	.61	.00	31.11
1991 - 1992	15.54	5.27	5.38	2.58	.00	32.94
1992 - 1993	17.46	6.11	6.03	1.26	.00	35.75
1993 - 1994	19.05	7.00	6.96	1.09	6.87	46.41
1994 - 1995	20.27	7.20	7.39	1.11	10.06	51.66
<b>Sikkim.</b>						
1990 - 1991	3.47	.80	.80	.41	.00	6.94
1991 - 1992	4.49	.80	.80	1.67	.00	8.31
1992 - 1993	3.49	.80	1.20	.40	.00	7.97
1993 - 1994	3.40	.90	2.10	.42	.00	9.32
1994 - 1995	4.60	.60	2.10	1.00	.00	12.62
<b>Tripura.</b>						
1989 - 1990	16.93	1.20	4.75	.00	.00	25.70
1990 - 1991	29.22	.23	6.67	.00	.00	40.21
1991 - 1992	14.59	.23	5.69	.00	.02	25.22
1992 - 1993	10.32	.25	5.29	.00	1.79	25.55
1993 - 1994	16.59	.29	7.19	.00	3.29	28.83
1994 - 1995	17.91	.32	8.50	.00	5.64	34.69

**Notes :** Expenditure data Not Available for the following states and years.

Bihar : 1990 - 1991, 1991 - 1992

Maharashtra : 1989 - 1990

Orissa : 1992 - 1993, 1993 - 1994, 1994 - 1995

Tamil Nadu : 1989 - 1990, 1990 - 1991, 1991 - 1992

Arunachal Pradesh : 1991 -1992

Himmachal Pradesh : 1991 - 1992

Manipur : 1990 -1991, 1992 -1993, 1993 -1994, 1994 -1995

Nagaland : 1989 -1990

Sikkim : 1989 -1990

\* = Not available

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years. **Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

**TABLE : 10**

**Expenditure on selected diseases and total disease program**  
(as % to Total diseases Program)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Total D.P
<b>Andhra Pradesh.</b>						
1989 - 1990	59.10	4.29	29.50	2.52	.00	488.01
1990 - 1991	62.75	2.53	28.69	1.32	.00	535.69
1991 - 1992	60.02	3.13	28.54	1.40	.00	648.66
1992 - 1993	58.61	2.52	28.30	1.68	1.44	711.41
1993 - 1994	55.06	2.93	27.39	1.59	2.91	841.01
1994 - 1995	52.22	2.79	26.45	1.52	2.58	947.73
<b>Assam.</b>						
1989 - 1990	44.19	4.14	14.10	.00	.00	114.20
1990 - 1991	38.22	1.37	8.61	.00	.00	162.78
1991 - 1992	29.73	1.36	9.11	.00	.00	202.48
1992 - 1993	47.30	2.10	13.16	.00	.00	153.85
1993 - 1994	32.85	1.29	10.04	.00	.00	196.81
1994 - 1995	44.69	1.42	12.42	.00	.00	151.06
<b>Bihar.</b>						
1989 - 1990	58.26	.11	.00	.00	.00	275.00
1992 - 1993	49.08	.08	.00	.00	.00	354.04
1993 - 1994	48.02	.06	.00	.00	.00	507.39
1994 - 1995	50.96	.07	.00	.00	.00	503.09
<b>Gujarat.</b>						
1989 - 1990	48.18	20.43	14.06	.00	.00	254.91
1990 - 1991	42.22	22.77	16.38	.00	.00	269.91
1991 - 1992	45.35	24.33	14.42	.00	.00	337.88
1992 - 1993	43.74	21.38	16.10	.00	.00	364.19
1993 - 1994	47.77	21.02	12.09	.00	2.52	435.86
1994 - 1995	51.78	21.41	11.66	.00	2.95	494.50
<b>Haryana.</b>						
1989 - 1990	88.52	1.04	.43	1.37	.00	117.07
1990 - 1991	87.17	1.13	.66	1.96	.00	112.90
1991 - 1992	89.35	.83	.26	1.34	.00	144.45
1992 - 1993	85.97	.97	.29	3.93	.00	158.06
1993 - 1994	83.63	.86	.35	4.55	.00	202.81
1994 - 1995	75.46	.81	.31	4.92	3.28	214.03
<b>Karnataka.</b>						
1989 - 1990	67.40	.00	17.76	6.77	.00	135.25
1990 - 1991	72.55	.00	17.88	6.19	.00	126.77
1991 - 1992	74.30	.00	13.07	9.01	.00	158.51
1992 - 1993	70.72	.00	13.90	6.12	5.06	190.18
1993 - 1994	63.00	.00	16.63	8.49	8.51	252.76
1994 - 1995	58.73	.00	17.12	8.41	12.36	283.12
<b>Kerala.</b>						
1989 - 1990	39.98	2.28	23.48	4.54	.00	69.41
1990 - 1991	36.29	6.25	25.03	5.07	.00	88.04
1991 - 1992	35.49	2.00	24.72	4.33	.00	84.14
1992 - 1993	34.92	4.56	30.12	4.77	.00	105.13
1993 - 1994	29.92	5.20	27.29	8.46	.35	166.63
1994 - 1995	29.29	7.57	25.51	7.52	.44	224.87
<b>Madhya Pradesh.</b>						
1989 - 1990	58.44	1.64	19.96	.00	.00	246.47
1990 - 1991	59.97	1.32	21.48	.00	.00	291.95
1991 - 1992	57.79	1.26	20.46	.00	.00	306.62
1992 - 1993	56.41	1.28	23.06	.00	.00	333.65
1993 - 1994	58.74	1.22	20.60	.00	.00	388.96
1994 - 1995	58.43	1.22	20.96	.00	.00	407.41

(cont. Table : 10)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Total D.P
<b>Maharashtra.</b>						
1990 - 1991	59.84	10.00	20.91	.71	.00	622.47
1991 - 1992	60.36	6.75	22.01	.63	.00	630.16
1992 - 1993	57.14	7.43	24.63	.65	.00	727.40
1993 - 1994	53.80	10.56	24.88	.69	.00	774.27
1994 - 1995	55.55	10.89	23.97	.62	.00	807.95
<b>Orissa.</b>						
1989 - 1990	47.44	.00	29.63	.74	.62	161.80
1990 - 1991	47.49	.00	29.58	1.15	.00	175.08
1991 - 1992	44.58	.00	31.43	1.90	.00	201.16
<b>Punjab.</b>						
1989 - 1990	.00	2.33	.85	.04	.00	193.41
1990 - 1991	70.99	1.99	1.18	1.54	.00	209.86
1991 - 1992	64.63	2.28	1.19	2.34	.00	202.21
1992 - 1993	69.54	1.99	.98	1.28	1.11	236.14
1993 - 1994	33.44	1.01	.73	1.60	3.00	373.54
1994 - 1995	29.39	1.32	1.00	1.56	2.51	446.26
<b>Rajasthan.</b>						
1989 - 1990	82.37	4.66	3.17	1.96	.00	236.53
1990 - 1991	77.03	5.43	4.08	3.06	.00	221.18
1991 - 1992	74.87	4.49	4.61	3.52	.00	254.43
1992 - 1993	72.32	2.90	5.19	4.41	1.28	295.11
1993 - 1994	72.64	4.35	4.45	6.38	1.97	322.50
1994 - 1995	70.19	6.50	3.98	5.33	1.70	372.70
<b>Tamil Nadu.</b>						
1992 - 1993	.00	21.40	73.26	.00	.72	236.28
1993 - 1994	.00	26.30	69.62	.00	.16	296.47
1994 - 1995	.00	26.54	68.84	.00	.20	315.26
<b>Uttar Pradesh.</b>						
1989 - 1990	50.42	.00	.00	.00	.00	923.25
1990 - 1991	44.41	.00	.00	.00	.00	1029.44
1991 - 1992	38.66	.00	.00	.00	.00	1160.86
1992 - 1993	46.00	.00	.00	.00	.00	1389.79
1993 - 1994	41.55	.00	.00	.00	.59	1243.00
1994 - 1995	40.99	.00	.00	.00	.82	1388.78
<b>West Bengal.</b>						
1989 - 1990	48.41	9.86	20.76	.00	.00	305.23
1990 - 1991	56.59	8.63	20.01	.00	.00	429.74
1991 - 1992	57.05	7.08	19.90	.00	.01	386.84
1992 - 1993	53.10	7.12	20.96	.00	.00	398.30
1993 - 1994	48.66	9.52	17.70	.00	1.77	457.07
1994 - 1995	47.08	10.11	18.08	.00	1.67	485.98
<b>Arunachal Pradesh.</b>						
1989 - 1990	62.10	17.81	7.74	2.12	.00	24.54
1990 - 1991	13.63	11.72	4.51	1.77	.00	27.73
1992 - 1993	23.31	19.76	8.56	9.08	.00	28.74
1993 - 1994	34.57	22.09	7.40	5.16	.00	39.75
1994 - 1995	38.77	20.35	5.77	1.80	.00	32.78
<b>Goa</b>						
1989 - 1990	17.98	7.04	16.75	6.95	.00	10.51
1990 - 1991	18.14	9.46	18.06	6.57	.00	12.79
1991 - 1992	16.79	11.64	18.36	6.87	.37	13.40
1992 - 1993	14.25	10.02	14.65	8.93	8.93	17.47
1993 - 1994	16.12	13.37	15.71	7.10	4.41	19.29
1994 - 1995	14.99	8.88	16.94	6.44	5.55	18.01

(cont. Table : 10)

Year	Malaria	T.B	Leprosy	Blindness	AIDS	Total D.P
<b>Himachal Pradesh.</b>						
1989 - 1990	44.94	2.44	9.24	3.27	.00	77.99
1990 - 1991	47.85	3.46	13.56	5.72	.00	65.92
1992 - 1993	39.60	2.18	9.49	3.18	3.17	115.44
1993 - 1994	41.57	3.20	10.81	4.61	.00	123.60
1994 - 1995	37.14	3.22	10.84	4.15	6.42	143.23
<b>Meghalaya.</b>						
1989 - 1990	38.92	.00	13.37	.00	.00	35.53
1990 - 1991	58.30	.00	13.60	.00	.00	31.92
1991 - 1992	54.58	.00	14.56	.00	.00	33.31
1992 - 1993	41.14	.00	14.12	.00	.00	43.83
1993 - 1994	48.68	.00	16.12	.00	.00	44.04
1994 - 1995	46.53	.00	15.52	.00	4.61	47.24
<b>Nagaland.</b>						
1990 - 1991	52.30	16.39	16.59	1.96	.00	31.11
1991 - 1992	47.18	16.00	16.33	7.83	.00	32.94
1992 - 1993	48.84	17.09	16.87	3.52	.00	35.75
1993 - 1994	41.05	15.08	15.00	2.35	14.80	46.41
1994 - 1995	39.24	13.94	14.31	2.15	19.47	51.66
<b>Sikkim.</b>						
1990 - 1991	50.00	11.53	11.53	5.91	.00	6.94
1991 - 1992	54.03	9.63	9.63	20.10	.00	8.31
1992 - 1993	43.79	10.04	15.06	5.02	.00	7.97
1993 - 1994	36.48	9.66	22.53	4.51	.00	9.32
1994 - 1995	36.45	4.75	16.64	7.92	.00	12.62
<b>Tripura.</b>						
1989 - 1990	65.88	4.67	18.48	.00	.00	25.70
1990 - 1991	72.67	.57	16.59	.00	.00	40.21
1991 - 1992	57.85	.91	22.56	.00	.08	25.22
1992 - 1993	40.39	.98	20.70	.00	7.01	25.55
1993 - 1994	57.54	1.01	24.94	.00	11.41	28.83
1994 - 1995	51.63	.92	24.50	.00	16.26	34.69

**Notes :** Expenditure data Not Available for the following states and years.

Bihar : 1990 - 1991, 1991 - 1992

Maharashtra : 1989 - 1990

Orissa : 1992 - 1993, 1993 - 1994, 1994 - 1995

Tamil Nadu : 1989 - 1990, 1990 - 1991, 1991 - 1992

Arunachal Pradesh : 1991 - 1992

Himachal Pradesh : 1991 - 1992

Manipur : 1990 - 1991, 1992 - 1993, 1993 - 1994, 1994 - 1995

Nagaland : 1989 - 1990

Sikkim : 1989 - 1990

\* = Not available

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No :** 11

### Expenditure on sub-heads of Malaria

(as % to total)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Andhra Pradesh.</b>						
1989 - 1990	85.77	5.21	8.33	.00	.69	288.84
1990 - 1991	80.00	6.46	12.60	.04	.90	336.46
1991 - 1992	82.57	5.56	10.96	.00	.90	389.67
1992 - 1993	83.98	5.23	10.52	.00	.27	417.27

1993 - 1994	78.70	5.15	15.97	.00	.18	463.47
1994 - 1995	93.29	5.02	1.25	.00	.45	495.42
<b>Assam.</b>						
1989 - 1990	.00	.00	.00	.00	.00	58.53
1990 - 1991	.00	.00	.00	.00	.00	69.32
1991 - 1992	.00	.00	.00	.00	.00	61.03
1992 - 1993	.00	.00	.00	.00	.00	72.77
1993 - 1994	10.02	.27	81.87	.00	.00	70.15
1994 - 1995	9.55	.35	81.93	.00	.00	73.51
<b>Bihar.</b>						
1989 - 1990	98.01	.63	.76	.00	.12	161.32
1992 - 1993	95.25	2.04	.59	.00	2.12	191.25
1993 - 1994	86.33	2.49	9.08	.00	2.10	288.67
1994 - 1995	86.88	2.41	8.70	.00	2.01	301.39
<b>Gujarat.</b>						
1989 - 1990	6.85	.26	1.22	.00	91.67	122.82
1990 - 1991	5.90	.11	14.76	.00	79.24	113.95
1991 - 1992	7.88	.08	55.12	.00	36.92	153.24
1992 - 1993	3.79	.01	36.16	.00	60.04	159.30
1993 - 1994	.00	.00	3.36	.00	42.27	208.20
1994 - 1995	3.80	.78	3.77	.00	91.65	256.03
<b>Haryana.</b>						
1989 - 1990	66.49	2.02	31.50	3.86	.00	103.63
1990 - 1991	81.14	1.35	17.51	.00	.00	98.41
1991 - 1992	68.40	1.01	30.59	.00	.00	129.07
1992 - 1993	72.96	1.26	25.78	.00	.00	135.88
1993 - 1994	72.61	1.69	25.70	.00	.00	169.60
1994 - 1995	77.95	1.78	20.26	.00	.00	161.51
<b>Karnataka.</b>						
1989 - 1990	.00	.00	73.58	.00	26.42	91.16
1990 - 1991	.00	.00	56.22	.00	43.78	91.97
1991 - 1992	.00	.00	49.10	.00	50.90	117.78
1992 - 1993	56.64	.00	.45	.00	42.92	134.49
1993 - 1994	25.12	.00	30.14	.00	44.74	159.25
1994 - 1995	24.06	.00	28.87	.00	47.07	166.27
<b>Kerala.</b>						
1989 - 1990	95.50	1.05	3.06	.00	.40	27.75
1990 - 1991	92.05	1.53	6.10	.00	.31	31.95
1991 - 1992	99.33	.67	.00	.00	.00	29.86
1992 - 1993	83.19	.93	.11	.00	15.77	36.71
1993 - 1994	95.67	1.50	2.41	.00	.42	49.86
1994 - 1995	90.80	1.61	4.78	.00	2.81	65.86
<b>Madhya Pradesh.</b>						
1990 - 1991	79.81	2.93	11.76	.00	5.50	190.22
1991 - 1992	63.83	2.20	30.21	.00	3.76	252.20
1992 - 1993	91.34	2.38	.64	.00	5.64	188.20
1993 - 1994	59.33	1.63	35.46	.00	3.58	352.66
1994 - 1995	66.18	1.93	27.77	.00	4.12	328.04

(Cont. Table No : 11)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Maharashtra.</b>						
1990 - 1991	68.25	2.89	24.77	.00	4.09	372.50
1991 - 1992	68.02	3.95	22.83	.00	5.19	380.34
1992 - 1993	84.09	.00	15.91	.00	.00	415.62
1993 - 1994	77.00	5.36	12.82	.00	4.81	416.52
1994 - 1995	76.40	4.41	14.93	.00	4.26	448.81
<b>Orissa.</b>						
1989 - 1990	86.19	.78	13.03	.00	.00	76.75
1990 - 1991	82.74	.42	16.84	.00	.00	83.14

1991 - 1992	84.05	.33	15.61	.00	.00	89.68
<b>Punjab.</b>						
1990 - 1991	68.28	.89	30.76	.00	.07	148.98
1991 - 1992	79.93	.73	19.20	.00	.15	130.68
1992 - 1993	64.54	.72	34.56	.00	.18	164.21
1993 - 1994	85.76	4.77	9.31	.00	.16	124.91
1994 - 1995	83.45	4.82	11.51	.00	.21	131.15
<b>Rajasthan.</b>						
1989 - 1990	51.35	2.08	46.57	.00	.00	194.84
1990 - 1991	71.46	2.20	26.34	.00	.00	170.37
1991 - 1992	68.87	1.72	29.41	.00	.00	190.49
1992 - 1993	74.88	2.10	23.02	.00	.00	213.42
1993 - 1994	74.64	2.70	22.66	.00	.00	234.28
1994 - 1995	71.41	1.76	26.82	.00	.00	261.60
<b>Uttar Pradesh.</b>						
1989 - 1990	51.91	1.52	23.37	.00	23.21	465.50
1990 - 1991	72.48	3.38	8.98	.00	15.16	457.20
1991 - 1992	60.70	1.35	22.65	.00	15.29	448.80
1992 - 1993	60.88	1.18	27.09	.00	10.85	639.27
1993 - 1994	73.23	1.46	9.80	.00	15.52	516.49
1994 - 1995	75.09	1.32	7.87	.00	15.72	569.33
<b>West Bengal.</b>						
1989 - 1990	96.31	1.69	.24	.00	1.75	147.75
1990 - 1991	91.09	.95	4.98	.00	2.98	243.27
1991 - 1992	91.51	1.02	5.68	.00	1.80	220.68
1992 - 1993	97.73	.89	.15	.00	1.23	211.50
1993 - 1994	94.88	1.47	2.17	.00	1.49	223.36
1994 - 1995	94.72	1.59	2.13	.00	1.56	230.59
<b>Arunachal Pradesh.</b>						
1989 - 1990	21.13	1.38	.00	.00	77.49	15.24
1990 - 1991	93.39	4.50	.00	.00	2.12	3.78
1992 - 1993	66.27	2.54	.00	.00	31.19	6.70
1993 - 1994	81.80	1.24	.00	.00	16.96	13.74
1994 - 1995	78.52	1.34	.00	.00	20.14	12.71
<b>Goa</b>						
1989 - 1990	13.76	.00	4.76	.00	.00	1.89
1990 - 1991	78.88	12.93	8.19	.00	.00	2.32
1991 - 1992	91.56	3.11	5.33	.00	.00	2.25
1992 - 1993	93.98	3.21	2.81	.00	.00	2.49
1993 - 1994	77.49	2.57	19.94	.00	.00	3.11
1994 - 1995	85.93	2.96	11.11	.00	.00	2.70
<b>Mizoram.</b>						
1989 - 1990	93.39	1.42	5.20	.00	.00	6.35
1990 - 1991	95.00	1.13	3.87	.00	.00	6.20
1991 - 1992	85.01	1.48	13.50	.00	.00	6.74
1992 - 1993	94.92	2.61	2.47	.00	.00	7.28
1993 - 1994	94.74	.20	5.06	.00	.00	9.89
1994 - 1995	99.36	.26	.39	.00	.00	7.78

(Cont. Table No : 11)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Himmachal Pradesh.</b>						
1989 - 1990	64.91	4.11	30.84	.00	.14	35.05
1990 - 1991	83.96	5.68	8.62	.00	1.74	31.54
1992 - 1993	77.17	2.67	19.97	.00	.15	45.72
1993 - 1994	76.64	5.41	17.71	.00	.19	51.38
1994 - 1995	82.95	4.38	12.44	.00	.19	53.20
<b>Meghalaya.</b>						
1993 - 1994	86.01	10.21	.51	.00	3.26	21.44
1994 - 1995	86.11	9.94	.54	.00	3.18	22.03
<b>Nagaland.</b>						
1990 - 1991	74.98	7.13	16.53	.00	1.35	16.27

1991 - 1992	87.13	7.53	1.67	.00	3.67	15.54
1992 - 1993	86.94	7.73	4.30	.00	1.03	17.46
1993 - 1994	88.03	6.88	3.62	.00	1.47	19.05
1994 - 1995	88.70	6.51	3.40	.00	1.38	20.27
<b>Sikkim.</b>						
1990 - 1991	91.35	4.32	4.32	.00	.00	3.47
1991 - 1992	92.87	3.79	3.34	.00	.00	4.49
1992 - 1993	90.83	4.87	4.30	.00	.00	3.49
1993 - 1994	93.24	5.00	1.76	.00	.00	3.40
1994 - 1995	96.30	3.70	.00	.00	.00	4.60
<b>Tripura.</b>						
1989 - 1990	88.48	2.66	.00	.00	8.86	16.93
1990 - 1991	56.33	1.51	2.74	.00	39.43	29.22
1991 - 1992	49.07	2.95	.00	.00	47.98	14.59
1992 - 1993	67.05	2.42	.00	.00	30.52	10.32
1993 - 1994	45.21	2.11	.60	.00	52.08	16.59
1994 - 1995	45.17	2.96	.11	.00	51.76	17.91

**Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No :** 12

**Expenditure on sub-heads of Tuberculosis**  
(as % to total)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Andhra Pradesh.</b>						
1989 - 1990	70.31	2.02	25.86	1.75	.06	48.10
1990 - 1991	82.53	2.44	13.41	1.62	.00	41.85
1991 - 1992	73.24	1.72	23.46	1.41	.18	51.15
1992 - 1993	82.97	1.97	13.65	1.38	.04	52.90
1993 - 1994	77.93	2.03	18.84	1.20	.00	67.37
1994 - 1995	81.91	1.90	14.95	1.24	.00	71.58
<b>Assam.</b>						
1989 - 1990	16.10	.00	9.29	.00	.00	18.63
1990 - 1991	16.60	.00	.00	.00	.00	13.43
1991 - 1992	16.13	.00	.00	.00	.00	17.11
1992 - 1993	100.00	.00	.00	.00	.00	7.63
1993 - 1994	59.20	1.78	15.92	.00	23.10	18.53
1994 - 1995	56.59	2.47	16.92	.00	24.01	18.20
<b>Bihar</b>						
1989 - 1990	99.04	.48	.34	.00	.14	20.75
1990 - 1991	.00	.00	.00	.00	.00	2.99
1992 - 1993	2.90	33.37	97.49	.29	.00	10.34
1993 - 1994	2.88	39.62	97.02	.38	.00	10.40
1994 - 1995	3.24	108.77	97.04	.48	.00	10.49
<b>Gujarat.</b>						
1989 - 1990	59.86	2.57	.06	1.98	35.53	52.07
1990 - 1991	57.38	4.00	.10	.29	38.23	61.47
1991 - 1992	44.91	5.30	14.99	11.96	22.84	82.21
1992 - 1993	28.08	4.92	.80	.00	66.21	77.86
1993 - 1994	.00	.00	.00	.00	19.65	91.62
1994 - 1995	41.70	1.68	8.20	1.61	46.81	105.85
<b>Haryana.</b>						
1989 - 1990	64.70	2.05	33.09	.00	.16	12.18
1990 - 1991	60.75	1.44	37.63	.00	.18	16.61

1991 - 1992	80.82	1.51	17.53	.00	.14	13.92
1992 - 1993	39.90	3.05	56.99	.00	.06	32.18
1993 - 1994	40.71	1.66	57.59	.00	.04	48.10
1994 - 1995	39.60	.67	59.53	.00	.20	60.83
<b>Karnataka.</b>						
1990 - 1991	66.92	.12	24.89	7.09	.98	48.82
1991 - 1992	75.06	.23	10.79	12.32	1.60	52.01
1992 - 1993	70.65	.72	16.34	11.95	.34	63.84
1993 - 1994	52.01	.19	30.56	14.46	2.77	82.42
1994 - 1995	48.26	.17	35.20	12.95	3.42	96.65
<b>Kerala.</b>						
1989 - 1990	58.96	.18	.00	.00	30.50	10.82
1990 - 1991	51.96	.34	.00	.00	47.71	17.90
1991 - 1992	80.83	.40	.08	.00	18.69	12.36
1992 - 1993	76.67	.24	1.07	.00	22.02	16.80
1993 - 1994	60.29	.50	7.75	.00	31.46	25.81
1994 - 1995	53.59	.47	24.67	.00	21.27	37.90
<b>Madhya Pradesh.</b>						
1990 - 1991	35.36	1.59	.60	.00	57.17	10.04
1991 - 1992	64.33	1.08	1.20	5.23	28.16	70.68
1992 - 1993	75.56	1.31	1.60	5.83	15.70	64.84
1993 - 1994	67.38	1.01	1.64	4.69	25.29	83.13
1994 - 1995	73.61	.90	1.18	3.75	20.55	106.56

(Cont. Table No : 12)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Maharashtra.</b>						
1990 - 1991	49.66	2.05	45.69	2.59	.00	121.84
1991 - 1992	60.56	2.28	26.05	3.11	7.99	108.62
1992 - 1993	.00	.00	.00	.00	.00	128.79
1993 - 1994	50.77	1.60	45.11	2.53	.00	168.71
1994 - 1995	48.48	1.87	46.56	2.49	.59	168.50
<b>Orissa.</b>						
1989 - 1990	71.33	1.38	7.97	5.25	14.07	20.96
1990 - 1991	69.37	1.32	8.80	5.11	15.40	22.72
1991 - 1992	72.72	1.18	21.44	4.65	.00	26.21
<b>Punjab.</b>						
1989 - 1990	79.11	.52	4.69	3.27	.28	29.01
1990 - 1991	79.32	.62	16.51	3.16	.39	30.41
1991 - 1992	78.00	.52	18.27	2.91	.30	32.95
1992 - 1993	80.85	.70	13.47	4.42	.56	28.51
1993 - 1994	69.90	.53	26.63	2.43	.51	43.29
1994 - 1995	65.38	1.05	30.79	2.24	.54	53.50
<b>Rajasthan.</b>						
1989 - 1990	62.73	1.75	31.31	.00	4.21	53.72
1990 - 1991	67.49	1.27	27.50	.00	3.75	65.61
1991 - 1992	65.33	1.29	28.84	.00	4.53	64.24
1992 - 1993	68.99	2.27	23.63	.00	5.12	69.75
1993 - 1994	67.69	1.96	25.91	.00	4.44	84.67
1994 - 1995	62.84	1.59	31.94	.00	3.63	101.57
<b>Tamil Nadu.</b>						
1992 - 1993	55.52	.77	1.81	6.93	23.62	67.53
1993 - 1994	49.46	.80	.87	5.56	13.51	89.92
1994 - 1995	52.20	.79	.80	5.32	9.17	94.00
<b>Uttar Pradesh.</b>						
1989 - 1990	47.68	1.25	8.82	.00	42.25	139.46
1990 - 1991	86.11	1.54	8.33	.06	3.96	179.33
1991 - 1992	46.87	1.21	8.88	2.21	40.83	157.26
1992 - 1993	60.14	2.68	10.61	4.27	22.31	129.24

1993 - 1994	50.94	1.04	13.40	1.79	32.83	179.10
1994 - 1995	59.15	1.08	8.39	1.85	29.53	172.87
<b>West Bengal.</b>						
1989 - 1990	77.01	.55	10.03	5.72	6.69	96.05
1990 - 1991	80.80	.59	2.80	4.23	11.57	132.11
1991 - 1992	82.06	.74	7.10	4.60	5.49	106.30
1992 - 1993	84.55	2.45	4.15	4.05	4.80	114.48
1993 - 1994	74.64	.50	12.86	4.75	7.25	147.95
1994 - 1995	72.52	.53	14.61	5.45	6.89	165.56
<b>Arunachal Pradesh.</b>						
1989 - 1990	61.78	7.55	14.65	.00	16.02	4.37
1990 - 1991	88.62	5.54	5.23	.00	.62	3.25
1992 - 1993	66.55	7.39	5.46	.00	20.60	5.68
1993 - 1994	46.24	4.90	5.35	.00	43.51	8.78
1994 - 1995	68.97	7.20	8.40	.00	15.44	6.67
<b>Goa.</b>						
1989 - 1990	81.94	.38	14.83	.00	2.85	5.26
1990 - 1991	82.61	.78	16.61	.00	.00	6.44
1991 - 1992	81.74	.44	17.82	.00	.00	6.79
1992 - 1993	85.31	.67	9.30	4.72	.00	7.42
1993 - 1994	76.16	.58	18.06	5.21	.00	8.64
1994 - 1995	86.42	.62	6.79	6.17	.00	8.10

(Cont. Table No : 12)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Mizoram.</b>						
1989 - 1990	82.81	1.05	.00	.00	16.14	2.85
1990 - 1991	88.46	.26	.00	.00	11.28	3.90
1991 - 1992	90.09	.90	.00	.00	9.01	3.33
1992 - 1993	92.22	.00	.00	.00	7.78	4.63
1993 - 1994	88.42	.00	2.11	.00	9.47	4.75
1994 - 1995	93.27	.35	.00	.00	6.37	5.65
<b>Himmachal Pradesh.</b>						
1989 - 1990	16.84	.87	.58	.00	.00	10.39
1990 - 1991	32.59	1.75	1.91	.00	.00	6.29
1992 - 1993	30.75	1.16	.65	.00	.00	7.74
1993 - 1994	34.89	1.33	1.05	.00	.19	10.52
1994 - 1995	35.46	1.15	1.06	.00	.08	12.21
<b>Meghalaya.</b>						
1993 - 1994	52.67	10.70	32.89	2.01	.27	7.48
1994 - 1995	66.41	295.42	49.62	109.92	12.98	1.31
<b>Nagaland.</b>						
1990 - 1991	75.36	21.53	6.87	6.74	11.93	7.71
1991 - 1992	80.00	22.48	3.98	6.46	10.19	8.05
1992 - 1993	78.56	22.42	5.11	5.98	10.23	9.19
1993 - 1994	81.13	22.35	4.88	5.16	8.83	10.65
1994 - 1995	82.17	22.44	3.98	6.24	8.78	11.05
<b>Sikkim.</b>						
1990 - 1991	62.50	12.50	25.00	.00	.00	.80
1991 - 1992	62.50	12.50	25.00	.00	.00	.80
1992 - 1993	62.50	12.50	25.00	.00	.00	.80
1993 - 1994	75.56	18.89	5.56	.00	.00	.90
1994 - 1995	71.67	28.33	.00	.00	.00	.60
<b>Tripura.</b>						
1989 - 1990	50.43	19.09	.00	.00	30.48	3.51
1990 - 1991	23.67	4.73	.00	.00	71.60	1.69
1991 - 1992	48.00	10.00	.00	.00	42.00	1.00
1992 - 1993	40.57	.94	.00	.00	58.49	1.06
1993 - 1994	21.49	1.75	.00	.00	76.75	2.28

1994 - 1995	19.46	4.70	.00	.00	75.84	2.98
-------------	-------	------	-----	-----	-------	------

**Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No : 13**

**Expenditure on sub-heads of Leprosy**  
(as % to total)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Andhra Pradesh.</b>						
1989 - 1990	85.22	6.34	6.55	.44	1.44	143.95
1990 - 1991	85.22	6.45	7.55	.31	.46	153.69
1991 - 1992	82.89	4.81	11.03	.33	.94	185.15
1992 - 1993	86.82	4.88	7.47	.24	.59	201.34
1993 - 1994	87.94	5.17	5.62	.31	.96	230.36
1994 - 1995	88.88	4.75	5.17	.31	.89	250.64
<b>Assam.</b>						
1989 - 1990	44.84	12.42	16.71	.00	26.02	16.10
1993 - 1994	61.53	1.02	5.36	.00	9.39	25.55
1994 - 1995	56.64	1.08	5.94	.00	11.64	24.91
<b>Bihar.</b>						
1989 - 1990	99.75	.17	.08	.00	.00	83.24
1992 - 1993	99.54	1.74	.63	.00	.84	130.74
1993 - 1994	97.51	1.30	.49	.00	.70	166.60
1994 - 1995	97.38	1.35	.51	.00	.76	161.19
<b>Gujarat.</b>						
1989 - 1990	71.17	2.37	.00	2.93	23.53	35.83
1990 - 1991	68.54	.34	.81	1.27	29.04	44.22
1991 - 1992	7.61	2.83	42.34	2.52	44.68	48.72
1992 - 1993	68.89	4.86	.19	.00	26.06	58.63
1994 - 1995	67.63	4.86	2.65	1.86	23.01	57.67
<b>Haryana.</b>						
1989 - 1990	52.00	14.00	30.00	.00	4.00	.50
1990 - 1991	58.11	1.35	35.14	.00	5.41	.74
1991 - 1992	81.58	.00	7.89	.00	10.53	.38
1992 - 1993	95.65	.00	.00	.00	4.35	.46
1993 - 1994	78.87	.00	.00	.00	21.13	.71
1994 - 1995	77.27	.00	.00	.00	22.73	.66
<b>Karnataka.</b>						
1989 - 1990	28.60	.58	10.70	.17	59.95	24.02
1990 - 1991	35.60	5.96	3.62	3.75	51.08	22.67
1991 - 1992	43.99	.29	6.28	.77	48.67	20.71
1992 - 1993	42.75	2.53	6.24	.34	48.13	26.43
1993 - 1994	11.09	.12	5.23	2.43	48.77	42.03
1994 - 1995	10.50	.12	4.95	2.21	.54	48.48
<b>Kerala.</b>						
1989 - 1990	94.97	1.23	1.90	.00	1.90	16.30
1990 - 1991	97.69	1.27	.41	.00	.64	22.04
1991 - 1992	93.46	.24	6.15	.00	.14	20.80
1992 - 1993	76.03	.69	.00	.00	23.28	31.66
1993 - 1994	93.71	1.08	4.40	.00	.81	45.48
1994 - 1995	96.67	.85	1.74	.00	.73	57.37
<b>Madhya Pradesh.</b>						
1990 - 1991	83.83	7.29	.67	1.79	6.43	62.72

1991 - 1992	83.10	7.22	1.53	1.77	6.37	63.27
1992 - 1993	88.68	3.74	.57	1.49	5.51	76.93
1993 - 1994	87.27	4.82	1.15	1.55	5.21	80.68
1994 - 1995	86.50	4.98	1.50	1.52	5.49	85.95

(Cont. Table No : 13)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Maharashtra.</b>						
1990 - 1991	80.87	7.90	4.40	.26	6.56	130.39
1991 - 1992	1.50	.22	.00	.00	5.96	139.00
1993 - 1994	77.73	6.73	4.48	.27	10.79	193.06
1994 - 1995	78.59	10.06	4.17	.15	7.03	194.07
<b>Orissa.</b>						
1989 - 1990	88.24	3.21	5.70	1.03	1.82	52.30
1990 - 1991	85.53	2.94	6.98	.93	3.62	56.88
1991 - 1992	86.88	2.54	5.74	.75	4.09	67.75
<b>Punjab.</b>						
1990 - 1991	91.13	1.61	7.26	.00	.00	2.48
1991 - 1992	92.12	3.73	2.07	.00	2.07	2.41
1992 - 1993	92.21	4.33	3.46	.00	.00	2.31
1993 - 1994	91.61	2.92	2.55	.00	2.92	2.74
1994 - 1995	87.05	4.91	4.69	.00	3.35	4.48
<b>Rajasthan.</b>						
1989 - 1990	80.59	3.61	15.38	.00	.42	9.43
1990 - 1991	88.96	1.86	8.69	.00	.49	10.24
1991 - 1992	90.33	2.63	6.66	.00	.39	12.92
1992 - 1993	74.46	2.45	22.79	.00	.30	16.72
1993 - 1994	90.64	2.25	6.62	.00	.50	16.02
1994 - 1995	92.04	1.27	6.21	.00	.48	16.59
<b>Tamil Nadu.</b>						
1992 - 1993	92.93	4.59	.06	.39	2.02	173.10
1993 - 1994	92.96	3.94	.25	.39	2.47	206.41
1994 - 1995	93.32	3.83	.14	.37	2.34	217.01
<b>Uttar Pradesh.</b>						
1989 - 1990	60.26	15.78	5.82	.00	18.15	58.63
1990 - 1991	77.41	4.80	1.01	.00	16.79	143.09
1991 - 1992	78.85	4.49	3.80	.00	12.87	111.61
1992 - 1993	88.05	1.32	1.14	.49	8.99	289.53
1993 - 1994	76.50	3.54	8.10	.59	11.59	145.08
1994 - 1995	80.34	3.04	3.02	.55	13.06	154.19
<b>West Bengal.</b>						
1989 - 1990	87.97	3.50	3.57	.00	4.96	63.36
1990 - 1991	93.97	.87	.81	.00	4.35	86.01
1991 - 1992	85.07	.83	.18	.00	13.91	76.97
1992 - 1993	94.29	1.21	.13	.00	4.37	83.47
1993 - 1994	91.41	1.10	3.23	.00	4.27	80.88
1994 - 1995	91.81	.96	3.02	.00	4.22	87.87
<b>Arunachal Pradesh.</b>						
1989 - 1990	60.00	5.26	1.05	.00	33.68	1.90
1990 - 1991	92.80	6.40	.80	.00	.00	1.25
1992 - 1993	55.69	5.69	2.03	.00	36.59	2.46
1993 - 1994	52.72	4.76	1.70	.00	40.82	2.94
1994 - 1995	89.95	7.41	2.65	.00	.00	1.89
<b>Goa.</b>						
1989 - 1990	83.06	.98	15.96	.00	.00	3.07

1990 - 1991	82.78	.25	16.96	.00	.00	3.95
1991 - 1992	75.97	1.08	22.94	.00	.00	4.62
1992 - 1993	81.97	.86	4.29	12.88	.00	4.66
1993 - 1994	84.79	1.01	6.09	8.11	.00	4.93
1994 - 1995	87.20	.80	4.00	8.00	.00	5.00

(Cont. Table No : 13)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Mizoram.</b>						
1989 - 1990	91.20	4.00	.00	.00	4.80	2.50
1990 - 1991	90.20	3.92	.33	.00	5.56	3.06
1991 - 1992	90.75	4.27	.00	.00	4.98	2.81
1992 - 1993	97.40	.97	.00	.00	1.62	3.08
1993 - 1994	97.53	1.37	.27	.00	.82	3.65
1994 - 1995	97.61	1.19	.30	.00	.90	3.35
<b>Himachal Pradesh.</b>						
1989 - 1990	84.74	3.33	11.23	.00	.69	7.21
1990 - 1991	86.58	2.91	9.96	.00	.56	8.94
1992 - 1993	85.02	3.11	11.14	.00	.64	10.95
1993 - 1994	83.68	3.07	11.53	.00	1.72	13.36
1994 - 1995	83.89	2.71	11.73	.00	1.61	15.52
<b>Meghalaya.</b>						
1993 - 1994	67.98	4.07	26.83	.84	.00	7.12
1994 - 1995	69.38	3.81	25.99	.82	.00	7.35
<b>Nagaland.</b>						
1990 - 1991	78.11	9.88	3.49	3.29	5.23	5.16
1991 - 1992	83.46	8.55	.37	3.16	4.46	5.38
1992 - 1993	84.24	8.13	.83	2.99	3.81	6.03
1993 - 1994	86.34	7.04	1.01	2.59	3.02	6.96
1994 - 1995	85.52	7.17	.95	3.52	2.84	7.39
<b>Tripura.</b>						
1989 - 1990	86.53	4.84	.00	.00	8.63	4.75
1990 - 1991	77.66	15.29	.00	.00	7.05	6.67
1991 - 1992	80.67	15.64	.00	.00	3.69	5.69
1992 - 1993	84.12	13.04	.00	.00	2.84	5.29
1993 - 1994	76.08	18.36	.00	.00	5.56	7.19
1994 - 1995	76.35	18.35	.00	.00	5.29	8.50

**Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No : 14**

**Expenditure on sub-heads of Blindness**

(as % to total)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Andhra Pradesh.</b>						
1989 - 1990	8.54	.16	.00	.00	91.29	12.29
1990 - 1991	10.21	1.13	.00	.00	88.65	7.05
1991 - 1992	7.95	7.40	.00	.00	84.66	9.06
1992 - 1993	8.55	.42	13.16	.00	77.87	11.93
1993 - 1994	9.69	4.47	7.61	.00	78.23	13.41

1994 - 1995	8.43	4.18	4.74	.00	82.66	14.36
<b>Bihar.</b>						
1989 - 1990	100.00	.00	.00	.00	.00	1.15
1992 - 1993	38.66	.00	8.64	.00	52.70	4.63
1993 - 1994	34.34	.00	12.96	.00	52.70	4.63
1994 - 1995	34.34	.00	12.96	.00	52.70	4.63
<b>Gujarat.</b>						
1989 - 1990	57.96	2.18	3.07	.00	36.80	17.91
1990 - 1991	62.75	.67	.00	.10	36.49	21.02
1991 - 1992	35.31	4.74	31.54	.51	27.91	21.75
1992 - 1993	63.66	2.11	2.19	4.42	27.62	26.03
1994 - 1995	79.57	.50	3.56	.71	15.66	28.10
<b>Haryana.</b>						
1989 - 1990	51.87	1.25	.63	.00	46.25	1.60
1990 - 1991	11.76	.00	12.67	.00	75.57	2.21
1991 - 1992	2.06	.00	1.55	.00	96.39	1.94
1992 - 1993	3.54	.32	62.16	.00	33.98	6.21
1993 - 1994	15.84	6.40	28.42	.00	49.35	9.22
<b>Kerala.</b>						
1989 - 1990	92.38	2.22	3.49	.00	1.90	3.15
1990 - 1991	89.24	4.48	1.57	.00	4.71	4.46
1991 - 1992	96.43	2.47	.00	.00	1.10	3.64
1992 - 1993	86.43	5.59	1.40	.00	6.59	5.01
1993 - 1994	60.78	6.24	8.23	.00	24.75	14.10
1994 - 1995	70.80	2.42	5.91	.00	20.86	16.92
<b>Madhya Pradesh.</b>						
1990 - 1991	66.29	3.38	6.06	.00	24.28	18.66
1991 - 1992	70.18	2.99	2.61	.00	24.22	21.43
1992 - 1993	70.24	3.76	5.04	.00	20.96	24.19
1993 - 1994	62.57	3.92	3.19	.00	30.31	34.44
1994 - 1995	61.13	4.56	6.34	.00	27.98	39.46
<b>Orissa.</b>						
1989 - 1990	88.83	2.23	1.68	.00	7.26	1.79
1990 - 1991	92.83	.00	1.08	.00	6.09	2.79
1991 - 1992	32.70	22.75	13.98	.00	30.57	4.22
<b>Punjab.</b>						
1989 - 1990	.00	.00	.00	.00	100.00	.08
1990 - 1991	52.94	5.26	15.17	.00	26.63	3.23
1991 - 1992	59.92	1.90	20.46	.00	17.72	4.74
1992 - 1993	56.60	2.03	13.96	.00	27.41	3.94
1993 - 1994	49.21	11.76	23.10	.00	15.93	6.97
1994 - 1995	55.77	10.40	20.46	.00	13.37	8.75
<b>Rajasthan.</b>						
1989 - 1990	46.44	.00	53.56	.00	.00	4.63
1990 - 1991	33.53	1.03	44.31	.00	21.12	6.77
1991 - 1992	29.94	.56	48.49	.00	21.01	8.95
1992 - 1993	22.23	.62	57.23	.00	19.92	13.00
1993 - 1994	14.72	.39	71.64	.00	13.26	20.59
1994 - 1995	17.98	.40	66.15	.00	15.47	19.85

(Cont. Table No : 14)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Tamil Nadu.</b>						
1992 - 1993	78.92	.07	7.10	7.39	6.52	13.66
1993 - 1994	78.68	1.80	8.42	6.68	4.41	14.96
1994 - 1995	85.02	.44	5.65	6.35	2.54	15.75
<b>Uttar Pradesh.</b>						
1989 - 1990	66.01	1.58	.72	.00	31.69	27.80
1990 - 1991	62.14	5.97	3.95	.00	27.95	30.16

1991 - 1992	70.96	1.31	.00	.00	27.72	20.56
1992 - 1993	69.83	5.33	3.27	.00	21.57	34.54
1993 - 1994	40.79	1.08	12.79	.00	45.34	29.64
1994 - 1995	50.92	.92	.00	.00	48.16	27.20
<b>West Bengal.</b>						
1989 - 1990	92.53	1.24	1.45	.00	4.77	4.82
1990 - 1991	80.36	.95	14.76	.00	3.93	8.40
1991 - 1992	87.29	.90	4.30	.00	7.51	9.99
1992 - 1993	80.67	.25	13.44	.00	5.64	16.30
1993 - 1994	86.34	1.69	7.58	.00	4.39	10.03
1994 - 1995	81.29	2.95	10.19	.00	5.57	12.56
<b>Goa.</b>						
1989 - 1990	91.78	1.37	6.85	.00	.00	.73
1990 - 1991	92.86	1.19	5.95	.00	.00	.84
1991 - 1992	98.91	1.09	.00	.00	.00	.92
1992 - 1993	74.36	3.85	21.79	.00	.00	1.56
1993 - 1994	76.64	1.46	21.90	.00	.00	1.37
1994 - 1995	93.10	2.59	2.59	.00	1.72	1.16
<b>Mizoram.</b>						
1989 - 1990	98.78	1.22	.00	.00	.00	.82
1990 - 1991	90.80	8.05	.00	.00	1.15	.87
1991 - 1992	89.11	1.98	2.97	.00	5.94	1.01
1992 - 1993	75.48	2.58	7.10	.00	14.84	1.55
1993 - 1994	72.11	2.11	4.21	.00	21.58	1.90
1994 - 1995	95.76	1.82	.61	.00	1.82	1.65
<b>Meghalaya.</b>						
1989 - 1990	57.89	.00	42.11	.00	.00	.19
1991 - 1992	65.34	.00	1.70	.00	.00	1.76
1993 - 1994	68.95	4.21	15.00	.00	11.84	3.80
1994 - 1995	72.73	3.21	11.50	.00	12.57	3.74
<b>Sikkim.</b>						
1991 - 1992	8.38	20.36	69.46	.00	1.80	1.67
1992 - 1993	35.00	50.00	7.50	.00	7.50	.40
1993 - 1994	38.10	47.62	9.52	.00	4.76	.42
<b>Tripura.</b>						
1989 - 1990	80.00	12.59	1.48	.00	5.93	1.35
1990 - 1991	45.15	36.29	.00	.00	18.57	2.37
1991 - 1992	38.53	21.18	.59	.00	39.71	3.40
1992 - 1993	54.58	15.14	.00	.00	30.28	2.51
1993 - 1994	58.92	11.35	2.70	.00	27.03	3.70
1994 - 1995	46.92	10.77	3.85	.00	38.46	6.50

**Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No :** 15

**Expenditure on sub-heads of A.I.D.S.**  
(as % to total)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Andhra Pradesh.</b>						
1992 - 1993	8.13	.59	22.72	.00	68.56	10.21
1993 - 1994	34.64	1.35	52.76	.08	11.17	24.45
1994 - 1995	71.04	1.35	16.36	.08	11.17	24.45

<b>Gujarat.</b>						
1994 - 1995	48.12	.48	.00	.00	51.41	14.59
<b>Haryana.</b>						
1994 - 1995	3.56	3.85	76.64	.00	15.95	7.02
<b>Kerala.</b>						
1993 - 1994	34.23	.00	.00	.00	65.77	1.11
1994 - 1995	40.00	.00	.00	.00	60.00	2.00
<b>Madhya Pradesh.</b>						
1991 - 1992	68.89	.00	31.11	.00	.00	2.25
1992 - 1993	11.48	.88	21.85	.00	65.78	4.53
1993 - 1994	30.87	.43	40.58	.00	28.12	13.80
1994 - 1995	23.71	.40	38.55	.00	37.35	27.63
<b>Maharashtra.</b>						
1990 - 1991	.00	17.54	82.46	.00	.00	3.25
1991 - 1992	92.29	.00	7.71	.00	.00	3.63
1992 - 1993	100.00	.00	.00	.00	.00	52.33
1993 - 1994	32.82	1.02	66.17	.00	.00	18.71
1994 - 1995	73.06	2.41	24.35	.00	.18	28.21
<b>Punjab.</b>						
1992 - 1993	.00	.00	100.00	.00	.00	2.61
1993 - 1994	42.98	.54	56.48	.00	.00	11.19
1994 - 1995	42.98	.54	56.48	.00	.00	11.19
<b>Rajasthan.</b>						
1992 - 1993	.00	.00	100.00	.00	.00	3.78
1993 - 1994	.00	.00	100.00	.00	.00	6.35
1994 - 1995	.00	.00	100.00	.00	.00	6.35
<b>Tamil Nadu.</b>						
1992 - 1993	93.26	1.12	5.62	.00	.00	1.78
1993 - 1994	27.55	1.43	30.64	.00	40.38	8.42
1994 - 1995	94.51	5.49	.00	.00	.00	.91
<b>Uttar Pradesh.</b>						
1993 - 1994	25.69	1.37	65.11	.00	7.83	7.28
1994 - 1995	36.08	.97	52.68	.00	10.27	11.39
<b>West Bengal.</b>						
1991 - 1992	.00	.00	.00	.00	100.00	.04
1993 - 1994	.62	.00	12.35	.00	87.04	8.10
1994 - 1995	.62	.00	12.35	.00	87.04	8.10
<b>Goa.</b>						
1991 - 1992	.00	20.00	80.00	.00	.00	.05
1992 - 1993	14.10	.00	58.33	.00	27.56	1.56
1993 - 1994	35.29	9.41	25.88	.00	29.41	.85
1994 - 1995	37.00	7.00	31.00	.00	25.00	1.00
<b>Mizoram.</b>						
1991 - 1992	30.00	.00	21.33	.00	48.67	1.50
1992 - 1993	.00	.00	95.19	.00	4.81	1.04
1994 - 1995	33.33	.00	33.33	.00	33.33	.09

(Cont. Table No : 15)

Year	Salaries	Travel	Drugs	Diet	Other	Total
<b>Himmachal Pradesh.</b>						
1992 - 1993	13.93	.00	86.07	.00	.00	3.66
1994 - 1995	8.81	.33	73.88	.00	16.97	9.19
<b>Meghalaya.</b>						
1994 - 1995	69.72	2.75	16.51	.00	11.01	2.18
<b>Tripura.</b>						
1991 - 1992	.00	.00	100.00	.00	.00	.02

1992 - 1993	15.64	.00	26.82	.00	57.54	1.79
1993 - 1994	19.76	3.04	31.61	.00	45.59	3.29
1994 - 1995	17.38	4.08	15.96	.00	62.59	5.64

**Notes :** Wherever expenditure not incurred and data/ breakups not available those states and years have been excluded.

1993-94 are Revised Estimates

1994-95 are Budget Estimates

**Source:** Demand for Grants, respective states and years.

**Table No : 16**

**Prevalence of selected diseases  
(per 100,000 population)**

STATE	MALARIA	TUBERCULOSIS	LEPROSY	BLINDNESS
ANDHRA PRADESH	7776	407	118	5984
ASSAM	10828	638	36	1106
BIHAR	5712	595	123	2749
GUJARAT	12912	308	29	3266
HARYANA	3732	327	14	824
JAMMU & KASHMIR*	3412	245	18	869
KARNATAKA	1828	136	132	4900
KERALA	448	586	18	1404
MADHYA PRADESH	18912	435	136	3831
MAHARASHTRA	14968	293	72	3534
ORISSA	20592	555	96	3161
PUNJAB	10184	238	28	863
RAJASTHAN	20412	724	128	4661
TAMIL NADU	2304	703	209	836
UTTAR PRADESH	29580	560	222	3101
WEST BENGAL	2712	357	47	914
ARUNACHAL PRADESH	16852	938	110	1012
GOA	972	179	16	2714
MIZORAM	18544	311	33	1524
HIMMACHAL PRADESH	4564	242	56	1384
MANIPUR	6564	941	199	1442
MEGHALAYA	22892	321	17	759
NAGALAND	11112	491	153	1373
SIKKIM	NA	NA	NA	NA
TRIPURA	10476	289	0	1430
<b>INDIA</b>	<b>13296</b>	<b>467</b>	<b>120</b>	<b>3001</b>

**Notes :** 1) \* = Refers only to Jammu region.

2) Malaria data is incidence of cases. The NFHS data was for 3 months, we multiplied it by 4 to arrive at the annual figure. For other diseases it is point prevalence.

**Source :** National Family Health Survey 1992-93, All India, International Institute for

**Table No : 17**

**Expenditure Incurred Per case  
(in rupees)**

*The per case expenditure is a normative figure because it is well known that a) actual utilisation of these government programs is only by one fourth to one third of the population and b) the establishment costs (salaries etc.) takes away about three fourth of this expenditure.*

STATE	MALARIA	TUBERCULOSIS	LEPROSY	BLINDNESS
ANDHRA PRADESH	77	186	2445	3
ASSAM	29	52	2448	24
BIHAR	37	19	1175	2
GUJARAT	29	587	4693	18
HARYANA	210	567	189	43
JAMMU & KASHMIR*	NA	NA	NA	NA
KARNATAKA	157	1001	427	5
KERALA	274	96	5875	12
MADHYA PRADESH	14	214	811	9
MAHARASHTRA	33	529	3002	2
ORISSA	13	146	2185	4
PUNJAB	76	567	390	22
RAJASTHAN	22	207	281	6
TAMIL NADU	NA	167	1438	28
UTTAR PRADESH	15	158	891	8
WEST BENGAL	109	448	2484	25
ARUNACHAL PRADESH	43	658	2431	280
GOA	212	3426	24070	47
MIZORAM	52	1985	12444	136
HIMMACHAL PRADESH	186	593	3628	49
MANIPUR	46	270	1690	56
MEGHALAYA	42	733	19265	139
NAGALAND	116	1386	2919	68
SIKKIM	NA	NA	NA	NA
TRIPURA	33	124	NA	59
INDIA	NA	NA	NA	NA

**Notes :** 1) \* = Refers only to Jammu region.

2) The expenditure figures for Orissa and Manipur refer to year 1991-92

**Source :** *Prevalance data* : National Family Health Survey 1992-93, All India, International Institute for Population Sciences, Bombay, August 1995. (Pg. 205, Tables 8.2)

*Expendiute data* : Respective state government Demand for Grants, Various Years