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**Extended Book Review of Jagdish Bhagwati, and Arvind Panagariya. 2013. Why Growth Matters: How Economic Growth in India Reduced Poverty and the Lessons for Other Developing Countries. New York: PublicAffairs; Jean Drèze Jean and Amartya Sen. 2013. An uncertain glory: India and its contradictions. Princeton and London: Princeton University Press and Penguin; and Gupta, Akhil. 2012. Red tape: Bureaucracy, structural violence, and poverty in India. Durham, NC: Duke University Press**

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Jean Drèze and Amartya Sen. 2013. *An uncertain glory: India and its contradictions*. Princeton & London: Princeton University Press & Penguin;

Akhil Gupta. 2012. *Red tape: Bureaucracy, structural violence, and poverty in India*. Durham, NC: Duke University Press

In May 2014, a new political era dawned in India. National elections swept the Bharatiya Janata Party (BJP) to power in the Lok Sabha, India's lower house of Parliament. On a turnout of 66%, the BJP itself won 31% of the votes and 52% of the seats; its coalition partners added a further 8% of the votes and 10% of the seats. Congress, hitherto in power with a coalition, received 19% of the votes and only 8% of the seats. Narendra Modi, the new Prime Minister, was *persona non grata* for many years in the USA and much of Europe because, as Chief Minister in Gujarat in 2002, he let police stand by – and sometimes participate – as Hindu mobs killed Muslims and forced them out of their homes. Post his General Election victory, however, focus has turned to his nationalistic, authoritarian and pro-business politics. Over the past 5 years, the Indian economic 'miracle' has seemed to stumble: the BJP itself totally disrupted Parliamentary procedures, preventing any significant legislation. Not surprisingly, international business 'sentiment' has judged the new government to be a 'good thing' and markets (and the Indian Rupee) rose.

In this context the books under review here take on considerable contemporary significance. In very different ways they address the issue of what is happening to India's development trajectory, and the nature – and desirability – of whatever form of welfare state India has achieved or aspires to. Drèze and Sen's book continues a long series of publications in which they argue that human and social development is lagging badly behind economic growth in India – and that more attention to public health and education, in particular, would enhance India's economic performance. Bhagwati and Panagariya continue their personal attacks on a straw man they have erected from Sen's larger opus, and are much more positive about India's development achievements and prospects. Paying attention to the detail as well as the wider politics of bureaucratic procedures, Gupta asks why the Indian state, despite its professed goal of reducing poverty, continues to oversee as many as two million premature deaths a year. Bhagwati and Panagariya are clearly on the 'right', as can be seen from the warm welcome their book has received from *The Economist* and right-wing think-tanks. Drèze and Sen share with Gupta a left-of-centre concern with current trends, but they talk past each other, with very few common referents, and come up with very different recommendations for action. Whereas Drèze and Sen focus on discontinuities – particularly

those associated with the neo-liberal turn in Indian policy-making from 1991 onwards, Gupta sees continuities – with the colonial bureaucracy, as well as with the Nehruvian high noon of the 1950s. For Drèze and Sen, a welfare state is, in general terms, part of the solution to India's ills, but for Gupta the welfare programmes are themselves a major part of the problem. Drèze and Sen talk in the main at an abstract level, referring to rates (of educational enrolments, immunizations, nutritional adequacy, for example), and Gupta deals with processes and meanings within the interstices of institutions that generate such indicators. While Drèze and Sen have been arms-length supporters of the Congress Government's social welfare programmes, Bhagwati and Panagariya have positioned themselves to take on senior advisory roles in Modi's new Government; as an anthropologist, Gupta is unlikely to be asked to advise on affairs considered the preserve of economists.

Akhil Gupta has been based on the US West Coast since 1980. His new book develops an argument linking Foucaultian global governmentality with Paul Farmer's approach to 'structural violence'. He uses his detailed ethnography from the 1990s of one part of India's health bureaucracy – its provisions for child nutrition – to ask why, despite a huge investment in health programmes, 'do state programs lead to the death of a massive number of the poor?' (Gupta 2012: 38). It is a paradox, he says, that although the Indian state claims as one of its primary sources of legitimacy a struggle against poverty, it ends up "managing not to avoid the death of a massive number of people" (Gupta 2012: 237). Gupta cites Farmer to the effect that structural violence means that "suffering is muted or elided altogether" and generates "the complicity necessary to erase history and cover up the clear links between the dead and near-dead and those who are the winners in the struggle for survival" (Farmer 2004: 307). On this basis, Gupta suggests, rather than a sharp break with the past, continuity is a better way to understand the failures of the Indian state. Framing the problem in terms of a shift of a changing ideology 'would overstate the importance of the transition from welfare to neoliberalism' (Gupta 2012:5: 251).

'The commonplace that neoliberalism results in cutbacks to welfare is hard to generalize for states that have never been welfare states. The now-well-accepted story that neoliberal reform results in a war on the poor, extending and deepening inequalities, requires careful rethinking in such contexts' (Gupta 2012: 273)

For Gupta, the Indian state is part of a global governmentality, activities that manage population – 'its health, longevity, productivity, resources' (Gupta 2012: 238). Techniques of regulation, enumeration and accountability can be understood as bio-power. From this point of view, immunisation campaigns, maternal and child health programmes, but also job creation programmes are 'what states do in the modern world to establish and maintain their power'. They involve a degree of 'arbitrariness' – they reach individuals or households through processes of knowing and of ignorance: With respect to the Integrated Child Development Scheme that Gupta studied in the early 1990s:

One can speak of violence here in the gap between the promise of care and the lack of funding for the program that would have made that care a reality. One can also speak of arbitrariness in the provision of care in that, in the absence of any comprehensive map of the population, it was impossible for anyone to know if the program was in fact serving its target population. The children who attended an *anganwadi* [child-care centre] were well documented, but the ones who did not were outside the ambit of surveillance and care, beyond the ambivalent embrace of biopolitics (Gupta 2012: 266).

The strength of Gupta's analysis is that it pays attention to how bureaucracies – including public health bureaucracies, whether in the public or the private sector – achieve their work on a daily basis. The intricate balance of demand and supply – for example in the case of maternal and child health – is 'managed' by front-line staff through a mixture of promises and threats, making good on promises to some but systematically discouraging others.

Elsewhere Gupta frames the disjunction between promise and achievement in terms of the gap between 'documents' and their 'referents' in everyday life. Like Matthew Hull, whose fieldwork in urban Pakistan describes the gaps between official procedures and local realities, and how official rules have to be paralleled with unofficial ones (Hull 2012), Gupta argues that in India there is also 'a stubborn attachment to colonial practices' (Gupta 2013: 436). As a result, complex procedures are created in order to bridge the gaps between the documents and 'real-life'. Gupta suggests that this 'gap is larger in colonial and postcolonial societies than it is in the global North', because those rules and documents are derived from models established in the colonial or neo-colonial metropolises, and then applied across empires or the 'developing world' (Gupta 2013: 436-7).

Gupta is equivocal about how such a system can be reformed. How can social reformers reduce the misfit between people and the programme, in order that the programme can become more 'productive'? Although Gupta makes strong political statements, an analysis in terms of 'structural violence' sometimes, for Gupta at least, seems a counsel of despair: we are all involved in causing the excess mortality: 'all those who benefit from the status quo *and do not want to see it changed* then become complicit in this violence against the poor' (Gupta 2012: 21-22, emphasis mine). Foucault himself took many political stands, but his followers have generally – like Gupta – avoided setting out the moral and political implications of their analyses. They seem to suggest that the better states are at creating a bio-power-based governmentality, the greater the surveillance and the creation of new kinds of subjects. Gupta himself is sceptical about whether 'ambitious measures to care for the poor will end up making a dramatic difference to their life chances' (Gupta 2012: 278), without himself proposing a programme of action. Can formal politics make a difference?

Bio-power has several meanings, but one is that contemporary states have, as a major concern, people's lives and their bodies. Increasingly, one criterion by which states are judged is by how long people live, and how and why they die prematurely. The economists

Jean Drèze and Amartya Sen epitomize this concern, using a variety of social statistics to highlight the weaknesses of the Government of India in comparison with the achievements of other countries as well as against a yardstick of what could be possible in an India that was better managed. Jean Drèze has been resident in India off and on since 1979, and took Indian citizenship in 2002; Amartya Sen has taught in Delhi, Oxford and Harvard, as well as serving a term as Master of Trinity College Cambridge. They have written together since the 1980s, and every 10 years or so have a volume considering India's development model. The first, in 1995, was *India: Economic Development and Social Opportunity*; the second, in 2002, was *India: Development and Participation*. Their *An Uncertain Glory, India and Its Contradictions* continues this tradition, up-dating tables and some arguments but otherwise being rather predictable in its approach. Sen has been a powerful supporter of the use of Human Development Indicators developed by his friend Mahbub ul Haq in the 1980s and 1990s. This puts him at loggerheads with other powerful Indian economists based in the USA, most notably Jagdish Bhagwati, whose own books constitute a sustained attack on the work of Drèze and Sen. For Bhagwati and his colleague, Arvind Panagariya, the Gujarat model (claimed by Narendra Modi) – a form of development primarily driven by focusing on economic growth and private entrepreneurship – is superior to the Kerala model of primarily redistribution and state-driven development that has been championed by Drèze and Sen. Bhagwati and Panagariya's book on Indian development preceded the most recent Drèze and Sen volume, and makes a strident case that economic growth must precede any redistributive policies: the pie must grow before it can be divided.

'A lack of awareness of the importance of health and education or the absence of good intentions was not behind the slow progress in these areas. Instead ... progress was inhibited by slow growth' (Bhagwati and Panagariya 2013: 18).

By contrast, Drèze and Sen argue that India has – to the great cost of its population – ignored key basic social development building blocks: mass primary education, and especially the education of girls, as well as investments in public health. A few examples show the extent of the problem: India's immunization rates of 1-year-olds are lower than most other Asian and sub-Saharan countries; its public expenditures on health as a share of GDP are lower than almost any comparator country; its public health centres have low use rates and high levels of staff absenteeism; and simple diseases are often inaccurately diagnosed and inappropriately treated, in the public and private sectors alike (Drèze and Sen 2013). This not only leaves Indians lacking some basic capabilities, to use Sen's theoretical intervention, but has also reduced the rate of India's economic growth below its potential level. Drèze and Sen marshal some powerful statistical evidence to show that, compared even with Bangladesh, which was once synonymous with incorrigible poverty, India's social development indicators are lagging behind, stating their argument thus:

So which of the two stories – unprecedented success [in economic growth] or extraordinary failure [in the progress of living standards for common people] – is

correct? The answer is both, for they are both valid, and they are entirely compatible with each other. .... Growth, of course, can be very helpful in achieving development, but this requires active public policies to ensure that the fruits of economic growth are widely shared, and also requires – and this is very important – making good use of the public revenue generated by fast economic growth for social services, especially for public health care and public education (Drèze and Sen 2011: 50).

Drèze and Sen (2013: 177) see the health crisis as ‘perhaps the biggest adversity facing India today’. Having described the threat posed by private health insurance, the poor nutrition of Indian children, and the need for improved support for child-care, they describe the example of Tamil Nadu, where – as a result of democratic action – public sector health and education services work much better than in most of the rest of the country, and suggest that it offers some ways out of this crisis.

Missing, however, is any sense of what makes this situation ‘critical’. Their comparisons – with other countries, or within India, with Tamil Nadu – provide no reason why most of India could not continue along the same line. Drèze and Sen depend upon the power of rational argument in response to a ‘crisis’ as the spur to action. They are unwilling to engage with mainstream politics, preferring to talk about ‘expanded collective action’ (Drèze and Sen 2013: 179). But as their own work makes clear, the current patterns of public expenditures and market failures are underpinned by powerful malign forces. ‘Making good use of the public revenue’ is a euphemism for ‘overcoming corruption’.

The discourse on corruption is an area that Gupta has also addressed very productively (Gupta 1995), and this provides an arena for more direct comparison of the arguments that the two books put forward. Gupta describes a pervasive discourse of ‘corruption’. He sets out in detail how villagers in Uttar Pradesh (UP) assume that corruption lies behind almost every public decision, and this perspective is encouraged by newspaper and other media reports (Gupta 2012: 75-138). For Gupta, accepting this discourse of corruption at face value does not get us very far: one still needs to understand why practices seen as corrupt emerge and are reproduced, by people who often bemoan their inability to behave otherwise (Gupta 2012: 263). By contrast, Drèze and Sen accept such a discourse of corruption throughout the book, addressing it particularly in Chapter 4, ‘Accountability and Corruption’. Despite their nod in the direction of Adam Smith’s *Theory of Moral Sentiments* (cited, Drèze and Sen 2013: 104) on the social supports for ‘illicit financial extraction’ they retain a sense of the solution to corruption being an individual issue: ‘morally upright people’ have to be encouraged not to give or demand bribes (Drèze and Sen 2013: 98). Although a variety of social, institutional and political reforms are suggested as ways to create a virtuous circle in which corrupt practices become unacceptable, Drèze and Sen do not really address the extent to which – in upper- and lower-level official circles alike – ‘black’ money is an alternative economy. The person asking for bribes is often enmeshed in a chain of financial transfers: s/he (usually, he) has probably had to hand over a bribe in order

to get or retain their position. S/he often has a continuing obligation to pass money up the system – eventually, such funds may reach politicians and Ministers in the ruling party. Not asking for a bribe may be tantamount to offering oneself up for harassment, demotion, suspension or transfer by disaffected superiors and colleagues. Robert Wade’s description of these processes within the irrigation bureaucracy in the 1970s has rarely been equalled, and – in very general terms, with allowance made for differences in Department, State, etc. – there is reason to believe that such processes continue much unchanged today (Wade 1982). Angus Deaton – who has worked for many years with the World Bank and views Amartya Sen as a formative influence – in his Whig account of how better health has spread across the globe, sees the causes of corruption within the country:

‘without an educated population and without government capacity – an effective administrative structure, cadres of educated bureaucrats, a statistical system, and a well-defined and enforced legal framework – it is difficult or impossible for countries to provide a proper health-care system’ (Deaton 2013: 125).

Otherwise governments use revenues – from natural resources or from external aid – ‘to maintain a system of cronies and patronage that has little interest in popular health or well-being’ (Deaton 2013: 121). But, like many other external commentators, Deaton says too little about the extent to which outsiders – often those offering the bribes – are implicated in reproducing these patterns.

On the other hand, Gupta seems to be too willing to regard corruption as discourse, institutionalized, and reproduced, without acknowledging the possibility that it can be real, massive and changing in scale and form. For example, the largest corruption scandals in the health sector are estimated to have cost the National Rural Health Mission in Uttar Pradesh between 2005 and 2010 huge sums of money, leading to arrests of senior officials and the deaths of several more. In other parts of the health system, corruption is also manifest, with a deeply corrupt President of the Medical Council of India, said to be close to many politicians, including Narendra Modi, set to return to power despite several court cases against him for approving new medical colleges with manifestly inadequate staffing, bed strength and laboratory facilities. Such a list could be extended almost endlessly.

What is to be done? While the economists offer advice on a whole range of issues, Gupta remains comparatively silent. Predictably enough, Bhagwati and Panagariya call for increased openness to the world economy, and to ‘broaden and intensify’ reform, ‘to induce greater growth and still greater impact on poverty’ (Bhagwati & Panagariya, 2013: 202). Cash transfers rather than guaranteed food security, funding but not attempting to provide universal health care, and ensuring the access of children to ‘decent private elementary education’ (p. 196) are three of the welfare measures they promote. But these ideas are combined with proposals to limit or remove the power of the state to ensure standards, whether in medical colleges or in schools.

Drèze and Sen accept that some aspects of the economic reform process has been valuable, but see a continuing push into widening the welfare state as an essential element in the next step. For them, what is needed is for the media to generate more interest in health and education issues, or 'much greater public engagement with the central demands of justice' (Drèze and Sen 2012: 55). Media interest, they suggest, will help to overcome the acknowledged weaknesses of the public sector provisions. But this solution seems deeply unconvincing. Gone are the days when a small number of media outlets could be said to dominate national debate. Drèze's own activism is displayed in classic cases of top-down reforms, such as the National Rural Employment Guarantee Act, and the National Food Security Act. Marshalling committed and highly intelligent activists, he and his colleagues have learned to steer the mechanisms of the Indian state to pass reformist legislation, and then to use the courts and civil society institutions to ensure that some at least of its goals are achieved. But other aspects of the Indian welfare state – the health sector, and to a lesser extent, the education sector – are much more difficult to reform. Even if there is democratic debate, it will be hard to implement changes that threaten the interests of the corporate hospital chains, the private health insurance companies, the international interests that lie behind making health services in India conform to similar standards as those in the Global North, or the nexus of local interests best served by large contracts for buildings and supplies rather than in changing how front-line workers go about their business. For all the high-tension disputes among economists about these issues, their failure to engage seriously with the quotidian realities of the nascent (or dying) Indian welfare state show clearly why Gupta's analysis is so important and necessary – even if, once we recognise 'structural violence', we know so little about what to do next.

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