In this paper, I examine the inequality of opportunity in adult health in China and India, drawing from Dworkin and Roemer’s distinction of inequality due to circumstances beyond one's control and efforts for which the person should be responsible. Understanding the inequalities that are beyond individual control has important implications in designing welfare policies in resource scarce countries with a growing aging population. I use different measures of inequalities highlighting different assumptions about the relation between circumstances and efforts as well as different definitions of circumstances.

Using the data from Wave 1 of the WHO Study on Global AGEing and adult health (SAGE) survey, I find that early childhood nutritional and disease environment, and parental education, especially father’s education, plays an important role in health inequity in later life in both countries. The more conservative estimate from this study indicates that approximately 21 percent of the inequality in health can be explained by childhood circumstances in China, which is similar to the proportion of inequality explained by efforts (23 percent). In India, circumstances explain only 15 percent of inequality while efforts explain almost double that (28 percent). This is unexpected since Chinese policies of abolishing property rights and relatively better provision of nutritional and health access would have implied a different pattern in comparison to India.

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ABOUT THE SPEAKER
Dhiman Das did his Ph.D. in Economics in 2008 at the City University of New York. He also has an MPhil in Economics from Jawaharlal Nehru University in India. His main research interests are in Health, Education, Poverty and Public Policy. He was earlier employed as a Research Associate with the Hunter College, New York; Robert Wood Johnson Medical School, New Jersey and more recently as a Research Fellow with the Asia Research Institute, National University of Singapore.

DATE Wednesday, 15 February 2017
TIME 3.00pm to 4.30pm
VENUE AS8 ARI Seminar Room, #04-04, Singapore 119260