Social Security in India

by Wilbur J. Cohen*

India achieved its independence only 6 years ago. In these 6 years the Indian Government has faced many financial and economic problems, but it has put as one of the first measures in its program of domestic reforms and improvements the establishment of a social security program. The provisions for this program are outlined in the following pages.

THE first major social security program in southeast Asia came into operation in India on February 24, 1952. The program, which was initiated on a limited basis, will cover about 2.5 million factory employees when it comes into operation throughout the major industrial centers by January 1955. The Employees' State Insurance Act, which established the program, provides for medical services, continuing cash benefits due to employment injury or death, cash sickness benefits during periods of wage loss, and cash maternity benefits.

In addition, legislation providing for a separate system of old-age and survivors savings benefits was enacted in 1952. This program, initiated by the Employees' Provident Funds Act, provides for the establishment on a compulsory basis of company (savings) plans in certain industries. It applies to about 1.6 million employees.

India, the second most populous country in the world and the eighth most important industrial nation, thus becomes another of the major countries to put into operation a social security system. Although the coverage of the system is limited, protection is afforded against a number of risks.

Employees' State Insurance Act

The Employees' State Insurance Act, enacted in April 1948, was one of the first major pieces of social welfare legislation to be enacted after the partition of British India. The problem of social security had attracted the attention of the Government of India as early as 1927, in connection with the ratification of the draft Convention on social insurance passed at the tenth session of the International Labor Conference, in that year. In 1931 a Royal Commission on Labor recommended the introduction of a sickness insurance program. In 1943 a social insurance expert was appointed to study the question and draft a report on sickness insurance for industrial workers in India. The report, submitted in 1944, outlined a program of this type for industrial workers. After the Government had fully considered the views of employers, employees, and the State governments and the technical suggestions of the International Labor Office, the Minister for Labor introduced a bill in the Central Legislature in 1946 that was passed as the Employees' State Insurance Act, 1948.

Two earlier measures providing some social security to industrial workers already existed in India. These were the Workmen's Compensation Act of 1923 and the various State maternity benefit acts.

Experience showed that both measures left much to be desired. Lump-sum payments under the Workmen's Compensation Act were not satisfactory, since such payments are usually spent by the workers as soon as they are received and the disabled workers are left without continuing income. The various State maternity benefit acts were neither uniform nor universal, and, since each employer bore directly the cost of such benefits, employers often dismissed a woman worker on the first indication of pregnancy. These and other defects in the administration of the earlier laws were remedied in part when the 1948 legislation was enacted.

After the passage of the Employees' State Insurance Act in 1948, a plan for its progressive application to various regions in the country was drawn up by the Employees' State Insurance Corporation, the agency that had been set up to administer the program. As the problem was new to the country and involved setting up a new technical organization, the Corporation did not think it possible to implement the program throughout the country simultaneously. According to the plan, it was proposed to implement the program first in Kanpur and Delhi by July 1950 and then to extend it by several successive steps until, in 1955, it would be effective in all the major industrial centers.

The Employers' Association of Northern India (Kanpur) raised certain objections, however, to this piecemeal application of the law. It pointed out that if the law were implemented in only a few regions, without its simultaneous application in other areas, it would place the industry in those regions at a competitive financial disadvantage. The Government gave consideration to these objections, and an amendment to meet them was passed in October 1951. Under the 1951 amendment all employers covered by the law throughout India will pay contributions during the transitional period (1952–54), even though benefits are not yet available to their employees.

Scope of the Law

The Act applies initially to all factories, other than seasonal factories, run with power and employing 20 or more persons. All employees receiving a salary not exceeding 400 rupees a month are covered. The Act also makes provision for the program's extension, either entirely or in part, to any establishment or class of es-

* Technical Adviser to the Commissioner for Social Security. Material in this article was obtained by the author while he was in India in December 1952. Mr. Cohen visited the offices of the Employees' State Insurance Corporation as well as some local offices and a regional office.

tablishments to include other workers, including agricultural workers.

The Act also provides that medical benefits may be extended to the families of insured employees. This question is being studied at the present time by the Corporation.

It is estimated that 12,000 employers employing 2.5 million persons will be covered by the law when it is in operation in all the major industrial areas in 1955.

Classes of Benefit

The law provides for five classes of benefits — medical benefit, sickness benefit, maternity benefit, disablement benefit, and dependents' benefit. The last two types of benefit are payable only in case of occupational injury or death.

Medical benefit.—Medical services are provided to insured employees for illnesses whether of occupational or nonoccupational origin. Medical care and treatment are furnished to sick, insured persons at State insurance dispensaries established for this purpose by the State government in various industrial areas. In Delhi and Kanpur these dispensaries are manned by full-time medical doctors, who treat insured persons and, if necessary, visit them at their homes. Drugs and medicines are also provided. Arrangements have been made for mobile dispensaries to visit distant places.

A question that is engaging the attention of the Corporation in connection with the medical benefit is whether a panel system, with free choice of doctor, should replace the service system established in Delhi and Kanpur through the State insurance dispensaries. Experience in these States has shown that it is not easy to get suitable buildings for dispensaries. The number of dispensaries that would have to be set up for a service system is very large.

The Director General of the Corporation, C. L. Katial, has stated that the panel system has several distinct advantages in India. For one, it would facilitate the implementation of the program in small towns. Qualified doctors, most of whom have well-equipped clinics of their own, are available in almost every city and small town. It may not be worth while to establish dispensaries in the small population centers; even if a dispensary is established, it may not be convenient and suitable to all insured persons in that area. Moreover, according to the Director General, "the panel system permits every insured person to make free choice of his doctor who may be suitable to and convenient to him, and provision of medical benefit to the families of insured persons in future will be very much [more] convenient and easier through the panel system . . . It is expected that the panel system will be speedy and avoid [the] overcrowding and waiting [customary] in the case of dispensaries. The bulk of the medical profession in this country consists of private practitioners and it is through the panel system that services of these qualified medical practitioners can be harnessed for the benefit of the nation's health. The Corporation has already agreed to adopt the panel system for the State of Bombay and the Punjab Government have also accepted the adoption of panel system in their State."

It is expected that the per capita expenditure on medical care in India will be raised from its present level of less than 1 rupee to about 6 rupees for insured persons.

Sickness benefit. — Cash sickness benefits are payable up to a maximum of 8 weeks (56 days) in any continuous period of 365 days. There is a waiting period of 2 days. The benefit is equivalent to approximately 7/12 of wages, being half of the "average assumed daily wage" in the wage class, but paid for 7 days in the week instead of 6.

Maternity benefit.—A qualified insured woman worker, at the time of her confinement, may receive medical treatment and also be entitled to claim maternity benefit at half her average daily wage or 12 annas a day, whichever is greater. The benefit amount is computed on the same basis as the sickness benefit. The benefit is payable for 12 weeks, of which not more than 6 weeks may precede the expected date of confinement; it is continued, however, only so long as she does not work for remuneration.

Disablement benefit. — When an employee suffers an employment injury in the course of his work, he is entitled to receive medical treatment and also a cash disablement benefit roughly equal to half his wages for the period for which he is certified as unable to attend to work. If the disablement is total and permanent, an amount equal to roughly half the wages will be paid as pension for life. For partial permanent disablement, a proportion of the wages will be paid as life pension.

Dependents' benefit.—In the event of the death of a covered worker as a result of employment injury, a pension roughly equal to half the average wages is available to the widow and children. The widow's pension may not exceed three-tenths of the wage, and each child's may not exceed one-fifth.

Qualifying Conditions for Benefit

The qualifying conditions are the same for disablement and dependent's benefits; these benefits are payable if the employment injury or death is sustained during the course of an individual's employment. The conditions for the other benefits vary.

A person is entitled to medical service during any week for which contributions are payable with respect to him or in which he is qualified to claim sickness benefit or maternity benefit or is in receipt of temporary disablement benefit.

Eligibility for sickness benefit in any 26-week period (known as a benefit period) depends on the contribution record during a previous 26-week contribution period. There is an interval of 13 weeks between the two periods for preparing and processing records and for other administrative procedures. A person's right to cash benefit is contingent on his having paid contributions for at least two-thirds of the weeks of the contribution period during which he is deemed to have been available for employment. Certified sickness, disability, or entitlement to maternity benefit excuses the individual from contributions, but a minimum of 12 weekly contributions must have been actually paid in the contribution period.

Qualifying conditions for maternity benefit are the same as for the sickness benefit, except that there must be at least one contribution during the 35-40 weeks before the week of confinement (or before the week in which the notice of pregnancy is given, whichever is more advantageous to the insured).

Financing

The program is a contributory one, and the Employees' State Insurance Fund consists of contributions from employers and employees and grants, donations, and gifts from the Central and State governments, local authorities, or other sources.

Employees will pay their share of contributions only in the regions where the program is fully implemented and where they will be entitled to the benefits provided under the Act. For this purpose, the employees have been divided into eight wage groups. Workers in the lowest wage group — whose income is less than 1 rupee a day — are not required to contribute anything. A tax of only 2 annas a week is levied on employees in the next wage group and one of 4 annas a week on those whose wages are from 1 rupee, 8 annas, to 2 rupees a day.

Table 1 lists the contribution rates for employees and employers under the Act. The special contribution rate for employers set up by the 1951 amendment for States other than Delhi and Kanpur is to be effective only during the transitional period. When this period is over, the employer contribution rate is to revert to the schedule in the 1948 law, as shown in the table.

The contribution rate for employees approximates 2½ percent of average wages. It will be noted from the table that (except for the two lowest wage classes) the employer contribution is twice that of the employee. Thus, under the original law, the employer contribution would have approximated 5 percent of average wages, making the total contributions of employers and employees about 7½ percent. In addition, the State governments are to meet one-third of the cost of the medical services provided to insured persons. Consequently, the employee contribution is expected to meet less than one-third of the total cost of the benefits provided under the program.

The incidence of the program's cost on employers has been spread over all covered employers throughout the country. In Delhi and Kanpur, where workers are already entitled to various benefits under the Act, employers contribute 1¼ percent of their total wage bill under the law as amended in 1951 instead of the amount of contribution payable by employers under the 1948 law. In other States, employers pay contributions at a special rate of ¾ percent of their total wage bill. Wherever the program is implemented, the employers' responsibilities under the Workmen's Compensation Act and Maternity Benefit Acts, as well as the cost of providing medical care for their employees, will be taken over by the Corporation.

The Central Government will pay two-thirds of the Corporation's administrative expenditures for the first 5 years.

Administration

The administration of the program has been entrusted to an autonomous body — the Employees' State Insurance Corporation — set up by the Central Government with the Minister for Labor as ex-officio Chairman and the Minister for Health as ex-officio Vice-Chairman. The Corporation consists of 38 persons; seven represent the Central Government, 17 represent the State governments, five the employers, five the employees, two the medical profession, and two the Central Legislature. A standing committee of 13 members, who are elected from among the members of the Corporation, acts as the executive committee. A medical benefit council of 29 members has been set up to advise the Corporation on the medical aspects of the program. The chief executive officer of the Corporation is the Director General.

Regional offices have been opened in five industrial centers of India — Bombay, Calcutta, Delhi, Kanpur, and Madras. Under these regional offices, there will be several local offices. Regional Boards are being set up, consisting of representatives of employers and employees and of the State governments concerned.

The Corporation's central office will be mainly concerned with formulation of policy, over-all supervision, and coordination and liaison with the Central and State governments. Regional offices will maintain the records of the insured persons, administer the local offices, and dispose of most of the routine administrative work. Claims from insured persons will be received and the benefits provided at local offices. The medical dispensaries will provide medical treatment to persons insured under the program.

The Act contains provision for setting up employees' insurance courts by State governments to decide disputes and to adjudicate claims. It also provides for the establishment of special tribunals in places where there are no employees' State insurance courts to deal with cases arising out of the payment or recovery of employers' special contributions. The Central Government has already taken up the matter of establishing these tribunals with the State governments concerned.

Table 1.—*Contribution schedule under the Employees' State Insurance Act (1948)*

Wage group [1]	Total		Employee contribution		Employer contribution	
	Rupees [2]	*Annas*	*Rupees* [2]	*Annas*	*Rupees* [2]	*Annas*
Less than Re. 1	0	7	None		0	7
Re. 1, but less than Re. 1½	0	9	0	2	0	7
Re. 1½, but less than Rs. 2	0	12	0	4	0	8
Rs. 2, but less than Rs. 3	1	2	0	6	0	12
Rs. 3, but less than Rs. 4	1	8	0	8	1	0
Rs. 4, but less than Rs. 6	2	1	0	11	1	6
Rs. 6, but less than Rs. 8	2	13	0	15	1	4
Rs. 8, or more	3	12	1	4	2	8

[1] Classified by amount of average daily wage.
[2] A rupee is now the equivalent of about 21 cents in United States money. There are 16 annas to the rupee.

IMPORTANT INSTRUCTIONS—(Contd.)

4. Payment by stamps.—

(i) A contribution stamp of value appropriate for the employee in respect of each week for which contribution is payable must be affixed in the space provided for that week;

(ii) Immediately thereafter, the stamp should be cancelled by writing in ink or by stamping with metallic die thereon the date on which it is affixed and the Employer's Code No.

(iii) Where contribution is not payable for any week, reasons for non-payment must be shown in the space for the week left blank in the card.

5. Expiry of Card.—

It is advisable to prepare a fresh card for affixing contribution stamps for the next period before returning this card on expiry of contribution period to the Regional Office.

6. Contribution Cards to be sent to Regional Office.—

(a) Within 7 days of knowledge of death of insured person.
(b) Within 7 days of receipt of requisition from Regional Office.
(c) Within 15 days of termination of contribution period to which it relates.

Cards to be sent together with return in duplicate in Form—6.

SET. C **Form 2**

EMPLOYEES' STATE INSURANCE CORPORATION

CONTRIBUTION CARD

(Regulation 13)

Department			Dis. No if any allotted by the employer
Ins. No. sex			Employer's C.N
Name			
Father's Husband's Name			
Shift if any			Occupation

SPECIMEN

WARNING.—Any person who removes a stamp from this card or makes use of a stamp removed from a card is liable to prosecution.

IMPORTANT INSTRUCTIONS

1. Contributions are payable in respect of every employee as defined in the Employees' State Insurance Act, 1948
2. A week shall be the unit in respect of which contributions shall be payable. Week means a period of 7 days commencing at midnight on Saturday night
3. **Time of payment of contribution.**—Contribution shall be paid :
(a) Within 10 days of the last date of the wage period in which the contribution falls due.
(b) Within 14 days of the termination of employment.
(c) Within 15 days after the termination of the contribution period, whichever period is earlier.

NOTE.
(a) Contributions payable in respect of each week shall ordinarily fall due on the last day of the week.
(b) Where an employee is employed for part of the week or employed by two or more employers successively in any week contribution falls due as laid down in regulations 36 and 37 of E. S. I. (General) Regulations.

(Contd. on back page)

1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25

26	**Notice to Employer.**—Each stamp should be affixed and the date of affixing it and employer's Code No. at once stamped with metallic die or written in ink across the face of the stamp and no other mark or perforation should be made thereon.

Summary of stamps affixed or contribution paid

Group	Value of each stamp	Number of stamps	Total value of stamps (2) × (3)	Assumed average wage for the group	Total assumed wage (3) × (5)
(1)	(2)	(3)	(4)	(5)	(6)*
1	0— 7—0			0—14—0	
2	0— 0—0			1— 4—0	
3	0—12—0			1—12—0	
4	1— 2—0			2— 8—0	
5	1— 8—0			3— 8—0	
6	2— 1—0			5— 0—0	
7	2—13—0			7— 0—0	
8	3—12—0			10— 0—0	
	Total..				

*Not to be entered by employer.

Checked and found correct.

Signature of employer or his assistant.

(Regional Office)

Under the Act, the contributions received from employers, employees, and government cannot be utilized for any purpose other than the administration of the program and the granting of benefits under the Act to insured persons. An actuarial valuation at intervals of 5 years is compulsory.

The Act provides that, whenever funds permit, the Corporation may increase the benefits or extend the period for which a benefit is paid, or provide part or all of the cost of medical care for the dependents of insured persons.

Collection of Contributions

Contributions are collected by means of the stamp system. The stamps are pasted in a "contribution card" (chart 1), which consists of four pages. Each contribution card has space for 26 stamps. The employer is required to affix, in the proper space in the card, a contribution stamp for each week. Immediately after the stamp has been affixed on the card, the employer is required to cancel the stamp with the date on which the stamp was affixed and the employer's registration number. Stamps are purchased by employers from the Imperial Bank of India. The employer keeps a record of the stamps purchased, used, and on hand on a form prepared for this purpose.

The employer sends the contribution cards to the appropriate regional office of the Corporation within 15 days of the termination of the 6-month period for which it is valid, along with a list giving the name of each insured person, his insurance number, and the number and value of the contributions shown on the card.

It is the employer's responsibility to prepare the initial and subsequent contribution cards. The employer retains the card during the period the worker is employed by him. The insured person may inspect the card not more than once a month.

The contribution cards are printed in three separate colors. These correspond to the three different contribution and benefit periods that are designed to stagger the workload for processing the cards in the regional offices.

Registration of Employees

The employer must have each employee furnish him the information required by the Corporation on a declaration form. The necessary information covers sex, caste, marital status, father's name (and husband's name for a married woman), age, year of birth, address, the dispensary the individual wishes to select, and a photograph.

The appropriate regional office prepares an identity card for each person and assigns the individual an insurance number. The regional office sends the identity cards to the employer, who distributes them and obtains a receipt from the employee when the card is delivered. The identity card must be shown when the insured person is obtaining a medical certificate, medical service, or a cash benefit.

Employees' Provident Funds Act

The Employees' Provident Funds Act, enacted on March 4, 1952, lays down revised provisions replacing those contained in an earlier ordinance promulgated in 1951.

The Act is intended to provide lump-sum benefits to the industrial worker when he retires or to his dependents in case of his death. The program is a form of compulsory saving on a company basis. During the course of the consideration of the legislation, the Government indicated it would have been preferable to provide an old-age and survivors insurance system similar to those in the major industrial countries, but it was not felt that this was possible in India under prevailing conditions. Since a statutory provident fund on a contributory basis had been in existence for about 5 years for approximately 300,000 coal-mine workers, the Government decided to extend this type of program to other industries.

As it stands at present, the Act extends to the whole of India, and applies to about 1.6 million workers, or about three-fourths of all factory employees except those in Government factories.

Payment of contributions began on November 1, 1952. The law provides that the employee and the employer each contribute $6\frac{1}{4}$ percent on the basic pay, plus "dearness" allowance. This allowance is paid by many employers as a substantial supplement to the basic wage and varies in amount with the cost of living. The law provides that, at the option of the worker, he may contribute up to $8\frac{1}{3}$ percent.

For all members of the funds, individual accounts are to be opened; the contribution payments, together with interest assignments, are to be credited to these accounts. The members may normally withdraw the full amount standing to their credit on retirement at age of superannuation, on retirement due to total disability, on migration from India for permanent settlement abroad, and on absence for at least 1 year from employment subject to the Act. Provision is also made for withdrawals for the purpose of paying life insurance premiums. The person or persons who are to receive the amounts standing to the member's credit in case of premature death are to be designated at the outset by the member.

Responsibility for operation of the funds is to be vested in a Central Board of Trustees; the Central Government may, in consultation with a State government, constitute for any State a Board of Trustees that would then be responsible for all operations under the Act in that State. Until such time as a State Board is constituted the Central Board may set up a Regional Committee for the State. The appropriate Central or State government is to appoint a Commissioner and a Secretary for each Board or Regional Committee, and provision is made for the employment of staff as required.

Provident funds already in existence on November 15, 1951 (the date on which the earlier relevant ordinance was promulgated), are absorbed into the funds established under the Act, unless exemption is obtained. The appropriate government is empowered under the Act to

(Continued on page 22)

Table 5.—*Old-age and survivors insurance: Monthly benefits in current-payment status[1] at the end of the month, by type of benefit and by month, February 1952–February 1953, and monthly benefits awarded, February 1953*

[Amounts in thousands; data corrected to March 25, 1953]

Item	Total		Old-age		Wife's or husband's		Child's		Widow's or widower's		Mother's		Parent's	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Monthly benefits in current-payment status at end of month:														
1952														
February	4,475,765	$158,172.1	2,328,336	$98,103.7	658,921	$14,979.6	864,477	$23,198.4	397,107	$14,299.5	207,167	$6,866.3	19,757	$724.6
March	4,512,138	159,331.8	2,344,684	98,710.1	662,799	15,060.8	873,117	23,422.1	403,210	14,514.8	208,365	6,892.2	19,963	731.8
April	4,548,652	160,445.4	2,359,213	99,216.6	665,482	15,111.4	883,331	23,677.7	409,752	14,744.8	210,694	6,955.8	20,180	739.1
May	4,574,664	161,229.1	2,367,710	99,502.9	667,450	15,153.5	890,935	23,868.5	415,790	14,954.3	212,379	7,003.1	20,400	746.8
June	4,593,801	161,739.4	2,372,308	99,591.5	668,297	15,169.6	896,820	24,008.9	421,730	15,161.8	214,030	7,053.2	20,616	754.5
July	4,608,494	162,296.8	2,381,641	100,002.1	670,772	15,235.4	895,775	23,955.5	425,253	15,282.2	214,335	7,063.6	20,718	757.9
August[2]	4,679,986	166,015.0	2,431,796	103,000.3	683,705	15,698.9	897,880	23,983.7	430,105	15,452.4	215,650	7,117.6	20,850	762.1
September	4,787,213	193,725.0	2,503,816	122,167.7	700,654	18,024.0	906,580	26,938.0	436,227	17,733.9	218,945	7,995.8	20,991	865.5
October	4,880,239	198,295.1	2,557,399	125,343.9	715,885	18,509.5	920,307	27,460.3	442,786	18,003.1	222,681	8,104.5	21,181	873.8
November	4,942,409	201,234.4	2,594,371	127,438.9	725,389	18,803.4	927,268	27,738.9	448,053	18,218.1	226,042	8,156.2	21,286	878.9
December	5,025,549	205,179.0	2,643,932	130,217.4	737,859	19,178.4	938,751	28,141.3	454,563	18,482.2	228,984	8,272.7	21,460	887.0
1953														
January	5,108,422	209,293.8	2,691,729	133,086.5	750,436	19,581.4	950,134	28,564.3	461,884	18,785.7	232,627	8,382.3	21,612	893.7
February	5,204,176	214,435.9	2,753,071	136,928.1	767,100	20,147.2	959,552	28,928.6	468,130	19,045.8	234,596	8,487.1	21,727	899.1
Monthly benefits awarded in February 1953	124,891	6,059.2	72,158	4,266.4	22,980	699.5	15,760	499.7	8,295	342.1	5,415	239.1	283	12.5

[1] Benefit in current-payment status is subject to no deduction or only to deduction of fixed amount that is less than the current month's benefit.

[2] Partly estimated.

SOCIAL SECURITY IN INDIA

(Continued from page 15)

exempt any factory if the rules of its own provident fund provide benefits not less favorable to its employees than the benefits obtainable under the Act.

Conclusion

The Government of India has given high priority to a program of social security for its millions of workers. The program recently adopted is limited in scope — both in the protection afforded and in coverage — a fact recognized by the Director General of the Employees' State Insurance Corporation. A beginning had to be made somewhere, he has pointed out, and he has expressed confidence that as the system gains experience and as the national income increases, "the scope as well as benefits provided under this measure will be enhanced and it will not be long when other risks such as unemployment, old age, death, etc., will also be covered."

India is the most populous country in the world with a democratic form of government and ranks second among the industrial nations of Asia. The adoption there of a social security program is an important development. The new nation faced and still faces numerous problems. Illiteracy is widespread; the literacy rate, although it is steadily improving, is now about 20 percent. The population is increasing at the rate of about 5 million a year, and by conservative estimates it is probable that the population will exceed 400 million by 1960. India finds it necessary to import about 3 million tons of food grains to supplement the 45–50 million tons produced domestically. These problems, and the programs designed to meet them, have been outlined by the Government of India in *The First Five Year Plan,* published in December 1952.

The Director General of India's social security program looks forward to the time when "not only industrial workers but everyone in this country will be protected against the social risks to which a man is ordinarily exposed in his life."

Bibliography

B. P. Adarkar, *Report on Health Insurance for Industrial Workers,* Simla, Government of India Press, 1944.

A. N. Agarwala, *Social Insurance Planning in India,* Allahabad, East End Publishers, 1945.

"Employees' Provident Fund Scheme," *Indian Labour Gazette,* April 1952, pp. 855–856.

Employees' State Insurance (General) Regulations, Government of India Press, 1950.

Manchar R. Idgunji, *Social Insurance and India,* Bombay, Thacker & Co., Ltd., 1948.

Lloyd Jones, "The State and Social Service with Special Reference to Health and Allied Services," *Indian Journal of Social Work,* March 1948, pp. 290–295.

C. L. Katial, "Social Security in India," *India in 1951,* India Information Services, 1952.

C. L. Katial, "State Health Insurance for Industrial Workers," *Amrita Bazar Patrika,* July 22, 1952.

C. L. Katial, "State Insurance Scheme," *Indian Labour Gazette,* April 1952, pp. 817–822.

Harsimran Malik, "India's Program for Health and Welfare," *Canadian Welfare,* Dec. 1, 1948, pp. 2–9.

"New Legislation Establishing Employees' Provident Funds in India," *Ministry of Labour Gazette* (H. M. Stationery Office), January 1953, pp. 12–13.

Report of the Health Survey and Development Committee, Calcutta, Government of India Press, 1946 (The Bhore Report), 4 vols.