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Institutions, local agency and allegiance: rural healthcare provision in colonial India

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ABSTRACT

Despite the impact of colonial institutions on development has been widely studied, it has also been largely criticised for missing on the importance of local agency determining socio-economic outcomes in former colonies. In this context, local elite's role channelling the impact of colonial institutions on public goods provision remains mostly an open question. To answer this question, I prepare a novel cross-section database with georeferenced hospitals and dispensaries from 1901 to explore the effect of land revenue systems on healthcare provision in colonial India considering the role of local agency driving this effect. These hospitals and dispensaries were relevant tools as centres of vaccination, sanitary education and contact with western medicine. The date of conquest is used as an instrument for the land revenue systems to identify causality.

This paper contributes to several literatures. First, this paper contributes to the literature pointing at colonial institutions explaining development, which has been widely criticised for missing on the role of local elites. Second, this paper also complements the literature on the determinants of public goods provision, looking at the determinants explaining public healthcare, which have been clearly understudied. Additionally, this paper adds to the literature pointing at colonial healthcare as a significant factor explaining nowadays health outcomes.

Results show that hospitals and dispensaries in districts with landlord based systems received significantly less total revenue and less revenue from local and district boards.



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However, they got significantly more revenue from native private subscriptions. I argue the former was due to less land revenue being collected in landlord districts. This was largely due to the important role of landlords in determining land revenue demands and assessments as well as the fixing of land revenue demand in some landlord areas. In landlord areas, landlords either nominated or directly appointed the village officials responsible for the collection of data to determine land revenue demands. Finally, more native private subscriptions can be explained by the landlords' need to show allegiance to the colonial authorities and increase their prestige. This was specially the case in landlord districts because the 1857 revolt was more acute in such regions, giving landlords further incentives to show their allegiance to the British.

In the end, this paper argues that there were important differences in the (re)resources available to hospitals and dispensaries, which can be partially explained by the introduction of certain land revenue systems and the interaction of these systems with local elites' —landlords— agency.