INTRODUCTION

WHAT MAKES A COUNTRY SUCCESSFUL? The traditional answer is economic growth, measured as GDP per capita. Economic growth is indeed important, because it provides the personal income and governmental resources needed to meet human and societal needs. Economic growth has an important impact on social progress, and numerous studies have found a high correlation between economic growth and a wide variety of social indicators.

There is growing awareness, however, that economic measures alone do not fully capture social progress. Many thoughtful observers have highlighted the limits of economic success as a proxy for wellbeing. The ‘Arab Spring’ of 2011, and the challenges in Mexico over the last decade, are just two examples of the shortcomings of economic growth as a proxy for social progress. Economic development is beneficial, but not sufficient, for social progress. We must measure social progress directly in order to fully assess a country’s success in improving the overall wellbeing.
To advance social progress, then, we must learn to measure it comprehensively and rigorously. Measuring multiple dimensions of social progress is indispensable in understanding its components, benchmarking success, and catalyzing improvement. While there have been some laudable efforts to measure wellbeing, these capture only limited aspects of social progress, and are uneven in breadth and scope across countries.

Systematic measurement of social progress will also be important to understand the full causes of economic advancement. Rather than simply a consequence of economic development, we are learning that social progress is also a key driver of economic development. Education, health, and sense of opportunity, for example, will have a positive impact on long-term productivity growth. Without sophisticated ways of measuring social progress, however, we have lacked the framework and data to understand this relationship empirically. Understanding pressing societal challenges also creates new economic opportunities for business. Lack of measurement has obscured these opportunities to redirect capitalism to tackle societal challenges (what we term Shared Value).

The Social Progress Index is an attempt to address these gaps and those opportunities. It provides a holistic, objective, outcome-based measure of a country’s wellbeing that is independent of economic indicators. It will enable a new level of sophistication in understanding the complex relationship between social progress and economic development. The Index is based on a framework that is inclusive of many aspects of social progress and utilizes the best available data spanning a significant number of countries. The framework is designed to be readily improved and expanded to incorporate new aspects of social progress, as well as improved data.

The Social Progress Index, presented here with results covering an initial sample of 50 countries, is the 'beta' version that will be extended and improved over time. We aim to highlight gaps and catalyze better data as an important goal of the initiative. We welcome feedback on the frameworks, statistical model, and the findings that can be incorporated into annual or biannual updates.

The primary goal of the Social Progress Index is to provide a comprehensive and rigorous tool to benchmark countries and stimulate progress. Social progress depends on the policy choices, investments, and implementation capabilities of multiple stakeholders—government, civil society, and business. By informing and motivating those stakeholders to work together and develop a more holistic approach to development, we are confident that social progress will accelerate.

In the next section we set out the structure of the Social Progress Index model (for a more detailed explanation of the model, see the Methodological Appendix). We then review the initial findings covering our sample of 50 countries. This chapter concludes with our plans to build a Social Progress Network of national partners to take the conversation forward.
CHAPTER 2 / THE SOCIAL PROGRESS INDEX

THE SOCIAL PROGRESS INDEX MODEL

Our model is based on the following definition of social progress:

_Social progress is the capacity of a society to meet the basic human needs of its citizens, establish the building blocks that allow citizens and communities to enhance and sustain the quality of their lives, and create the conditions for all individuals to reach their full potential._

This definition aims to be comprehensive, and encompass the numerous aspects which constitute this overall goal. This overall definition can be disaggregated into three dimensions of social progress, that define the basic architecture of the model:

1 / Does a country provide for its people’s most essential needs?
2 / Are the building blocks in place for individuals and communities to enhance and sustain wellbeing?
3 / Is there opportunity for all individuals to reach their full potential?

Each of these dimensions is disaggregated into components to define the Social Progress Index. In the inaugural Index, each dimension has four components, measured by between two and six specific indicators which capture social outcomes. The basic framework is shown in Figure 1.

_Figure 1 / Structure of the Social Progress Index_

The three dimensions of the Social Progress Index roughly mirror the progression that many individuals, families, communities, and societies go through in achieving higher and higher levels of social progress. Our model draws heavily on previous literature, notably the capability approach pioneered by Amartya Sen, which emphasizes the multidimensional nature of wellbeing and the importance of freedom of choice.
CHAPTER 2 / THE SOCIAL PROGRESS INDEX

The first dimension captures the degree to which the most essential conditions for survival are met. These essential needs must be satisfied to create the minimum standards for further progress. Basic Human Needs are divided into four components:

- Nutrition and basic medical care
- Air, water, and sanitation
- Shelter
- Personal safety

The second dimension of social progress captures the degree to which a country has created the set of policies and institutions to support improving wellbeing and community in a sustainable natural environment. The Foundations of Wellbeing dimension consists of four components:

- Access to basic knowledge
- Access to information and communications
- Health and wellness
- Ecosystem sustainability

The third dimension captures the degree to which all citizens are able to reach their full potential. This rests first on personal rights, freedoms and inclusion, and ultimately on access to advanced education that enables a path to high levels of achievement across all of society’s fields. The Opportunity dimension is divided into the following components:

- Personal rights
- Access to higher education
- Personal freedom and choice
- Equity and inclusion

The Social Progress Index offers a tool to bring together a comprehensive set of social outcome measures in a transparent way. It allows individual countries to identify specific areas of strength or weakness in terms of social progress, as well as to benchmark themselves against peer countries both at the level of individual indicators as well as overall.

The Social Progress Index is based on a clear yet rigorous methodology that allows measurement of each component and each dimension, and yields an overall Index score and ranking. The approach builds on a long line of work in developing country-level globally comparable indices to measure and assess various facets of economic and social performance. As described in further detail in the Methodology Appendix, the Index focuses exclusively on indicators of social outcomes; rather than measuring inputs, the Social Progress Index focuses on what level of social progress has already been achieved within a particular country.

The three different dimensions of the model—Basic Human Needs, Foundations of Wellbeing, and Opportunity—are each weighted equally in the overall index; each of these dimensions is calculated as the sum of four components, each of which is equally weighted. Finally, each component is based on a varying number of individual indicators of social progress within that component. The component scores are calculated using a procedure called principal component factor analysis, which allows one to calculate an aggregate score from multiple indicators related to a common concept.

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(1) For a helpful overview of the full range of issues associated with index construction, see the OECD Handbook on Constructing Composite Indicators (OECD, 2008). We also build on prior efforts in benchmarking across countries, including work on national innovative capacity (Furman, et al, 2002), and recent efforts focused on competitiveness (Porter, 2008; Delgado, et al, 2011).
To be included in the model, each indicator had to meet two criteria:

1 / **INTERNAL VALIDITY:** each indicator was carefully evaluated by the team to ensure that the measurement procedures used were reasonable and captured what the indicator purported to measure.

2 / **GEOGRAPHIC AVAILABILITY:** each indicator was required to have coverage for most, if not all, of the countries in our initial sample. We only included indicators that were measured well, with the same methodology, by the same organization, across all (or essentially all) of the countries in our sample.

**IMPORTANT THINGS TO KEEP IN MIND WHEN INTERPRETING THE DATA**

**DATA TIMELINESS AND TRENDS**

Our measures reflect the most recent data available and in many cases there is no time series data yet available to measure trends. India, for example, still lags behind other middle-income countries in terms of education but is catching up rapidly. Rwanda scores low today on measures of Nutrition and Basic Medical Care, but remarkable recent gains suggest strong improvement in the future. As the Index is to be reported annually, over time trends will be revealed which will yield important lessons about the policies, practices and innovations that make a difference.

We eliminated many measures from consideration because data updates were too infrequent. Nevertheless, all data are not as current as we would like. However, by focusing on measures that rarely change rapidly from year to year, we are confident that the results point us in the right direction. The Social Progress Imperative welcomes updates on indicators as well as comments on any of the measures used (please write to feedback@social-progress.org).

The Social Progress Index model reflects some important methodological advances.

1 / It is based exclusively on non-economic indicators. While aspects of social progress may be influenced indirectly by economic development (by providing society more resources to address social imperatives), the Social Progress Index is distinct from traditional measurement of economic success. We can examine its link with economic success because we do not combine economic and social indicators in the model.

2 / The Index is based exclusively on indicators of social outcomes rather than measures of inputs such as spending or policy choices, which do not truly evaluate social progress but the efforts made to achieve it.

3 / The model is holistic, integrating a large number of indicators into an aggregate score of social progress, instead of focusing on one or a few aspects of social progress.

4 / The Index model groups these multiple social outcomes into dimensions, components, and indicators, allowing empirical investigation of the relationships.

5 / The breadth of indicators create a model relevant for all countries, ranging from very poor nations that have not yet met the essential needs of many citizens to advanced nations enjoying high levels of wellbeing and well functioning communities.
There have been numerous efforts to measure and benchmark social progress, which have made an important contribution in highlighting the importance of non-economic dimensions of country success. We gratefully acknowledge our intellectual debt to those efforts, which we have built upon. The Social Progress Index aims to take the next step, capturing the full dimensions of a healthy society. By focusing directly on social outcomes, putting forward a holistic framework, and clearly separating social from economic progress, we hope to make a contribution that goes beyond previous efforts.

**HUMAN DEVELOPMENT INDEX**

A quarter of a century ago, the Pakistani economist Mahbub ul Haq, influenced by Amartya Sen, led a pioneering effort to develop a more people-centered measure of wellbeing, the Human Development Index (HDI). The HDI has had enormous influence on the global debate about development, and it highlights relative progress of countries in terms of human welfare, especially for countries at a low and medium level of human development. HDI covers a limited part of social progress. It includes just three elements: GDP per capita as a proxy for income, consumption, and productivity; an education factor with two variables, as a proxy of social mobility; and lifespan, as a proxy of other social welfare parameters. The high weighting of GDP in the model means that HDI is heavily reliant on economic rather than social indicators. Many aspects of a healthy society, such as environmental sustainability and personal rights, are not included. The focus on basic education and health measures means that the HDI is most relevant in countries with low or medium human development. Just as the Millennium Development Goals have been a galvanizing force for efforts to support the world’s poorest countries, the HDI is a useful benchmark for such countries. However, it lacks a broader set of measures to guide progress once basic levels of need have been addressed.

**GROSS NATIONAL HAPPINESS**

A provocative effort to measure wellbeing has been the Kingdom of Bhutan’s measurement of Gross National Happiness. The core methodology is to survey citizens on their overall perception of wellbeing. This approach is in the process of being adopted by some other countries, including the United Kingdom. Subjective survey measures of wellbeing have certainly enriched the debate about social progress, but they provide little guidance on what wellbeing actually means in terms of its components, which limits actionability. There is no way to empirically explore causation, since the factors driving the perception of citizens cannot be disaggregated. Nor can results be robustly compared over time and between countries, since subjective perceptions are hard to benchmark and hold consistent.

**YOUR BETTER LIFE INDEX**

The Organization for Economic Co-operation and Development’s Your Better Life Index is a hybrid model incorporating a mixture of economic and social indicators supplemented by subjective measures of citizens’ perception of their own wellbeing. This represents an advance over purely economic variables in capturing wellbeing, particularly for wealthier countries. Yet the Your Better Life measures remain heavily weighted towards economic indicators, with a limited array of social variables. The Your Better Life framework offers less guidance on where and how society should invest to advance social progress overall.
LEGATUM PROSPERITY INDEX

The Legatum Prosperity Index is an eight-pillar framework including economic, social and civil society measures. Two of the eight pillars are explicitly economic, co-mingling economic and social progress, which obscures their co-dependence. The Legatum Index combines both outcomes and input measures. The range of social progress indicators is far narrower than for the Social Progress Index. Social indicators are discrete and not part of a comprehensive framework. The Legatum Index is an advance, in offering a more comprehensive set of factors than the HDI, but we believe the approach can be greatly expanded.

BENCHMARKING COMPETITIVENESS / THE POWER OF MEASUREMENT

The Social Progress Index has been inspired in part by the success of efforts to measure economic competitiveness over the last 20 years. Two efforts are notable. The first is the Global Competitiveness Index (GCI), initially published by the World Economic Forum in 1979. This effort was initially dominated by macroeconomic indicators and employed a relatively simple methodology to assemble data and construct the GCI. Jeffrey Sachs, then at Harvard, took leadership of the effort in 1997, introducing a far more rigorous framework drawing on growth theory. In 1999, Michael Porter of Harvard Business School became a co-chair and introduced microeconomic factors into the effort. Over time, the GCI synthesized macroeconomic and microeconomic variables into a granular but holistic framework.

Xavier Sala-i-Martin led the most recent evolution of the framework into the current 12-pillar model. The framework identifies 12 pillars of competitiveness reflected in the literature, covering 111 individual variables. The GCI ranks countries, separated into three groups: endowment economies, that compete heavily on natural resources and abundant, untrained labor; efficiency economies, that have achieved a level of productivity that allows them to compete in goods manufacturing and services with a relatively well developed business climate; and knowledge and innovation economies, that compete via innovation, design, branding, and marketing.

The GCI is rich and actionable, and has stimulated global discussion and large-scale efforts to improve in many countries. It allows policy-makers and other stakeholders to identify specific opportunities for improvement that will have the most impact on national competitiveness. By separating countries at different stages of economic advancement, it highlights the different challenges they face. By providing an annual ranking of countries, it allows peer comparisons and motivates improvement.

Another highly influential measurement framework in the area of competitiveness is the World Bank Doing Business Index. Doing Business focuses on a distinct subset of the numerous aspects of competitiveness, which is the ease of doing business at the country level. The index consists of granular indicators which are measured using an explicit and transparent methodology. This allows countries to understand the specific steps required to improve their ranking.

As with the GCI, the Doing Business Index has stimulated major competitiveness improvements in many countries. Both illustrate the enormous power of sophisticated measurement to drive improvement in vital areas that constitute country success. These two efforts in the economic sphere have inspired us in seeking to unleash the power of granular and rigorous measurement in the social sphere. We have also learned much from these efforts. The Social Progress Index aims to unleash the same power in driving social progress.
The inaugural Social Progress Index offers a number of striking, if still preliminary, findings about the achievement of social progress across countries, and its relationship to other measures of country performance. These results can be summarized in three overarching findings:

**1 / ECONOMIC DEVELOPMENT IS NECESSARY BUT NOT SUFFICIENT FOR SOCIAL PROGRESS.**

Our starting hypothesis was that economic growth does not fully explain countries' levels of social progress. The data, presented in Figure 2 comparing social progress scores to GDP per capita, clearly supports this hypothesis.

**Figure 2 / Social Progress Index vs. GDP per capita (PPP)**

Figure 2 shows a substantial correlation between social progress and economic development. This is not surprising, given that countries with higher levels of income have greater resources to meet the needs of their populations. However, the data also reveal significant divergences between social progress and economic development across the income spectrum. Economic development does not fully explain social progress.
Although low-income countries are clustered at the bottom end of the Social Progress Index, there is a wide range of levels of social progress at similar levels of income. Ghana has reduced undernourishment to less than 5%, versus 15+% in Bangladesh. This pattern of large variations in performance is repeated for countries with higher levels of income. For example, India has a child mortality rate four times that of China; over 90% of the adult population in Indonesia is literate, compared to slightly more than half in Morocco.

The results for higher income countries show that similar levels of social progress can be achieved over a wide range of income levels. It is possible to achieve a high level of social progress at a relatively modest income level.

These results suggest that economic growth alone is not sufficient to achieve social progress, and that the relationship between economic and social progress is more complex than simple cause and effect. To establish the nature of this relationship will require further analysis, particularly through shifts in countries’ economic and social performance over time.

The relationship between other measures of economic performance and social progress, such as the World Economic Forum’s Global Competitiveness Index, are also revealing (see Figure 3). There is a correlation with social progress, but it is strongest for the most competitive countries. At the middle and lower levels of competitiveness, there is a large amount of variation for social progress.

Figure 3 / Social Progress Index vs. Global Competitiveness Index
The Doing Business Index (Figure 4) shows less correlation with social progress. This may be because improvements to countries’ business environments only show up in higher economic growth over time, or the higher growth due to improving competitiveness based on these factors may have a long lead time in translating to social progress. By rigorously measuring social outcomes, the Social Progress Index will allow us to explore these relationships empirically and over time.

Figure 4 / Social Progress Index vs. Ease of Doing Business Rank
2 / A COUNTRY’S OVERALL LEVEL OF DEVELOPMENT MASKS SOCIAL AND ENVIRONMENTAL STRENGTHS AND CHALLENGES.

The Social Progress Index is designed as a holistic view of a country’s social progress encompassing a wide range of outcomes that matter to people’s lives and are relevant at all income levels. There is, not surprisingly, a strong correlation between Social Progress Index scores and Human Development Index scores. By including life expectancy and educational standards, HDI provides a broader assessment of a country’s level of development than GDP alone. See Figure 5.

**Figure 5 / Social Progress Index vs. Human Development Index**
Yet there are significant differences in social progress among countries with similar HDI, especially for high- and medium-income countries. Among high human development countries, the United Arab Emirates scores dramatically worse on social progress compared to the HDI, largely due to poor performance on environmental indicators. The UAE comes in last on the Ecosystem Sustainability component, with the highest ecological footprint, CO₂ emissions; and energy use in our sample. Israel’s relatively low ranking is due largely to low scores on measures of Equity and Inclusion; as well as the availability of affordable housing, as part of the Shelter component. The United Kingdom and Sweden, by contrast, score highly on both the HDI and Social Progress Index but relatively higher on social progress than HDI, due largely to measures of Opportunity, particularly Personal Rights.

Among medium human development countries, there is wide variation. Mexico’s relatively high score on HDI contrasts with its lower score on the Social Progress Index, because income is excluded and measures of Personal Safety are included. Russia fares poorly due to weaknesses on multiple components including Shelter, Personal Safety, Ecosystem Sustainability and Personal Rights. Costa Rica, with its strong performance on measures of Opportunity and Ecosystem Sustainability, performs much better on the Social Progress Index than the income-weighted HDI.

The correlation of social progress and HDI is strongest at low levels of the HDI. Mozambique is a notable outlier, scoring better on the Social Progress Index than HDI largely because of strong performance in the area of Equity and Inclusion.

At a disaggregated level, the Social Progress Index shows areas of underperformance and success for countries at all income levels.

The Social Progress Index model allows disaggregation to the level of dimensions and components, which reveals a far more complex pattern of country performance than apparent in the overall Index. This is illustrated by Chart 6 that uses a ‘traffic light’ scoring system for component-level scores for the 50 countries ranked in the Social Progress Index.
Chart 6 / Social Progress Index Results
All countries, regardless of income or the aggregate level of social progress, face social and environmental challenges. Sweden, for example, performs relatively poorly on the Shelter component, because of weaknesses in affordable housing; Switzerland in both Access to Basic Knowledge and Access to Higher Education. Nearly all rich countries perform poorly on Ecosystem Sustainability. This is especially true for large countries with abundant natural resources like Canada, the United States and Australia.

Countries at the lower end of the social progress spectrum do not score poorly across all components. Mozambique does well on Equity and Inclusion; Egypt does very well on Air, Water, and Sanitation; and Ghana on Personal Safety.

These findings highlight numerous areas for further research and enquiry to identify obstacles to social progress and lessons from success. Our program of national-level rollout through the Social Progress Network of partners will facilitate this process and share learning between countries.

FINDINGS BY DIMENSION

The Social Progress Index has been designed to enable change by providing specific information about a country’s main development challenges. In this section we examine country performance at the dimension level, highlighting evidence from component and indicator scores. Developing this preliminary analysis further will be a priority for our national-level rollout.

BASIC HUMAN NEEDS

The Basic Human Needs dimension seeks to answer the question, “Does a country provide for its people’s most essential needs?” It examines indicators in the areas of Nutrition and Basic Medical Care; Air, Water, and Sanitation; Shelter; and Personal Safety.

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<th>TOP COUNTRIES</th>
<th>BOTTOM COUNTRIES</th>
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<td>1 Japan</td>
<td>41 India</td>
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CHAPTER 2 / THE SOCIAL PROGRESS INDEX

Basic Human Needs Indicators

**Nutrition and Basic Medical Care**
- Undernourishment
- Depth of food deficit
- Maternal mortality rate
- Stillbirth rate
- Child mortality rate
- Prevalence of tuberculosis

**Air, Water, and Sanitation**
- Indoor air pollution attributable deaths
- Outdoor air pollution attributable deaths
- Access to piped water
- Rural vs. urban access to improved water source
- Access to improved sanitation facilities
- Access to wastewater treatment

**Shelter**
- Availability of affordable housing
- Access to electricity

**Personal Safety**
- Homicide rate
- Level of violent crime
- Perceived criminality
- Political terror

**Figure 7 / Basic Human Needs vs. GDP per capita (PPP)**
On the whole, middle countries in our sample do not score substantially worse than high-income countries on this dimension. This suggests that Nutrition and Basic Medical Care are usually addressed at middle levels of economic development. Two notable exceptions are South Africa, with very high maternal and child mortality, and tuberculosis; and Botswana, with high undernourishment. However, uneven development and inequality mean that poorer regions in many lower-middle income countries still face challenges in the area of Nutrition and Basic Medical Care.

**Figure 8 / Nutrition and Basic Medical Care vs. GDP per capita (PPP)**

While the lower income countries score very low on the Nutrition and Basic Medical Care component on an absolute level (See Figure 8), many countries have shown remarkable improvement over a short time horizon, notably Rwanda (see Box). Nigeria and Vietnam have reduced undernourishment to less than 10 percent.
CHAPTER 2 / THE SOCIAL PROGRESS INDEX

LINKING AN EQUITY PLAN TO A DELIVERY SYSTEM IN RWANDA

DR. AGNES BINAGWAHO AND DR. PAUL FARMER

Rwanda’s position at 46 in the Social Progress Index belies a story of unprecedented progress. Nineteen years ago, the 1994 genocide killed one million Rwandans, including a large proportion of the health workforce. Hospitals and clinics across the country were destroyed, and Rwanda’s child mortality rate skyrocketed to the highest level in the world. Refugee camps were beset by cholera epidemics, and nationwide incidence of HIV, tuberculosis, and malaria spiked. Rwanda was in danger of becoming a failed state. Today, however, Rwanda is the only country in sub-Saharan Africa on track to meet each of the health-related Millennium Development Goals by 2015.

For example, by June 2012, more than 100,000 people with advanced HIV disease in Rwanda were receiving antiretroviral therapy, making Rwanda one of only two countries in sub-Saharan Africa to achieve the United Nations goal of universal access to antiretroviral therapy by the 2010 target. Rwanda’s HIV prevalence has remained at about 3% since 2005, and mortality associated with HIV disease dropped by 78.4% since 2000. More than 93% of Rwandan infants are inoculated against 11 vaccine-preventable diseases, up from rates below 25% for just five diseases in the mid-1990s. Over the past decade, maternal and child mortality decreased by 60.0% and 70.4%, respectively.

As two colleagues who have worked together as part of a large team aiming to build an equitable, high quality, value-driven health system in Rwanda, we believe that these successes are causally linked to the central government’s pursuit of a strategy prioritizing the needs of the poorest and most vulnerable. In practice, this has meant the design of a rurally focused health system (81.2% of the population live in rural areas) and the introduction of universal health coverage through a community-based health insurance scheme that covers more than 91% of the population (while another 7% are covered by civil servant or private plans). It has also meant integration of services—for a mother seeking to prevent transmission of HIV to her unborn child will also require a safe place to give birth, and a father with diabetes will also need to be screened and treated for tuberculosis. Rwanda still faces one of the greatest shortages of human resources for health in the world, but is addressing this shortage through innovative models of delivering care. A cadre of 45,000 community health workers has been trained to diagnose and provide empirical treatment for malaria, pneumonia, and diarrhoeal disease, dramatically extending the reach of the health system.

Translating an ambitious vision into improved health outcomes among the poorest will continue to require strong and flexible partnerships—some of which have arisen in the most unpredictable and serendipitous of ways. For instance, we had the privilege of joining leaders from the Rwandan government, former US President Bill Clinton, many health workers from partner institutions in Rwanda and the US, and NASCAR driver Jeff Gordon last July to open Rwanda’s first comprehensive cancer center. It sits near the Ugandan border, on top of a hill that had been the site of an army base during the country’s civil war. Why build a cancer hospital in one of Rwanda’s most rural districts? As morbidity and mortality from infectious diseases continues to decline, other diseases of poverty—from cervical and breast cancer to rheumatic heart disease and chronic obstructive pulmonary disease—are rising in their relative contributions to the burden of disease.

Until early 2013, Rwanda had zero oncologists (but plenty of cancer) and just one pediatric cardiologist working in the public sector (but plenty of children in need of cardiac care). By partnering with the US government, the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and more than a dozen American universities, Rwanda has embarked on a seven-year initiative to train physicians and nurses in a broad range of priority specialty areas. Not one extra dollar of funding was required to launch this Human Resources for Health Program, as existing grants were reallocated from HIV-related activities that
Rwandans could now manage at low cost after years of training from their American colleagues. This and other investments in the fundamental building blocks of a sustainable health system will improve the quality and coordination of care, paying social and financial dividends for decades to come.

In the aptly named “land of a thousand hills,” we still have many yet to climb. But by teaming up with partners old and new, we believe that the vision of health for all lies within reach—for Rwanda, for the region, and for the world—if we learn from this country’s hard-won recent gains and hold ourselves accountable to higher expectations in global health.

Most middle-income countries provide broad access to piped water and sanitation and therefore score relatively close to high-income countries. In Costa Rica and Egypt, access to piped water and access to improved sanitation are both above 95%. Access to piped water is still low in China and Botswana, though both countries have made considerable progress over the last decade. Outdoor air pollution and access to wastewater treatment remain challenges for many middle-income countries.

The availability of affordable housing is a problem throughout the world, regardless of a country’s income level. Interestingly, the Shelter component has the least correlation with GDP per capita. Thailand, Vietnam, and the Philippines score noticeably high, while Spain and Israel score low relative to other countries in their income group.

Although Personal Safety is best in high-income countries, it is, paradoxically, worst in middle-income countries rather than poor countries: at the bottom of the ranking for this component are Nigeria, Colombia, Mexico, South Africa, and Brazil. Personal Safety is by a large margin the lowest scoring component in the Social Progress Index for Brazil, Colombia, Dominican Republic, Mexico, and South Africa.
The Foundations of Wellbeing dimension seeks to answer the question, “Are the building blocks in place for individuals and communities to enhance and sustain wellbeing?” This dimension includes four components: Access to Basic Knowledge; Access to Information and Communications; Health and Wellness; and Ecosystem Sustainability.

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### Foundations of Wellbeing Indicators

#### Access to Basic Knowledge
- Adult literacy rate
- Primary school enrollment
- Secondary school enrollment
- Women’s mean years in school

#### Access to Information and Communications
- Mobile telephone subscriptions
- Internet users
- Fixed broadband subscriptions
- Press Freedom Index

#### Health and Wellness
- Life expectancy
- Obesity
- Cancer death rate
- Deaths from cardiovascular disease and diabetes
- Deaths from HIV
- Availability of quality healthcare

#### Ecosystem Sustainability
- Ecological Footprint of Consumption
- CO₂ emissions per capita
- Energy use per $1,000 GDP
- Water withdrawals per capita
In the area of universal primary education, the world may not reach the Millennium Development Goal by 2015, but great strides have been made. Lower- and middle-income countries perform well, particularly Georgia, Jordan, and Sri Lanka. Two-thirds of the countries in our sample have primary enrollment rates above 90%. Only Ghana, Kenya, Nigeria, Paraguay, and Senegal have primary enrollment below 85%. Women’s education is the highest in Canada and South Korea and improving greatly in Kenya, Turkey and Egypt.

Enrollment indicators measure amount of schooling, rather than the quality of education or attainment of knowledge. Comparable evaluation of educational achievement is currently conducted for too small a subset of the countries in our Index to be included so far in the Access to Basic Knowledge component. The OECD’s Programme for International Student Assessment (PISA) administers assessments of the competencies of 15-year-old students in the areas of reading, mathematics, and science. Scores are available for 27 of the 50 countries in the Social Progress Index. For these countries, there is a correlation to the Access to Basic Knowledge component that is based on enrollment indicators (see Figure 10). This provides reassurance that enrollment data is valid as the basis of this component but that it would be strengthened further if internationally comparable data on learning outcomes, such as PISA, were available for all countries covered by the Social Progress Index.
Access to Information and Communications is the Social Progress Index component most highly correlated to GDP per capita, partly because of the monetary cost of gaining access. As the cost of technology declines and efforts to produce low-cost computers and smart phones increase, however, low- and middle-income countries are expected to show strong improvement.

Internet access in lower-income countries is limited to a small fraction of the population, often under a tenth. Access is broader in countries like Kenya, Nigeria, Vietnam, and the Philippines, where well over a quarter of the population uses the internet. These countries have also seen faster than average growth in the number of internet users in the past five years. In Morocco, more than half the population uses the internet. Botswana ranks in the bottom five of our countries for internet use, but in the top five for mobile phone subscriptions.

Scores on the Health and Wellness component vary widely, and show no correlation to spending on health as a percent of GDP for the 16 OECD countries in our Index (see Figure 11). Countries that spend the most on healthcare today are not seeing better performance.
Obesity is a problem across all income categories. More than a third of the population is obese in the United States and the United Arab Emirates, but also in Egypt, Jordan, South Africa and Mexico. In Georgia and Paraguay, a fifth of the population is obese while at the same time a quarter of the population is undernourished. Obesity rates are below 20% in Switzerland, France and Sweden. Obesity is rare in Japan and South Korea, however, with rates well below 10%.

Ecosystem Sustainability is negatively correlated to GDP per capita, with richer countries having worse scores. Countries rich in natural resources are more likely to be at the bottom of the ranking: United Arab Emirates, Kazakhstan, United States, Canada, Australia, and Russia.
CHAPTER 2 / THE SOCIAL PROGRESS INDEX

OPPORTUNITY

The Opportunity dimension comprises four components seeking to answer the question, “Is there opportunity for all individuals to reach their full potential?” The four components are Personal Rights; Access to Higher Education; Personal Freedom and Choice; and Equity and Inclusion.

<table>
<thead>
<tr>
<th>TOP COUNTRIES</th>
<th>BOTTOM COUNTRIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 United States</td>
<td>41 Senegal</td>
</tr>
<tr>
<td>2 Sweden</td>
<td>42 Sri Lanka</td>
</tr>
<tr>
<td>3 Australia</td>
<td>43 Kenya</td>
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<tr>
<td>4 Canada</td>
<td>44 Rwanda</td>
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<tr>
<td>5 United Kingdom</td>
<td>45 India</td>
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<tr>
<td>6 Spain</td>
<td>46 Uganda</td>
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<tr>
<td>7 Switzerland</td>
<td>47 Bangladesh</td>
</tr>
<tr>
<td>8 Costa Rica</td>
<td>48 Nigeria</td>
</tr>
<tr>
<td>9 Argentina</td>
<td>49 Egypt, Arab Rep.</td>
</tr>
<tr>
<td>10 Germany</td>
<td>50 Ethiopia</td>
</tr>
</tbody>
</table>

Opportunity Indicators

Personal Rights
- Political rights
- Freedom of speech
- Freedom of assembly/association
- Private property rights
- Women’s property rights

Access to Higher Education
- Tertiary school enrollment
- Female tertiary school enrollment

Personal Freedom and Choice
- Basic religious freedoms
- Contraceptive prevalence rate
- Access to childcare
- Freedom over life choices

Equity and Inclusion
- Equity of opportunity for ethnic minorities
- Women treated with respect
- Community safety net
- Tolerance of immigrants
- Tolerance for homosexuals
There is more variation among middle-income countries in the Opportunity dimension than among low- or high-income countries, with Costa Rica, Argentina, Brazil and Chile all achieving scores comparable to countries with much higher incomes such as Japan, Germany and France. Indeed, Costa Rica ranks very high in this dimension at 8th, right behind Switzerland. However, component-level analysis highlights challenges even for countries that are doing well on Opportunity, such as weak property rights in Argentina. Significant underperformers in the middle-income group include Turkey and Egypt.

Lower-income countries show broadly lower scores on Opportunity than richer countries but there are strong performances at the component level in the areas of Personal Rights, Choice and Personal Freedom, and Equity and Inclusion that, for example, cause Mozambique to score high on this dimension relative to income. Poorer countries also tend to do least well on the Access to Higher Education component, which is more linked to GDP.

Among high-income countries, the United Arab Emirates has the lowest Opportunity ranking, 30th out of 50. This is largely due to limits on Personal Rights. Israel scores poorly, mainly because of low scores on Personal Choice and on Equity and Inclusion. Personal Choice and Equity and Inclusion are strong in the Philippines, on the other hand.
Vietnam has strong relative performance in many components of the Social Progress Index, but scores last in the Personal Rights component. Personal Rights is also the worst-performing component for China, Russia and Jordan.

The United States ranks first in Access to Higher Education. Among middle-income countries, Russia, Poland and Argentina rank highest, with high tertiary enrollment rates for women as well as men. Chile and Costa Rica have both experienced a large increase in tertiary enrollment, while enrollment rates have declined in Kazakhstan and Georgia. As primary and secondary school enrollments increase in low-income countries, there is likely to be greater demand and greater need for expanding opportunities for higher education.

Sweden and Costa Rica rank high in Personal Freedom and Choice. Among low-income countries, Rwanda and the Philippines receive relatively high scores in this component. Egypt and Nigeria, however, are the worst performers by a large margin.

Mozambique, the Philippines and Paraguay all show high scores in the area of Equity and Inclusion compared to countries at similar income levels, while the United Arab Emirates, Israel, Korea and Japan are notably poor performers among high-income countries.

FROM MEASUREMENT TO ACTION

Our goal is to go beyond just introducing a new measurement framework of development and enable change. Social progress depends on the choices, investments, and implementation capability across stakeholders—government, civil society, and business. Sustained effort is required for a society to improve on each of the multiple dimensions of social progress over time. The purpose of the Social Progress Index is to benchmark performance and motivate improvement while providing useful insights that will help all stakeholders to make better choices, prioritize investments, and strengthen implementation capacity to improve the lives of citizens. Just as the Global Competitiveness Index and the Doing Business Index allow economic decision-makers to clearly identify the critical policies and investments needed to grow their competitiveness and GDP per capita, the Social Progress Index draws attention to the key areas for enhancing social progress.
Costa Rica is a paradox. Its Social Progress Index rank is 12th among the sample of 50 countries, the first among Latin American and first among non-OECD nations. It has also been rated the “happiest country in the world” for two years running by the Happy Planet Index. Yet poverty has been stuck at about 20% since 1994, and Costa Rica has slipped in the Human Development Index from 31st in the world in 1996 to 69th today.

Disaggregating the Social Progress Index into its three dimensions is revealing in understanding the nation’s challenges and opportunities. Costa Rica performs particularly well on Opportunity, ranking 8th, ahead of many OECD nations. This probably reflects the fact that it is the oldest democracy in the region, with 124 years of uninterrupted, free elections, and a long tradition of upholding people’s rights and inclusion through legal and institutional progress.

Costa Rica is 13th on Foundations of Wellbeing. This is consistent with a country that created the first universal social security system in Latin America in 1941, declared education compulsory and free for all its citizens as early as 1869, and has a strong track record on the environment with a huge percentage of all its land, and ocean territory protected. Costa Rica has a long tradition of attention to topics such as access to water and electricity, and established an institution to eliminate social exclusion as early as 1971.

Surprisingly, however, the country is weakest on Basic Human Needs, ranking 19th. Beginning in the 1980s, the country embraced globalization and trade as its engines of growth, resulting in a dual economic structure, one modern based on non-traditional, more technology and knowledge-based exports and services, but that left behind those that were linked only to its local and traditional economic sectors, many of them traditional agriculture farmers along its coasts and borders, where overall access to education and other mobility instruments is less developed.

This, along with a growing government bureaucracy, gridlock among political parties, stronger public-sector unions, and class polarization have all but paralyzed the country’s ability to replace old and inefficient institutions and rules with those needed to tackle social progress in a rapidly changing and demanding international setting. The Social Progress Index, which questions the country’s self-satisfaction on the social dimension, could help the country fulfill its vision of achieving socially equitable and environmentally sustainable development.

To achieve these goals, our first priority is continued refinement of the model. The Social Progress Index presented here is a ‘beta’ version that will undergo deeper empirical testing. We will examine differences and trends in countries’ performance at the Index, dimension and component levels over time. Where there are critical gaps in the data, we hope to encourage research and action to address these information deficits. We ideally will expand the sample of countries from the current 50 to 120 over several years.

To facilitate feedback, local research, learning, and action we are forming a Social Progress Network of partners from research and academic institutions, think tanks, for-profit and non-profit private organizations, and international development organizations in our sample of countries. We welcome input that will not only improve the model but identify policy interventions, conduct research in areas in which countries outpace or lag their expected level of performance, disseminate new knowledge broadly, and lobby for a policy focus on those areas in which a nation can best improve its social performance. Partners will also help to identify the policies, institutions, legal frameworks and financing mechanisms that can drive more effective and efficient social progress, through international benchmarking and fostering specific research projects among the network of partners.
The idea of building capacity in-country and empowering a local network to drive the change process locally is fundamental to the Social Progress Imperative. We want the Social Progress Network in each country to become a driver for change in their country.

**ENABLING COLLECTIVE IMPACT**

The Social Progress Network is based on the principles set out by John Kania and Mark Kramer in their *Collective Impact* paper:

- Share a measurement system, which is the goal of the Social Progress Index;
- Agree on a common agenda, by using measurement to clearly identify priority areas and opportunities for change;
- Catalyze mutually reinforcing activities, by bringing to the process a mix of abilities and capacities from each partner—government, civil society and business;
- Continuous communication, to generate demand for change, increase the political capital of government officers, and reduce resistance among interest groups affected by the proposed policy changes;
- Backbone support organizations, to support the network. Our aim is to empower national Social Progress committees to coordinate and sustain the effort in the long run.