



Public Health Organizations and Medical Facilities in Lucknow District (India) during British Rule

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Abstract

Public health usually refers to organized efforts made under the direction of medical experts for preventing disease and improving people's health. Decades before public health moved public opinion, socio-medical activities had called for strong sanitary measures, even a sanitary despotism. When the British came to India, indigenous people were having a number of diseases, which were difficult to prevent with the limited resources at that time. In order to improve the general health of the people, the District Medical Scheme was introduced in Lucknow, in the year 1927. British government made an additional staffs and sanitary commissioners for the better care of the native people. They have introduced various public health organisations, hospitals, dispensaries, some indigenous hospitals including Ayurvedic and Unani, medical facilities and schemes within their rule in the various parts of the Lucknow districts of United Provinces.

Keywords: British Government, dispensary, Hospital, Lucknow, medical facilities, etc.

Introduction

The civil surgeon was the head of the medical organization in the district earlier. He was assisted by one or more medical officers and other subordinate staff. The Civil Surgeon was also the inspecting officer of all Government hospitals and aided dispensaries in the district. The department of public health was created in 1868. In 1948, in accordance with the recommendations of the Bhole committee, the two departments of medical and public health were amalgamated and put under a single director of medical and health services, U.P., whose headquarters are at Lucknow. He was assisted in his work by an Additional Director, Deputy Director and Assistant Directors.

In order to improve the general health of the people, the District Medical Scheme was introduced in Lucknow, in the year 1927. Before the introduction of the Health Scheme all health activities were in the charge of the Civil Surgeon. The staff under the District Health Scheme consisted of a District Medical Officer of Health, an Assistant Medical Officer of Health, Sanitary Inspectors for each tahsil together with one travelling dispensary and the vaccination establishment. There were additional staffs of fluctuating strength consisting of medical officers, anti-epidemic operators and epidemic assistants (qualified vaidyas and hakims). Labour gangs were also provided to the Sanitary Inspectors for minor sanitary works and epidemic duties¹.

These dispensaries were located at the following places²:

Hospitals and Dispensaries

Balrampur Hospitals: The principal Government hospital in the district was the Balrampur Hospital. This hospital was not a

district hospital in the usual sense of the word but it was more or less of State importance as it caters for the treatment of the high personages of Government and officers entitled to hospital treatment all over the State. This hospital was in the charge of a Superintendent who was also the Additional Civil Surgeon.

The foundation stone of the Balrampur Hospital was laid on 27th May, 1869. It was built on the land which was part of the Residency and where probably the Residency Hospital at the time of the siege of Lucknow in 1857-58 stood. It appears that the Maharaja of Balrampur created a Trust and donated a sum of Rs. 2, 47,700 in Government paper for the maintenance of this Hospital³. Since then it has been called the Balrampur Hospital. It was managed by a Trust of which the Commissioner of Lucknow was the Chairman, though the major part of the expenditure was met by Government grant. The Hospital has both indoor and outdoor departments. A separate block of rooms was reserved for Europeans and was called the European Ward under the direct control of the Civil Surgeon. In 1917 some improvements were made in the Hospital was taken over by the State from the Trust. Since then the Hospital has expanded considerably. As against 104 beds for indoor patients, there is now provision for 250 beds. The old European Ward consisting of 11 rooms has been converted into private wards available to all on payment of nominal charges. Six new wards have been constructed only last year, primarily for members of Legislature but were open to others, if they were available.

The number of patients treated in the outdoor department of the Hospital in the year 1957 was 91,539 and the number of indoor patients 6,242. These figures were mentioned only to give an idea of the extent of the medical relief provided by this Hospital.

Hazratganj Civil Dispensary: The other Government hospitals in the city were Hazratganj Civil Dispensary and the King's English Hospital. The Civil Dispensary was situated in Hazratganj and was primarily intended to be an outdoor dispensary, though now six beds had also been added to it. The hospital was in charge of a Medical Officer who works under the general supervision of the Civil Surgeon. This Hospital started as a dispensary but in 1887 its management was transferred to the Municipal Board. It became a State Hospital from May, 1949.

King's English Hospital: The King's English hospital was founded by king Nasir-ud-din Haidar of Awadh. It had two branches, 'The Unani Branch' and 'The English Branch'. The King had left promissory notes with the East India Company, the proceeds of which were to go for the maintenance of these hospitals. The management of the King's Hospital was vested in the "King's Hospital Fund". But both these hospitals had been taken over by the State and are maintained by Government afterwards.

Dufferin Hospital: The Dufferin Hospital was the principal hospital for women in the city apart from two other women's hospitals, one belonging to the University. The Dufferin Hospital was maintained by the "Dufferin Fund" supported by contributions from the District and Municipal Boards and by private subscriptions.

Lady Kinniard Hospital: The other hospital for women was the Lady Kinniard Hospital. This Hospital had small beginnings when it was started in the compound of the Zahur Bakhsh Church near Lalbagh in 1876. The Hospital was shifted to its present buildings opposite the King George's Medical College in 1891. The Hospital is managed by the Zenana Bible and Medical Mission and receives grants from the State. It has provision for 100 beds.

Cantonment General Hospital: This Hospital, as the name indicates, was maintained by the Cantonment Board with liberal grants from the Government of India.

Departmental Hospitals: Defence department had its own Military Hospitals in the cantonment, meant for military personnel and members of their families. Similarly, there was a Police Hospital in the Reserve Police Lines for members of the Police force and other Police Hospitals for the P.A.C. the Railways had their own hospitals for the treatment of their employees and their families. The Northern Railway Hospital was started on 13th April, 1937 and had provision for 72 beds for males and 18 for females. There was a separate Infectious Diseases block with 10 beds, also intended for railway employees.

There were dispensaries in Saadatganj, Hasanganj and Ganeshganj which were started in 1887, 1888 and 1889 respectively. They were maintained by the District Board but in

1913 they were transferred to the Municipal Board and are maintained by it.

The Gandhi Memorial and Associated Hospitals

This was a group of hospitals which consists of (1) The Gandhi Memorial Hospital, (2) The Queen Mary's Hospital, (3) The Kasturba T.B. Hospital, and (4) The Skin Diseases Hospital. These hospitals were attached to the Medical College and were managed by the University through a separate Hospital Board of Management under the University.

Gandhi Memorial Hospital: The Gandhi Memorial Hospital was the biggest hospital in Uttar Pradesh and had provision for 495 beds for men and 393 beds for women besides private wards. In the out-patient department, the Hospital treated 4,33,178 patients in 1937 and 19,996 as indoor patients. This Hospital and the associate hospitals provide opportunities for practical training to the students undergoing education in the Medical College. There were all departments of treatment in these hospitals.

Queen's Mary's Hospital: The Queen Mary's Hospital was started on 4th November, 1932 as a hospital for women and children attached to the King George's Medical College.

Kasturba T.B. Clinic and Hospital: The T. B. Cases were treated in separate hospitals as early as 1937. In 1934, this Hospital was expanded and was called Kasturba T. B. Clinic and Hospital.

The Skin Diseases Hospital: It started as a leper asylum by a committee called the General Charity Committee. It was transferred to the management of the Lucknow University as an associate hospital of the Gandhi Memorial and Associated Hospitals in 1929. Its name was thereafter changed to its present nomenclature of 'Skin Diseases Hospital'. It has 35 beds. This hospital was situated in Nishatganj and treats almost exclusively patients suffering from leprosy and allied diseases.

Indigenous Hospitals and Dispensaries

State Ayurvedic Hospital: The State Ayurvedic Hospitals was attached to the State Ayurvedic College at Turiaganj. The outdoor section of this Hospital has a daily attendance of about 400 persons. The Hospital had 48 beds and is served by 2 Vaidyas and 14 nurses.

Ayurvedic Dispensaries: The first Ayurvedic dispensaries were opened in the year 1939, at Gosainganj and Shaikhpur. In the First Plan period Ayurvedic dispensaries were established at Katra-Bakkas, Sarpan, Banthara, Aliganj, Harauni, Nigohan, Bahauli, Nabi-panah and Mal. One Ayurvedic dispensary at Mohibullapur and the other at Alambagh at Mau and Alambagh are under the charge of lady vaidyas.

Mool Chand Rastofi Aushdhalaya, an aided Ayurvedic dispensary is run by Mool Chand Rastogi Trust. It used to treat about 500 patients every day.

Unani Hospitals And Dispensaries: Takmil-ut-tib Unani Hospital was founded in 1902 by Muhammad Abdul Aziz. It was attached to the Takmil-ut-tib Unani College of Jhawai Tola. It had both indoor and outdoor departments with strength of 10 beds, and treated about 15,000 person annually. It received aid both from the State Government and the Municipal Board. Three hakims, one lady hakim, one allopathic doctor and 2 male nurses were in the service of this hospital.

Homeopathic Hospitals and Dispensaries: The Homeopathic Hospitals was attached to the National Homeopathic College and was housed in the same building. It had a total strength of 20 beds, which included a female ward of 6 beds and an isolation ward of 2 beds. Some of the so-called surgical cases were admitted in these wards for internal Homeopathic treatment. On the visiting staff there are four qualifies homeopaths. Two Homeopathic dispensaries, one at Mirakhnagar and the other at Intgaon were established during the First Five-Year Plan. Two other dispensaries, one at Alambagh and the other at Motilal Nehru Park, in the city, were opened later on⁴.

Medical Facilities in Rural Areas

In the year of 1904, there were only 3 permanent dispensaries in the rural areas. Some travelling dispensaries rendering medical aid in the interior of the district also functioned but they could treat common ailments only at that time.

Allopathic Dispensaries: Nadarganj, Nagram, Bakshi-ka-talab, Sarojininagar, Sissendi, Kakori, Itaunja, Mohanlalganj, Malihaba and Salimpur.

Ayurvedic Dispensaries: Katra bakkas, Gosainganj, Shaikhpur, Saspan, Banthara, Aliganj, Harauni, Nigohan, Bahauli, Nabipanah, Mal and Mohibullapur. One subsidized dispensary was under the charge of a lady vaidyas existed at Mau.

Unani Diapensaries: Bijnor, Kankaha, Khushalganj, Mahona, Nagram, Amethi.

Homeopathic Dispensaries: Mirakhnagar and Intgaon.

Conclusion

So we can see, with the establishment of many more dispensaries in different villages, the scheme of travelling dispensaries was given up in the year of 1940. At that time there were 10 Allopathic, 12 Ayurvedic, 6 Unani and 2 Homeopathic dispensaries were in work. The British government had made great efforts to prevent these endemic diseases by themselves but due to the lack of funds and trained medical officers they could not succeed in their aims properly to prevent such epidemic diseases from the society.

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