



HISTORICAL PROGRESS OF PUBLIC HEALTH CARE IN SANGLI DISTRICT

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ABSTRACT :

Public healthcare plays very crucial role in the health status and consequently affects on socio-economic development of any region. Especially, accessibility, availability and quality of public healthcare determine the health status of the downturned strata of the society. It is very intriguing to note that the first modern hospital was built up by the Portuguese in 1510. It was known as the "Royal Hospital" in spite of, the genuine unrest in medicinal services rehearse was brought by the French and British settlers. Particularly, the British established their first medical hospital in Madras in 1667, trailed by more emergency clinics at their focuses. So far as study area is concern, the first public hospital of the Sangli district was started in 1855. At present, Miraj and Sangli cities are emerged as a medical hub in the western Maharashtra. Several multi specialty private hospitals are in started in the district. As per as the present study is concern, researcher is attempted to review the historical progress of public healthcare in Sangli. There was only six primary health care centers in the district at the time of independence which gone up to 59 indicating sharp progress in the provision of healthcare facilities to the rural mass. Likewise, in the year 1951 there was only 12 government hospitals in the district which become 18 in 2015. The entire article is based secondary data and period of study was confined after the independence. Study found that district has achieved significant progress in the field of public health care but still there is much more scope for further development.



KEYWORDS : Public healthcare , socio-economic development , , accessibility, availability.

I. INTRODUCTION

It is very interesting to note that the first modern hospital was built up by the Portuguese in 1510. It was known as the "Royal Hospital" in spite of, the genuine unrest in medicinal services rehearse was brought by the French and British settlers. The Madras General Hospital was the India's first hospital by British's started in 1664. In 1707, the presidency general hospital was started in Calcutta. In fact, public health care during the colonial rule was only nominal in nature.

The first public hospital of the Sangli district was started in 1855. At present, Miraj and Sangli cities are emerged as a medical hub in the western Maharashtra. Several multi specialty private hospitals are in started in the district. As per as the present study is concern, researcher is attempted to review the historical progress of public healthcare in Sangli. There was only six primary health care centers in the district at the time of independence which gone up to 59 indicating sharp progress in the provision of healthcare facilities to the rural mass. Likewise, in the year 1951 there was only 12 government hospitals in the district which

become 18 in 2015. Under this backdrop, attempts are made to evaluate the progress of public healthcare in Sangli district after the independence era.

II. OBJECTIVES OF THE STUDY

The major objectives of the study are as below.

1. To take brief review of public health care during the British regime.
2. To take overview on the public health care after independence in India.
3. To study the progress of public health care in Sangli district in detail manner.

III. PUBLIC HEALTH CARE DURING THE BRITISH REGIME

During the colonial rule, not much emphasize were given on the public healthcare. The first medical officer as a surgeons arrive in India with the east India Company in 1600. It was an entry period of western medicine in India. The Madras General Hospital was the India's first hospital by British's started in 1664. In 1707, the presidency general hospital was started in Calcutta. Likewise, the first cholera pandemic started in the Ganges River Delta in the year 1817. In 1823, the first organized medical education and research institute i.e Jawaharlal Institute of Postgraduate medical Education and Research (JIPMER) is founded in Pondicherry. At present it is considered as an Institute of National Importance. In 1835, the Calcutta Medical College was established in Calcutta. In 1854, Government was agreed to supply medicines to the spreading minor hospitals and dispensaries. In the same year government store depots are established in Calcutta, Madras, Bombay, Mian, Mir and Rangoon. In 1860, the Lahore medical School was established and in 1869, government appointed a public health commissioner and statistical officer in India. The western based first mental hospital of India is established 1870 in Trivandrum. In the same year central sanitary department was formed by the government. In 1873, the birth and death registration act was passed by the government. In 1880 government passed an act for the compulsory vaccination of Smallpox for children's. In 1896, Government appointed Plague Commission. The Bombay Plague epidemic breaks out and it spread across the country and killed at least 2 million people in the same year. As a result of that Government constituted Plague Commission in 1896 and the epidemic disease act was passed in 1897. The act has provided special power to the Governor General of India for implementing necessary measures for prevention and controlling of epidemic diseases. The Government started Trivandrum General Hospital in Trivandrum in the year 1900. Government has released funds for sanitation to the local bodies in 1912. The Indian Lunacy Act was passed in the same year and Shri Ganga Ram Hospital Lahore was founded in 1921. In the 1925, the National Institute of mental health and Neuroscience was established in Bangalore and in 1926, King Edward Memorial Hospital and Seth Gordhandas Sunderdas medical College was started in Mumbai. In the 1930, all India Institute of Hygiene and Public Health was started in Calcutta and in 1933 the Medical Council of India is formed for the medical education. In the 1938, Bombay medical Practitioner's Act was passed and in 1939 the first Rural Health Training Center was started in Singur near Calcutta. In addition the tuberculosis Foundation of India was established in the same year. In 1940, the drugs act was passed first time in India. In the year 1946, Darbhanga Medical College and Hospital was established in Bihar. In short it can be stated that though efforts of the British government in the field of Public healthcare were inadequate, but they created medical foundation in India which assisted government after the independence.

IV. PUBLIC HEALTHCARE DEVELOPMENT IN SANGLI DISTRICT

The first government hospital was opened in Sangli in 1855. But in 1864 the first city cleaning office was established for public health. The year 1927 saw the arrival of the Colera in the Sangli district area. As a result, the Ayurvedic dispensary of the Sangli municipality started in 1928. Then in 1932, the Plague spread in Sangli district, and a large number of people died.

After the independence period, Sangli district has taken a significant leap in terms of health care facilities. Sangli Miraj has emerged as a large dispensary city in the area of medical profession. These include private as well as government clinics. Medical facilities are also available in the district area.

The presented study has analysed how the number of hospitals, clinics, maternities, primary health centers, sub-centers, doctors and nurses has increased after the period of independence in Sangli District.

GROWTH OF PUBLIC HOSPITALS IN SANGLI DISTRICT AFTER INDEPENDENCE

There are currently 18 hospitals in Sangli district. Table 1 shows how these 18 hospitals came into being. There was only two government hospitals in Sangli district in 1951 which gone up to 18 hospitals in 2015. It means that there is significant progress in the public health care of Sangli district.

Table 1 Number of Public Hospitals in Sangli District after Independence

Sr. No	Census Year	No. of Public Hospitals
1	1951	02
2	1965	03
3	1971	05
4	1985	08
5	1991	09
6	2000	11
7	2015	18

Source: Socio-Economic Abstract of Sangli District 1951 to 2015

In 1951, there were only two government hospitals in Sangli district. Both these hospitals were in Sangli city. In 1965 only one new hospital was opened at Miraj. In 1991, a total of 9 hospitals were located in Sangli district, whereas in 2015, they almost doubled to 18.

These hospitals are located across the different location of the district. The tehsil wise distribution public hospital in 2015 is shown in 2. It is clear from the table 2 that there are two public hospitals in Shirala, two in Walawa and one in Palus. Likewise, there are two hospitals in Kadegaon tehsil, two hospitals in Khanapur tehsil and one hospital in Atpadi tehsil.

**Table 2
Tehsil wise Government Hospitals in Sangli District**

Sr. No	Tehsils	Number of Hospitals in (2015)
1	Shirala	02
2	Walawa	02
3	Palus	01
4	Kadegaon	02
5	Khanapur	02
6	Atpadi	01
7	Tasgaon	01
8	Miraj	04
9	Kavathe-Mahankal	01
10	Jat	02
	Total	18

Source: Socio-Economic Abstract of Sangli District 2015

There is one public hospital in Tasgaon, four in Miraj, one in Kavathe-Mahankal and remaining two are operating in Jat tehsil.

Government Dispensaries and Maternity Homes in Sangli District

Although the government dispensaries did not increase as expected in Sangli district during the period of independence, the number of private clinics has increased significantly. Also, special maternity

homes are available only in three places in the district. This means that the number of reproductive organs is not satisfactory. According to the government data of 2015, there are 17 government clinics in the district. Out of these, 3 are in Palus, Kadgaon and Jat have one clinic each in taluka and Miraj has the highest number of clinics i.e 9. There are two government clinics in Khanapur taluka. There are also 2 maternity hospitals in Miraj and one in Tasgaon.

Table No. 3 Tehsil wise Dispensaries and Government Maternity Homes (2015)

Sr. No	Tehsils	Government Dispensaries	Government Maternity Homes
1	Shirala	00	00
2	Walawa	03	00
3	Palus	01	00
4	Kadegaon	01	00
5	Khanapur	02	00
6	Atpadi	00	00
7	Tasgaon	00	01
8	Miraj	09	02
9	Kavathe-Mahankal	00	00
10	Jat	01	00
	Total	17	03

Source: Socio-Economic Abstract of Sangli District 2015

Table no. 3 indicated tehsil wise distribution of dispensaries and maternity home in the 2015. Table no. 4 highlighted growth of the dispensaries and maternity homes in Kolhapur district.

Table No. 4 Progress of Dispensaries and Maternity Homes in Sangli District

Sr. No	Year	Government Dispensaries	Government Maternity Homes
1	1951	02	00
2	1961	02	00
3	1971	04	00
4	1991	06	00
5	1998	08	01
6	2001	13	02
7	2015	17	03

Source: Socio-Economic Abstract of Sangli District 1951 to 2015

Based on table no 3 and 4 it can be stated that there is acute shortage of public dispensaries and maternity homes in the Sangli District.

Number of PHC, Sub centers, Doctors and Nurses in Sangli District

There are total 59 primary health care centers (PHC) operating in the Sangli district. The maximum PHC are observed in Walawa i.e 11 and it has followed by Miraj 8, Tasgaon 8 and Jat 8. Likewise, there are total 320 sub centers and maximum it was observed to 51 in Walawa tehsil and it has followed by Tasgaon tehsil i.e 48. At present there are total 239 doctors are working public hospitals of Sangli district and maximum i.e 58 are working in Miraj tehsil.

Table no. 5 Number of PHC, Sub centers, Doctors and Nurses in Sangli District

Sr. No	Tehsils	Primary health Care centers (PHC)	Sub- centers	Doctors	Nurses
1	Shirala	07	45	22	71
2	Walawa	11	51	39	75
3	Palus	02	17	10	29
4	Kadegaon	04	25	16	37
5	Khanapur	03	18	14	38
6	Atpadi	04	34	12	33
7	Tasgaon	08	48	35	59
8	Miraj	08	23	58	485
9	Kavathe Mahankal	04	42	11	33
10	Jat	08	17	22	64
	Total	59	320	239	924

Source: Socio-Economic Abstract of Sangli District 1951 to 2015

There are total 924 nurses are working in the public hospitals of the Sangli district and maximum i.e 485 are observed in Miraj tehsil.

Table no. 6 indicates year wise progress of PHC, Sub- centers, Doctors and Nurses in Sangli district. It has been seen from the data that there were only 06 PHC, 16 sub centers, 7 doctors, and 35 nurses working in the year 1951.

Table no. 6 Year wise Growth of PHC, Sub centers, Doctors and Nurses in Sangli District

Sr. No	Tehsils	Primary health Care centers (PHC)	Sub- centers	Doctors	Nurses
1	1951	06	16	07	35
2	1960	07	21	04	79
3	1971	08	128	08	79
4	1975	12	170	12	125
5	1980	16	190	64	224
6	1985	24	180	126	335
7	1990	29	215	180	475
8	1995	35	225	215	678
9	2000	40	275	220	699
10	2001	42	290	231	880
11	2015	59	320	239	924
	Total	59	320	239	924

Source: Sangli District Gazette 1969 and Socio-Economic Abstract of Sangli District 1951 to 2015

In 1980, there were only 16 PHC, 190 sub centers, 64 doctors and 224 nurses working in the Sangli district. However, there was significant progress observed in the public health care system after the 1980 onward. At present there are total 59 PHC, 320 sub centers, 239 doctors and 924 nurses are working in the district.

V. SUMMARY:

No doubt that Sangli district has achieved significant progress in the field of public health care services after the independence era, but still there is much more scope for further development. The healthcare services are not spread fully across the district; still remote places are deprived from the coverage of public health care.

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