

CHAPTER-V

EPILOGUE

From all the previous chapters one can glean a conclusion that the Karnataka Health Institute is not a Hospital complex. Basically it is an educational Institution intended for spreading the Gospel of Healthy life for individuals, family, community and nation. It is an abode of peace for the people who seek peace. It is thus a Mission'.

With all noble and pious ideas all the workers work without any conventional rules or regulations of service. The aim of the Institute is to reach the advanced medical facilities and techniques to the common people of the villages along with Indian traditional Ayurvedic treatment. Here Medicare is used as a spearhead to promote moral and material uplift. Medicine is understood as "Science of Life" and not mere disease and drug.

Dr. Hardikar, the stalwart of the KHI had his life's goal based on three Ds. Those are *Deve* (God), *Deha* (Body) and *Desha* (Nation). These three Ds are utilized through the means of four Ds: Duty, Devotion, Discipline and Dedication. Because of these ideals in practice the patient is considered to be God that gives daily bread, medicine is the religion and Health care the mode of worship. At the Institute a human being is understood as the greatest creation of the Creator; the evolutionary processes of the universe are highly respected and health is understood and practised as a balance of eight factors i.e.

physical, mental, moral, spiritual, familial, social and financial happiness and progress of human beings.¹

The interview of the patients and public:

The interviews of patients, parents of the minors and others was conducted. They opined that the KHI is providing good services at much cheaper rates than the other hospitals. The approaches of the Doctors and staff are very cordial atmosphere homely. The diagnosis and other investigations are quite satisfactory. The Hospital has got advanced facilities and is maintained very systematically. Overall it is a good Institution and god gift to the rural people of the Nation.²

Year-Wise Statistics of the Patients Attended

Year	Indoor	Outdoor	Surgical	Total
1936	235	1,265	100	1,600
1937	235	1,102	090	1,427
1938	52	?	?	52
1942	258	1,204	88	1,462
1943	333	1,380	131	1,713
1947	212	1306	?	1,518
1949	415	2,363	373	2,778
1950	464	2,633	407	3,097
1951	620	3,540	679	4,160
1952	742	3,895	865	4,637
1956	877	8,646	896	9,523
1957	1442	11,243	1,073	12,695
1958	1651	11,787	1,266	13,438

¹ Visitors Book

² Patients Interviews

1960	1,740	13,311	1,520	15,051
1961	1,936	14,384	1,438	16,310
1962	1,870	13,742	1,397	15,612
1963	2,174	18,429	1,762	20,603
1964	3,155	20,669	2,401	23,824
1965	3,502	22,248	3,284	25,750
1966	3,601	21,106	2,404	24,707
1967	4,449	24,392	2687	28,841
1968	4,733	27,696	3,047	32,429
1969	4,799	28,941	3,671	33,740
1970	4,520	28,529	3,500	33,049
1971	4,738	26,631	4,248	31,369
1972	4,755	27,219	3,200	31,974
1975	5,863	35,760	4,035	41,623
1976	6,196	34,435	4,049	40,631
1977	5,178	35,115	4,114	40,293
1978	5,194	37,358	4,033	42,552
1979	5,512	36,562	5,320	42,074
1980	5,520	37,803	4,035	43,323
1981	5,632	39,763	4,388	45,395
1982	5,367	41,286	4,441	46,653
1983	5,974	39,005	4,563	44,979
1986	6,490	58,050	5,380	64,540
1987	7,055	50,052	5,731	57,107
1988	6,636	43,302	5,371	49,938
1989	7,722	53,266	6,497	60,988
1990	8,240	51,727	2,887	59,967
1991	8,813	54,713	2,906	63,526

1992	9,322	59,618	3,187	68,940
1993	9,084	59,882	3,170	68,966
1994	10,066	60,744	2,646	70,810
1995	10,051	64,726	3,780	74,777
1996	10,442	65,414	3,449	75,856
1997	10,183	67,400	3,400	77,583
1998	10,564	71,775		92,339
1999	9,406	60,703	3,133	70,109
2000	9,208	70,274	3,113	79,482
2002	9,259	66,101	3,143	75,360
2003	8,243	61,961	2,523	70,204
2004	8,452	61,908	2,866	70,360
2005	9,484	67,242	2,723	76,726

The above statistics shows that since beginning there is consistent increase in the numbers of indoor and outdoor patients thanks to the dedication, devotion, sincerity, untiring, good medical services with minimum expenses. During the years 1994 an important addition was made, i.e. the establishment of 5 bedded Intensive Coronary Care Unit in emergency ward. Recently the Government has established the Public Health Centre in rural areas and many clinics have been started in private sector and hence the number of outdoor patients is decreasing since 1999.

The KHI is successfully completing 76 years of its service to the suffering people. When there were no advanced medical facilities, millions of people were loosing their lives; at such a crucial time the KHI was founded and rendered invaluable services with high ideals;³

- It was started by men without any money

³

RKHI, 1958; P-29

- It was located at a place which totally barren
- Its climate and water are extremely salubrious
- It has always grown on help of small men
- Its biggest donors were almost always its own workers
- Its growth is purely due to its services
- It was planned and started mainly as a 'Rural Health Centre', and all its activities are conducted with that sole purpose.
- It has never allowed any other but Medical atmosphere in the campus
- It is struggling to build 'Health Consciousness' in a society that is losing it gradually due to increasing 'Disease Consciousness'
- It has succeeded in building up an admirable cooperation of Governments, other agencies and the public.
- It has usually been fortunate in getting honest devoted workers.
- It has developed a good combination of large variety of Medical Schemes.

These ideals come into practice due to the sacrificial personalities and timely help of the Central and State Governments and thus the K.H.I. become one of the ideal Institutes in India.

The K.H.I. has been founded to serve all the rural and poor people of the country thanks to the per servant personages like Dr. G.R. Kokatnur founder Dr. N.S. Hardikar Pillar and Architect Dr. M.K. Vaidhya.

Shri S. K. Day Community Project Minister of Union Government visited the Institution. Impressed by its social service, he sent a grant in aid to the institution this was later used by K.H.I. for offering to the public X-ray facilities and an entirely free Maternity service to the women who were educated to take advantage of the facility.

Then similarly Dr Mrs. Sharayu Bhatia advisor to Govt of India on MCH, at the instance of the Director of public Health Dr. V. Vishvanathan a very dynamic figure in Govt. service. She followed this visit and the remark by voluntarily offering two facilities which were most valuable.

(a)...A nurse's training school for which she gave all help and guidance which was followed by Miss T. K. Adranvala after her.

(b).. An ambulance and introduction to one of the finest world social worker from Canada. Dr. Lotta Hitschmanova and smt. Durgabai Deshmukh founder of Central Social Welfare Board. These two great ladies gave a fine shape to all the rural health services of KHI which are termed as unique in medical, social, cultural, educational and selfless and self reliant development of women in the villages.

Shri D. P. Karmarker Minister for health and Minister for Commerce in Govt. of India's first Ministry, visited and expressed his happiness and appreciation of the Services of KH I for Karnataka. He took lot of personal interest on that account and extended considerable help in various ways. then, Bombay, Delhi, Karnatak Government started taking deeper interest in KH I some times by giving Grant-in-aid, but more by -entrusting its with various projects of public utility, which continue even today.

Nurses training, care of patients from Railways, P and T, E.S.I., Family planning, Social Welfare Projects for villages training village-women in a variety of crafts, immunization programmes for children, Domiciliary treatment of T. B. patients and several such projects which needed services of Voluntary organisations and particularly Rural developments. K. H. I. has also carried out these programmes with initiative, honesty, and sincerity and gained confidence and appreciation from all Government levels. Besides these, Govts, have also given several other voluntary grants for our own development plans for expansion of existing services, and for increasing its efficiency and power of serving more and more people. Though the Institution is in a barren and isolated place it had the good fortune of getting the blessings of Rashtrapati Babu Rajendra Prasad twice during his tenure of office. Besides him, 9 Governors of states, over 47 Union Ministers, over 60 ministers from Maharashtra, Bombay, Mysore, and Karnataka, several High Officers from these States and Union Govt. have visited the Institution and have given voluntary help and also taken services from K.H.I. Substantial help, protection from difficulties, and encouragements given by several Divisional Commissioners, Collectors and Dy. Commissioners are all on record in the archives of the Institute.⁴

Among the distinguished guests and visitors who appreciated its services, are;² Dr. Rajendra Prasad (President of India), Shri. V. V. Giri (Vice-President), Shri. B. D. Jatti (Vice-President). Shri. V. V. Giri (Governor), Shri. Uma Shankar Dixit (Governor), Shri. Jayachamraj Wodeyar of Mysore (Governor), Shri. Govind Narayan (Governor), Shri. Dharmaveer (Governor), Shri. S. K. Dey (Union Minister), Shri. D. P. Karmarkar (Union Minister), Dr.

⁴ K.H.Is. 50 years souvenir P:4,5,6, K.H.Is. Foot Print 1973, P: 25, 26, 27

R. R. Diwakar (Union Minister), Shri. B. S. Murthy (Deputy Minister), Shri. Ramkrishna Hegde (Chief Minister).

Thus, through its various schemes, the KHI earned good name and fame in the field of medical and social services. The belief in the good and faith in the national motto '*Satyameva Jayate*' picked up from the great seers of the past were strengthened and proved at the premises of the KHI. The members of General Body, Governing Council, Staff and others associated have earned national and international fame for their work. Several other village workers, Seva Dal workers, etc. who form the strong back bone of every thing that is summarized in the phrase "KHI Family" are equally credit-worthy for its success. They helped the KHI and the rural uplift schemes undertaken with practical demonstration of intermediate economy and economical technology both appropriate for local conditions and a real need of national development and higher values for Indian culture.⁵ Presently the KHI remains as a model to other similar institutions as 'Movement' of medical and multifaceted social services.

⁵ RKHI, 1979; p: 3