UNIT 1 DEVELOPMENT OF COMMUNITY HEALTH IN INDIA

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1.0 OBJECTIVES

After completing this unit, you should be able to:

- summarize the developments in community health in India before independence;
- list out development in community health soon after independence in India;
- identify the five-year plans organized in the country; and
- highlight the achievements during these five-year plans.

1.1 INTRODUCTION

In this unit you will learn about historical developments in community health in India. These developments are identified through various periods before independence, soon after independence and through successive Five-Year Plans. These developments have been under the influence of changing political, socio-economic conditions, scientific advancements, medical services and technology. In this unit we shall discuss about the historical development in community health before and after independence.

1.2 DEVELOPMENT OF COMMUNITY HEALTH IN INDIA BEFORE INDEPENDENCE

Before independence many important events and changes took place in the field of community health in India. These can be divided into various period. A brief description of each period is given in this section.

1.2.1 Vedic Period (3000 BC to 1400 BC)

This was the period of ancient civilization which existed in Indus valley thousands of years before the birth of Christ. The excavation of Indus valley in 20th Century showed the presence of planned cities and practice of good environmental sanitation by people. Ayurveda and Siddha systems of medicine were in practice.
1.2.2 Post Vedic Period (600 BC to 600 AD)
This period was dominated by Buddhism and Jainism. Medical education was introduced in the ancient universities of Nalanda and Taxila. Hospital system was expanded by King Ashoka.

1.2.3 Moghuls Period (650 AD to 1750 AD)
This is the period when Muslim emperor ruled over India. In this period Unani system of medicine was introduced which became part of Indian System of Medicine.

1.2.4 British Period (19th Century to Mid 20th Century)
During this period many developments took place. Some of the most significant events include:

- Enactment of Birth and Death Registration Act, 1873
- Enactment of Vaccination Act, 1880
- Enactment of Epidemic Disease Act, 1896
- Establishment of Lady Reading Health School in 1918 for training of Lady Health Visitors for rural and urban health centres
- All India Institute of Hygiene and Public Health was established in 1930 in Calcutta
- Maternal and Child Welfare Bureau was established in 1931 by Red Cross Society
- Rural Health Training Centre was set up in 1939 at Singur in Calcutta

1.2.5 Pre Independence Period (1943–1946)
During this period in 1943, Bhore Committee was set up to survey the existing health conditions of the people in India. The committee gave its report in 1946 and suggested recommendations for improvement of health of people in India.

Check Your Progress I

i) Fill in the blanks:
   a) Vedic period is the period of ancient civilization which existed in ........
   h) During vedic period ............ and ........... system of medicine was practiced.
   c) Medical education was introduced in ancient universities of Nalanda and Taxila during ...............
   d) Unani system of medicine was introduced during ................. period.
   e) Lady Reading Health School was established in .................

ii) When was Bhore Committee set up and why?

iii) What did the excavation of Indus valley indicate?

1.3 DEVELOPMENT OF COMMUNITY HEALTH IN INDIA DURING POST INDEPENDENCE PERIOD

India attained its freedom in 1947. Since then it adopted the idea of "Welfare State". The Government of India took the responsibility of improving and expanding health services to improve health status of all the people in the country soon after
Health services were planned and developed on the basis of recommendations made by Bhore Committee in 1946. Some of the significant developments are presented in this section.

1.3.1 Soon after Independence (1947–1950)

1947: The Ministries of Health were established at the centre and states.

1948: India joined World Health Organization and became one of its member state.

1949: The Constitution of India was adopted. The article 246 of the Constitution describes the responsibilities of the Central Government and the State Governments regarding health care services for the people in India.

1950: The Constitution of India started functioning.

- The Planning Commission was set up to work out “Five-Year Plan” for health and development.

Check Your Progress 2

i) What is meant by “Welfare State”?

ii) When was the Constitution of India adopted?

iii) When did Constitution start functioning?

iv) Why was Planning Commission set up in India?

1.3.2 Developments through Five-Year Plans (1950–2000)

The idea of Five-Year Plan was started with the establishment of Planning Commission in 1950. This was done to make full and proper use of limited resources for overall developments and to provide adequate services to meet some of the basic needs of people. Health is one of the important needs of people which affects overall development in the country. Therefore, health programmes were given a lot of importance in Five-Year Plans. Highlights of some of the achievements are presented under each of the Five-Year Plan in this section.

First Five-Year Plan (1951–1956)

1951: The First Five-Year Plan was launched and a sum of Rs. 140 crores was allotted for Health Programmes.

- The BCG Vaccination Programme was launched.

- Diploma in Community Health Nursing started at College of Nursing, Delhi and later shifted to Calcutta, West Bengal.

1952: Central Council of Health was constituted to co-ordinate health policies between centre and states.

- Community Development Programme was started for overall development in rural areas.

- Primary Health Centres were set up as part of community development programme to provide basic health services in rural areas.
1953: The **National** Malaria Control Programme and National Small Pox Eradication Programmes were started.

- National Family Planning Programme was started.

1954 Contributory Govt. Health Services Scheme (CGHS) started at Delhi.

- National Water Supply and Sanitation Programme was started.

- Prevention of Food Adulteration Act was passed.

1955: The National Filaria **Control** Programme was started.

- The Central Leprosy Training and Research Centre was started at Chingelput, Madras.

- The Hindu **Marriage** Act prescribed the minimum age for marriage 18 years for boys and 15 years for girls.

- The National T.B. Sample Survey started.

**Check Your Progress 3**

i) When were Primary Health Centre started?

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ii) Why were Five-Year Plans' started?

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iii) When was First Five-Year Plan launched?

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iv) Why was Central Council of Health **Constituted** by the Government of India?

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Now let us go through the achievements of Second Five-Year Plan.

**Second Five-Year Plan (1956–1961)**

1956 The Second Five-Year Plan was launched in 1956, Rs. 225 crores spent on Health Programmes.

- The Central Health Education Bureau was established.

- The Trachoma Control Pilot Project was launched.

1957: Demographic Research Centres were established in Calcutta, Delhi and Trivandrum.

1958: The National Malaria Control Programme was converted into National Malaria Eradication Programme.

1959: Mudaliar Committee was appointed to review the progress made in the field of health from 1947 onwards, i.e. after submission of Bhore Committee’s Report and to give suggestions for improvement and further developments.

- Panchayati Raj was introduced in Rajasthan for the first time.

1960: National Tuberculosis Institute at Bangalore was started. The School Health Committee was constituted by Union Health Ministry to assess the present
standard of health and nutrition in school children and suggest means to improve them.

Check Your Progress 4

What was the reason for constituting the following committees?

a) The Mudaliar Committee in 1959

b) The School Health Committee in 1960

Now let us explain the achievements of Third Five-Year Plan.

Third Five-Year Plan (1961–1966)

1961: The Third Five-Year Plan was launched. Rs. 342 crores was allotted for Health Programmes.

- Mudaliar Committee reported its findings and gave recommendations for improving health services.

- The Central Bureau of Health Intelligence was started to compile and utilise vital health statistics.

1962: The Central Family Planning Institute was established in Delhi.

- The School Health Programme was initiated.

- The National Small Pox Eradication Programme was started.

- The National Goitre Control Programme was started.

1963: The Applied Nutrition Programme was started with the help of UNICEF, FAO and WHO.

- The National Trachoma Control Programme was started.

- The Malaria Institute of India at Delhi was converted into "National Institute of Communicable Diseases" (NICD).

- Emphasis in family planning was shifted from clinic approach to extension approach.

- The Chaddha Committee suggested to have one basic health worker for every 10,000 population.

1964: The National Institute of Health Administration and Education (NIHAE) was set up in Delhi.

1965: Direct BCG vaccination without prior Tuberculin test was introduced on house to house basis.

- International Post-Partum Family Planning Programme started in 25 hospitals in 15 countries. Two of these hospitals are located in India i.e., Delhi and Trivandrum.

1966: Mukherjee Committee was constituted to look into the minimum additional staff required for the primary health centres to take over the maintenance work of malaria and small pox.

- A separate department of family planning was formed in the Union Ministry of Health to co-ordinate family planning programme at the centre and states.
Interim Period (1966–1969)

During this period yearly plans were made.

1967: Small Family Norm Committee was set up to support suitable incentives to those accepting small family norm and practicing family planning.

1968: The Small Family Norm Committee submitted its report.

— A Bill of Registration of Births and Deaths was passed.

Check Your Progress 5

i) When was the Third Five-Year Plan started in India?

ii) In which year the Birth and Death Registration Bill was passed?

iii) Why was separate department of Family Planning started in Union Ministry of Health and Family Welfare?

iv) Why were the following committee set up:

a) Mukherjee Committee in 1966

b) A small Family Norm Committee in 1967

v) Name the International Organization which helped in starting Applied Nutrition Programme in India.

Now let us discuss the achievements of Fourth Five-Year Plan.

Fourth Five-Year Plan (1969–1973)

1969: Fourth Five-Year Plan was launched in 1969 and Rs. 840 crores allotted for health programmes.

— Committee on Medical Education recommended three months posting of medical students in rural area during internship period. Medical training should be oriented to produce Basic Doctors.

1970: All India Hospital (Post-Partum) Family Planning Programme was started.

— The Population Council of India was formed.

— The Registration of Births and Deaths Act, 1969 was implemented from April 1st.

1971: The Medical Termination of Pregnancy (MTP) Bill of 1969 was passed.


1973: The National Programme of Minimum Needs was developed which included compulsory elementary education, health, nutrition, good housing, proper roads, safe water supply and electrification in rural areas and slums.

— Multi-purpose Health Workers (MPHW) (New cadre of health workers) was recommended by Kartar Singh Committee for delivery of health, Family Planning
and Nutritional Services to the Rural Communities. The MPHW will replace in

course of time Basic Health Workers, Family Planning Health Assistants and

Auxiliary Nurse-Midwives etc.

| Government planned a scheme for setting up 30 bedded rural hospital for every |

four Primary Health Centres.

We have already discussed about four Five-Year Plans. Now let us discuss the

achievements of Fifth Five-Year Plan.

Fifth Five-Year Plan (1974—1979)

1974: The Fifth Five-Year Plan was launched on April 1, 1974. Rs. 796 crores was

allotted for Health and Rs. 516 crores for Family Planning. The National

Programme of minimum needs was implemented along with health care

services.

1975: India became Small Pox free on 5th July, 1975.

| India accepted the Revised Strategy for National Malaria Eradication Programme. |

| Integrated Child Development Scheme was started from 2nd October 1975. |

| National Child Welfare Board was set up. |

1976: Indian Factories Act of 1948 was amended.

| The Prevention of Food Adulteration Act of 1975 came into force. |

| New Population Policy was announced by Union Health Ministry. |

| A three-tier plan for health services in villages was proposed by Central Council of |

Health.

| National Programme for Prevention of Blindness was formulated. |

1977: India was declared Small Pox Free by International Commission in April.

| National Institute of Health Administration and Education was recognized to |

National Institute of Health and Family Welfare. |

| Rural Health Scheme and Training of Community Health Workers was started on |

the basis of Srivastava Committee Report in 1975. |

| WHO adopted the goal of Health for All (HFA) By 2000 AD which was accepted |

by the Government of India in 1978. |

1978: Parliament approved the Child Marriage Restraint (Amendment) Bill fixing

the minimum age of marriage for boys 21 years for girls 18 years.

| Expanded Programme of Immunization (EPI) was launched. |

| Alma Ata Declaration of Primary Health Care Approach to achieve the goal of |

Health For All By Year 2000 was approved by WHO. |

Check Your Progress 6

i) When was the Medical Termination of Pregnancy Bill passed and when it came |

to force?

ii) Who recommended the Multipurpose Health Workers Scheme? What was its |

purpose?

iii) When was India declared Small Pox Free by International Commission?
After you have learnt about the achievements of Fifth Five-Year Plan, let us go through the next Five-Year Plan.

**Sixth Five-Year Plan (1980–1985)**

During Sixth Five-Year Plan a sum of Rs 1821.05 crores was allotted for health programmes.

- **1980:** Sixth Five-Year Plan was launched.
- Small Pox was officially declared eradicated from the entire world by World Health Assembly.
- **1981:** Census was taken.
- WHO and member countries adopted the global strategy of Health for All
- India committed to provide safe drinking water and adequate sanitation for all by 1990.
- Prevention and Control of Air Pollution Act was introduced.
- **1982:** National Health Policy was announced by the Government of India.
- **1983:** Guinea-worm Eradication Programme was launched.
- National Health Policy was approved by Parliament.
- National Leprosy Control Programme was changed into National Leprosy Eradication Programme.

You have learnt about the Sixth Five-Year Plan. Now let us know the achievements of the Seventh Five-Year Plan.

**Seventh Five-Year Plan (1985–1990)**

- **1985:** Seventh Five-Year Plan was launched. A sum of Rs. 3392.89 crores was allotted for health programmes.
- Universal Immunization Programme was launched.
- **1987:** New 20-Point Programme was launched.
- Worldwide Safe Motherhood campaign was launched by World Bank.
- National Diabetes Control and National AIDS Control Programme was started.
- **1990:** Control of Acute Respiratory Infection (ARI) Programme initiated as a pilot project in 14 districts.
- **1991:** Census was taken.

Let us highlight the achievements of our next Five-Year Plan.

**Eighth Five-Year Plan (1992–1997)**

During Eighth Five-Year Plan Rs 7575.92 crores was allotted for health programmes.
1992: Eighth Five-Year Plan was launched.

- Child Survival and Safe Motherhood (CSSM) Programme was launched.

1993: Revised National Tuberculosis Programme with DOTS (Direct Observed Therapy Short term) was introduced as pilot project.


- Indira Gandhi National Open University (IGNOU) launched its B.Sc. Nursing Programme (Post-basic three years) on all India basis.


- Pulse Polio Immunization Programme was launched on 9th December, 1995 and 20th January, 1996.

1996: Child Survival and Safe Motherhood Programme was changed to Reproductive and Child Health Programme.

- Prenatal Diagnostic Technique (Regulation and Misuse) Act, 1994 came into force from January 1996.

- Family Welfare Planning Programme was made Target-free from 1st April, 1996 and later on it was changed to community needs assessment approach.

- 2nd Phase of Pulse Polio Immunization (PPI) was conducted on 7th December, 1996 and 18th January, 1997.

1997: 3rd phase of Pulse Polio Programme was conducted on 7th December, 1997 and 18th January, 1998.

- Prohibition of Smoking and Non-smoking Health Act implemented on 26th January, 1997.

- Special Immunisation drive was from 10-16th March, 1997.

- Cancer Control Programme for Women was launched on 31st March, 1997.


1990: Pulse Polio Programme conducted in four phases on 24th October, 21st November, 19th December, 1999 and 23rd January, 2000 to eradicate polio from all over India.

2000: On 11th May, 2000 India is Projected to have 1 Billion (100 crore) population.

- National Population Policy was announced with major objective of meeting the unmet needs of contraception, health infrastructure, health personnel and to provide integrated service delivery for basic reproductive and child health care. Long term objective is to achieve stable population by 2045.

- Pulse Polio programme was conducted in four phases on 24th October, 2000, 27th November, 2000, 10th December, 2000 and 21st January, 2001 to eradicate polio.

Check Your Progress 7

i) When was the National Health Policy approved by Parliament?

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ii) What do you understand by the term CSSM?

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iii) When was the Pulse Polio Immunization Programme launched?

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iv) When was Family Planning Programme made Target Free?

1.4 LET US SUM UP

In this unit you have learnt in brief the historical developments in the field of Community Health. In Vedic period it was found that cities were well planned with proper environmental sanitation. Ayurveda and Siddha systems of medicine were practiced. Medical education was given a boost in the Post-Vedic period and King Ashoka expanded the hospital system. In Mughal period Unani system of medicine was introduced and it became a part of Indian medicine. During the British period many acts on health were passed and School for Training of Health Visitors was started. In the Pre-Independence period Bhore Committee was set up to survey the existing health status and health organizations in the country and suggest recommendations to improve them. In the post-independence period the Ministries of Health were established in the Central and State Governments. The National Programmes were planned. Five-Year Plans were launched. Various institutions were set up and acts were passed. A substantial amount of money was spent on Health Programmes. In 1978, Alma-Ata Declaration was made. Primary Health Care approach was advocated by WHO to achieve the HFA (Health For All) goal which was adopted by Government of India.

In 1983, National Health Policy was passed. School Health Services were started. EPI was launched and Child Survival and Safe Motherhood Programme was started which was later changed to RCH Programme. Recently, Pulse Polio Immunisation Programme was launched and conducted in many phases to eradicate polio from all over India. Rural health posting for medical and nursing students in rural areas was made compulsory.

1.5 GLOSSARY

**Bhore Committee**: In 1943, the Government of India appointed a committee known as Health Survey and Development Committee under the chairmanship of Sir Joseph Bhore (Popularly known as Bhore Committee) to study the existing health conditions at that time and to make recommendations for the future developments. The committee submitted its report in 1946. The recommendation of this committee forms the basis of health services in the country.

**Chaddah Committee**: A committee appointed by Government of India under the Chairmanship of Dr. M.S. Chaddah in 1963 to study the arrangements necessary for maintenance phase of National Malaria Eradication Programme.

**DOTS**: Direct Observed Therapy short term.

**Eradication**: Total extinction of the responsible pathogenic agent or cessation of infection and disease from the whole world e.g. Small Pox.

**ICMR**: Indian Council of Medical Research.

**Kartar Singb Committee**: A committee appointed by Government of India in 1973 to study the Multi-Purpose Workers under Health and Family Planning, their structure, feasibility and training requirements under the chairmanship of Kartar Singh, Additional Secretary, Ministry of Health and Family Planning.
MTP : Medical Termination of Pregnancy.

Mukherjee Committee : In 1965, committee was appointed under the chairmanship of Mukherjee, then Secretary of Health to Government of India to review the strategy for Family Planning Programme.

Mudaliar Committee : In 1959, Government of India appointed a Committee under the Chairmanship of Dr. A.L. Mudaliar to survey the progress made in the field of health since the submission of Bhore Committee's report and made recommendations for further development and expansion of health services.

Pandemic : When a disease spreads from one country to another in a short time or occurs at the same time in different countries.

WHO : World Health Organisation.

1.6 MODEL ANSWERS

Check Your Progress 1
i) a) Indus valley.
   b) Ayurveda, Siddha
   c) Post vedic
   d) Moghul
   e) 1978.
ii) The Bhore Committee was set up in 1943. It was set up to study existing health status of people in the country.
iii) The excavation of the Indus valley indicated the presence of planned cities and practice of good environmental sanitation by people during vedic period.

Check Your Progress 2
i) "Welfare state" meant to expand and improve health services to improve health status of people.

Check Your Progress 3
i) The Primary Health Centres were started in 1952 as part of Community Development Programme.

Check Your Progress 4
i) The Mudaliar Committee in 1959 was appointed to review the progress made in Health since the submission of Bhore Committee's report.
b) The School Health Committee was constituted in 1960 to assess the present standard of health and nutrition in school children and suggest measures to improve them.

Check Your Progress 5

i) The Third Five-Year Plan was started in India in 1961.

ii) The Birth and Death Registration Bill was passed in 1968.

iii) The separate department in the Union Ministry of Health and Family Welfare was started to co-ordinate family planning programmes between the centre and states.

iv) a) Mukherjee Committee (1966) was set up to look into the minimum additional staff required for primary health centres to take over maintenance work of malaria and smallpox.

b) A Small Family Norm Committee (1967) was set up to support suitable incentives to those accepting small family norm and practicing family planning.

v) International organisations which helped in starting Applied Nutrition Programme in India are:
   - UNICEF
   - FAO
   - WHO

Check Your Progress 6

i) The Medical Termination of Pregnancy Bill was passed in 1971 and it came into force in April in 1972.

ii) Kartar Singh Committee recommended the Multi purpose Health Workers Scheme for delivery of health, family planning and nutritional services to the rural communities.

iii) India was declared Small Pox Free by International Commission in 1977.

iv) The minimum age of marriage for boys 21 years and for girls 18 years was approved by Parliament in 1978.

v) Primary Health Care approach was approved by WHO to achieve the goal of MFA by Year 2000.

Check Your Progress 7

i) The National Health Policy was approved by the Parliament in 1983.

ii) The term CSSM means Child Survival and Safe Motherhood.

iii) The Pulse Polio Immunization Programme was launched on 9th December, 1995 and 20th January, 1996.

iv) Family Welfare Planning Programme was made target free from 1st April, 1996.

1.7 FURTHER READINGS


Park, K., Park’s Text Book of Preventive and Social Medicine, 14th edition, Jabalpur, Banarsidas Bhanot, 1994, pp. 508-11.