



SPECIAL ARTICLE

Genesis of All India Institute of Hygiene and Public Health, Kolkata.

(Extracted from the first Annual Report of the Institute in 1934)

Prof. U.K.Chattopadhyay*

Public health policy in India started with the taking over of the administration of British India by the Crown in 1857. The high mortalities among British and Indian troops and in the civil population attracted the attention of Parliament and in 1860 a Royal Commission visited India and made recommendations for the improvement of health and sanitary conditions in India. This Commission recommended that Sanitary Commissions should be appointed in the major provinces of Madras, Bengal, and Bombay. These commissions were established and for some years did good work. Departmental jealousies and other causes however led to their gradual emasculation and by 1900 they had been reduced to one officer, the Sanitary Commissioner, who had little or no staff and whose duties were largely confined to inspecting vaccinations. The advent of plague in 1896 led to a general awakening of everyone's responsibilities in the matter of health and prevention of disease, and in 1912 the Government of India formulated an important declaration of sanitary policy, establishing research on a sound basis, and giving grants to Local Governments for the augmentation of their sanitary staff, both central and provincial. The Government of India in a resolution insisted that candidates for Assistant Directorships of Public Health should have a British Diploma of Public Health. Health Officers of first class towns were required to have a registrable qualification and a British Diploma of Public Health. In this resolution they stated, "The necessity for a British Diploma of Public Health will however only be temporary, as the Government of India trust that it may be possible to waive the second restriction as soon as arrangements can be

*** Director-Professor & Head,
Department of Microbiology,
All India Institute of Hygiene & Public Health, Kolkata**

made in India which will enable Indians trained in this country to become Health Officers of the first class”.

Provincial governments took up the question of providing such training, and qualifications in public health and higher diplomas and degrees demanding specific courses of training were initiated by the universities of Bombay, Madras, Calcutta and Lucknow. These, however, naturally retained a provincial outlook. The conception of providing courses in hygiene on a wider basis originated with Sir Leonard Rogers who in 1914 conceived the idea of establishing institutes in India for post-graduate study in tropical medicine and hygiene. Sir Leonard's first proposal was that there should be a School of Tropical Medicine in Calcutta, and an Institute of Hygiene in Bombay, and that both of these might be on an All-India basis. Various circumstances and considerations prevented these views from coming to fruition, but it was chiefly owing to Sir Leonard Rogers' perseverance and enthusiasm and to the generosity of the Governments of India and Bengal and various private benefactions, that in 1920 the Calcutta School of Tropical Medicine and Hygiene which combined teaching and research in both tropical medicine and hygiene was opened. A Professorship in Hygiene was established, and a course of instruction arranged in the School for the Diploma of Public Health of the Calcutta University. There were obvious limitations to the scope and outlook of this arrangement. However enthusiastic one man may be, there are now so many aspects of public health both of temperate and tropical climates, each of which is rapidly developing and requires the full attention of a single worker and teacher, that it is impossible for a single person to combine the qualities or to find the time necessary to assimilate, digest and teach the diverse subjects comprising the entity known as modern public health.

Workers highly trained in general hygiene and specialists in some particular branch are needed in India, and as time goes on and public health policy broadens and expands in all Indian provinces, such workers trained in Indian needs and with Indian experience will be more and more required. Major-General Sir J.D. Graham, C.I.E., I.M.S., the then Public Health Commissioner with the Government of India, said in his Annual Report for 1925 (Section VIII) :-

“The need of providing training for public health workers - Certain conclusions have been forced upon me after careful study of the position over the last few years. It is

becoming increasingly evident that a considerable section of the Indian community is thinking seriously on these public health problems.”

“This is a work which has to be done for the benefit of Indians. To be effective it must carry conviction and establish its position against immemorial conservatism tradition, it must therefore be done by Indians. It presents a grand and unlimited field for public health workers, but it is well to recognize that the improvement cannot be achieved when the expert labourers are too few in number, that these cannot be increased to the requisite number without a careful system of specialized training in institutes or schools devoted to public health teaching and research, and that cannot be done without adequate financial support. The need for such training of Indian personnel has been advocated for the last two decades by our expert hygienists and research workers in India. It has often been represented, and not without justice, that scientific knowledge in regard to the prevention of certain communicable diseases has far outstripped its application in the field. It is with such a personnel that the practical application must finally rest.” As head of the Calcutta School of Tropical Medicine and Hygiene, Major-General Sir John Megaw arrived at similar views, which were expressed from time to time in the Annual Reports of the School. Dr. W.S. Carter, M.D., Associate Director of the Rockefeller Foundation, in his periodic tours of India and the Far East, met General Megaw and General Graham on various occasions and became deeply impressed with the necessity for establishing an All-India Institute of Hygiene. Much of the teaching in basic subjects, such as ‘bacteriology and protozoology, for the Diploma of Public Health is similar to that for the Diploma of Tropical Medicine and as this was being taught in the School of Tropical Medicine, Dr. Carter at once grasped the obvious advantages of Calcutta as a location for an All-India Institute, and of a site close to the Calcutta School of Tropical Medicine, where the basic subjects would continue to be taught. It would thus be unnecessary to duplicate these courses, and at the same time the Institute would deal with purely public health subjects especially related to Indian requirements. As a result of discussion with General Megaw and others, Dr. Carter, on behalf of the Rockefeller Foundation, addressed the Government of India in terms embodying these proposals, offering to provide the cost of acquiring the site selected, and to build and equip an All-India Institute of Hygiene and Public Health, and further asking for the Government of India’s assurance that they would meet the recurring cost of staff and

maintenance after the building was handed over to them. The Government of India gratefully accepted this munificent offer and negotiations for the acquisition of the site were commenced. This was acquired finally in July 1930, and the site was cleared and building commenced in September. A Constructional Committee composed of the Public Health Commissioner with the Government of India, the Surgeon-General with the Government of Bengal, the Chief Engineer with the Government of Bengal, the Chairman of the Calcutta Improvement Trust, and the Accountant-General, Bengal was appointed to arrange for the construction of the building. Lt.-Col. A.D. Stewart, C.I.E., I.M.S., Professor of Hygiene in the Calcutta School of Tropical Medicine, was appointed Director-Designate of the new Institute, and Lt.-Col. A.A.E. Baptist, M.B.E., I.M.D.(RETD.), Assistant Director, to superintend the actual details of construction and equipment. The building was completed early in 1932 and was formally opened by H.E. Sir John Anderson, Governor of Bengal, and the Institute was born.