Journal of Advances and Scholarly Researches in Allied Education
Vol. 16, Issue No. 9, June-2019, ISSN 2230-7540

A Study on Background of Medical College Libraries in Hyderabad Karnataka Region

Shaik Nabi[1]* Dr. Syed Shah Ahmed Sarmast[2]

[1] Research Scholar, Mewar University, Rajasthan, India

[2] Research Supervisor, Mewar University, Rajasthan, India

Abstract – When India became independent in 1947, only 15 medical colleges were created, and the total intake of students was 1000. The medical graduate schools steadily have been upgraded to colleges associated with separate universities. More than 500 medical universities operate in India today. Seven medical universities were set up in 1947 in Karnataka, but today there are 42 medical colleges alone. The Indian Medical Council in Delhi regulates the schools. The Indian Medical Council updates, reviews and recommends ways to develop teaching personnel, infrastructure services, and so on. The Medical Council of India The Indian Medical Council (MCI) proposes every year that all infrastructure, professional professionals and programmes be updated and strengthened for students.so, in this article we will discuss about background of medical college libraries in Hyderabad Karnataka region.

Keywords – Background, Education Systems, Medical College Libraries

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INTRODUCTION

The medical libraries in emerging and underdeveloped nations are also in the process of developing to reach the full scholarly, science and medical knowledge requirements. According to several reports, the most critical needs of knowledge will be fulfilled if health libraries in national and regional networks are coordinated. In addition, easier collaboration and integrated resources must be utilized to create opportunities for ongoing education and the sharing of ideas amongst technical libraries. Collective intervention is the principal lasting position in the environment today; (may be a formal or informal). Much of the studies illustrate contemporary issues and the effect on the global health research knowledge flow and management. Studies often emphasize that improved collaboration between coworkers, education opportunities and other findings is required in the library environment.

The present research has attempted to track the past of growth at international level in the health sciences libraries, including pre-computer century, library curriculum, management and operations and background of medical college.

MEDICAL EDUCATION SYSTEM IN INDIA

Ancient India's schooling has always been a big part of society's elevation. Many literatures give references about the ancient civilizations' schooling method. Mahabharata, certain Dharma sutras, particularly those of Gautama Buddha and Apastamba and Manu Smruti, are the key works of the old Indian education system. The word "Upanayana" implies to take information literally. By this ritual, the preceptor was taken by the boys of the three high classes Brahmins, Kshatriyas and Vaishya, which started the Vedic study. The maximum of age for this reason for Brahmins varies from 5 to 16, for Kshtriyas from 6 to 12 and for Vaishya from 8 to 24. The children so started the research were obliged to remain in the house of the preceptor. The preceptor's service was a pupil's responsibility. The student was to beg alms and endure what the instructor offered him.

Ancient Medical Education:

Atharvaveda also included herbs for different treatments in ancient times. A major portion of Ayurveda will then be used to cure illnesses using herbs. The first writing of medical information was Charak and Sushruta. In India the Ayurveda therapy care nation is well-known worldwide. Ayurveda is well known as Acharya, Sushruta and Samhita are well known. Any of the strong books of Ayurveda have been written. Takshashila University in ancient times was renowned world-wide for its health education. The University was established in India, but students from other countries studied there.

Medical Education before 1947

In British Raj, regular servicemen needed medical attention, but medical facilities in India were not available. The British Raj then agreed to educate indigenous youth. The posts are textile staff, nurses and compounds. These indigenous young people obtained qualified doctors called indigenous doctors. British Governor Bent Ink came to India on that day and agreed to set up medical education in India. So, he established a native medical facility in Calcutta, the teaching institution of India, on 20 January 1835 and soon the order of the Governor General in 1835 declared it appropriate to develop new medical colleges in different medical fields for a certain number of Indian youth institutes. The British Government then began India's First College of Medicine at Kolkata in 1835. It was soon beginning in Madras Medical College and in Mumbai Grant Medical College. Bengal's Medical College was the first establishment in India to teach Western medicine systematically. From 1764 to 1804, after Europe, the British East India Company founded Indian Medical Services in India. In Bombay, Calcutta and Madras, the IMMS officers led and assisted military and civil hospitals. Fifty students were granted the first set.

On the last day of June 1835 Madras Medical College was opened for subordinate military medical study. The first party of eleven locals and ten Eurasians were admitted to this institution for a four-year course and professional Eurasians were hired as apothecaries and the local were known as the army dressers. It was agreed to carry out three courses one for doctors lasting over five years, another for four years and the third for training dressers for over three years. In 1835, the school opened up to civilians but hostility to western medicine was so serious at this stage that eight years ago no citizen was permitted to enroll. Following qualifications, medical students earned a certificate or a medical degree. It wasn't long until a medical school in Bombay was established that all this occurred in Madras and Calcutta. On 30 March1843, the Lord Bishop of Calcutta laid the foundation stone for the Grant Medical college and on November 1845 Sir George Arthur, the governor of Mumbai, formally opened the college. In 1857, the institution was annexed to the newly established Bombay University. There were more and more medical schools opened and 17 of these schools and colleges were opened by 1900. The Lady Harding Medical College was opened in New Delhi in 1916 solely for the training of female doctors and it is now the only such institution in India.

Medical Education Systems after 1947

In 1947, when India obtained independence, only fifteen medical colleges were established and the total intake of students was 1000. Gradually, certificate medical schools have been converted to degree colleges associated with separate institutions. Today, postgraduate training is provided in more than 250 medical colleges and special institutes for postgraduate training and study in medical sciences are being developed across the world. To begin with, under an act of parliament, the All India Institute of Medical Science was set up in New Delhi in 1956 as an independent organisation of national significance. After the authorities understood that such an entity can be established in status and perform its obligations only in an environment of liberty on its own. In undergraduate medical education, the most significant aim of this institute was to establish educational trends that would promote the practise of the highest standard modern medicine under current conditions in India, and that students could meet the needs of the near future. In the field of postgraduate education, the institution's most important role was to provide teacher training opportunities for medical colleges in India in a research and development setting. In 1956, the Health Survey and Growth Committee proposed the creation of six more post-graduate medical education and research institutions. Institutes of Calcutta, Chandigarh and Pondicherry are now in the phase of growth, and more are expected. The Royal College of Surgeons of England accepted the three academic degrees conferred by their respective colleges as early as 1843 and recorded them with the United Kingdom's General Medical Council. Thus, under the direct and general control of the General Medical Council and the standard of medical education in India, medical education evolved until 1933, when the Medical Council of India was established. The Medical Council of India had powers comparable to those exercised in the United Kingdom by the General Medical Council and had regional councils within its control that established provincial registers and treated disciplinary matters. The medical council of India was chiefly responsible for establishing consistent minimum requirements for university medical education in India. And to encourage overseas appreciation of the degrees conferred by Indian Universities. The medical council's slogan was "efficiency at home and honour abroad." The council was authorised to suggest to the Government of India that different medical institutions be recognised, whether under the jurisdiction of the university or some other autonomous entity that, in its view, awarded medical degrees or standard diplomas deemed satisfactory by the council. The Council was allowed to order medical establishments to submit some details and to assign its investigators or observers to the institutions to check on the manner in which it was performed, the consistency of the teaching and the level of review carried out by the associated university. On the basis of these findings, the Council examined the existence and standard of the medical qualifications granted at a specific medical centre

and submitted its advice to the government as to the advisability of accepting the medical qualifications awarded by the university concerned. Soon after the transition of power, India's parliament enacted additional legislation establishing nursing, dental and pharmacy councils on the same pattern with impressive developments in genetics, physics and chemistry and the increased need for specialisation in medical sciences in recent times, India's government thought that crucial assessment and re-examination of pre-medical and medical education was required. With the view in mind, the Government arranged the first medical education conference in Autumn, in 1955, which in particular, considered the proceedings of the world's medical education conference with special references to the country's needs, and recommended significant changes in medical education in India. Exhaustive discussions were conducted at the conference on pre-medical education, student classification and entrance requirements; the quality of medical courses and curriculum hours, assessment and review techniques; the establishment of full-time teaching departments; the formation of social and preventive medicine, clinical medicine and statistics departments; The government has largely adopted much of the suggestions of this meeting, however, sadly, they are far from being enforced. However, the direct result of this conference was that the parliament passed new laws on medical education in 1956, which abolished the Indian Medical Council Act of 1933 and granted the Medical Council further authority.

As part of the medical education programme in India, the medical and health related activities were carried out, including: medical education, dental education, nursing education, training of some kinds of public health staff, training for pharmacy employees, and training for social and preventive health workers in hospitals.

Types of Medical Education

In India Rushi-Muni began medical care and medical education. They were sufficiently acquainted with medical care. Seven pathy forms can be identified in India. The Ayuerveda is India's oldest road. This disease is in practise treated and trained after Rushi-Muni era. Both surgical treatments have their own patient care method. So seven kinds of paths exist in India.

Seven types of pathy in India:

Figure 1: Six types of pathy in India:

Allopathy:

Allopathic methods of studying bouts and illnesses in the human body. It is well known and embraced across all walks of life. Millions of citizens save their lives according to this device. Allopathic is the medicinal procedure system aimed at treating illnesses through medicines that cause symptoms rather than those caused by special therapies.

Ayurveda:

One of the world's oldest techniques is Ayurveda therapy. This method is in practise for nearly 7000 years.

Unani:

Unani and Unani are also common medicine and preparation. This teaching is distributed across India. It's really near Ayurveda. Both give their perspectives on the theory of human body elements

Homeopathy:

In India, the homoeopathy was a widely common method developed by Samuel Hahnemann and used in India before 3,500 years ago in Mahabharata.

Naturopathy:

These devices handle the patient without any medication inside or outside. The influence of water, air, earth, sunshine, and so on is used by natural science to accelerate nature's curing power. By utilizing natural elements, illnesses may be cured by fostering the curing and latent nature.

Yoga Therapy:

Yoga therapy is focused on yoga postures, mudras, bandhas, pranayamas, massage, sensitive diets and other good lifestyle practices

and does not include them. This allow an individual to use the healing skills of the human body. There should be two types of therapy:

Present Status of Medical Education:

1) Total Under-graduate medical colleges in India:

Sr. No.	Types of colleges	No. of medical colleges	No. of Seats
1.	Government medical college	272	41,708
2.	Private medical college	263	41,218
3.	Degree in community medicine seats		821
4.	Diploma in Public health seats		270
	Total medical colleges	**535**	**50412**

2) Total Post-graduate medical colleges in India:

Sr. No.	Types of colleges	No. of seats
1.	Government medical college seats	36,192
2.	Private medical college seats	41,218
	Total seats	**77,673**

STATUS OF MEDICAL COLLEGE LIBRARIES IN HYDERABAD KARNATAKA REGION

There are 53 medical colleges in Karnataka, India's second largest medical colleges. The commitment to the health care sector has a great heritage. The libraries of these education systems are inseparable and play an important role in providing the resources needed for the successful start and conduct of structured and informative training and also enrich the academic eco-systems of any organization by gaining from study and the dissemination of expertise and ideas. Libraries must constantly connect and remain in keeping with users and consumers' expectations and desires. The essence of the contact quality is dictated by considerations such as the central reliability and efficiency of the device itself, its selection and its communication networks. A detailed knowledge of the interests and viewpoints of both current and prospective users can result in improved coordination of and execution of the services and the framework, in order to produce comprehensive intelligence regarding the customer and its needs.

Status of Medical College Libraries in Hyderabad Karnataka region

Under the Indian Medical Council, Delhi the medical schools are being established. The Indian Medical Council improves and reviews all schools, recommends how teachers are to be strengthened, differs their infrastructure, services, etc. In Hyderabad Karnataka there are 6 divisions such as Bidar, Gulbarga, Yadgir, Raichur, Bellary and Koppel. There are three separate divisions.

In this area there are 53 medical colleges and libraries. The state government has seventeen medical schools, two medical colleges and libraries and the federal government only has one medical college. The majority of them are under private entities about 22 medical colleges. In the first year-round of the Hyderabad Karnataka district, 4,910 students are admitted every year to allopathic medical colleges. There are 14738 students of all undergraduates, 3775, 679 professors, and 19184 students in all medical libraries. The corresponding local universities and Health University comprise both medical universities. The Indian Medical Council observes every year that the facilities given to trained employees and the students are updated and strengthened. Library is medical university's core soul. So, the medical library has to be revamped to accommodate students.

Status of Medical College and Libraries in Hyderabad Karnataka: Division & District wise

Table 1: Medical college libraries in Hyderabad Karnataka region

Sr. No.	District	No. of medical college libraries
1	Bidar	2
2	Gulbarga	2
3	Raichur	2
4	Bellary	1
	Total	7

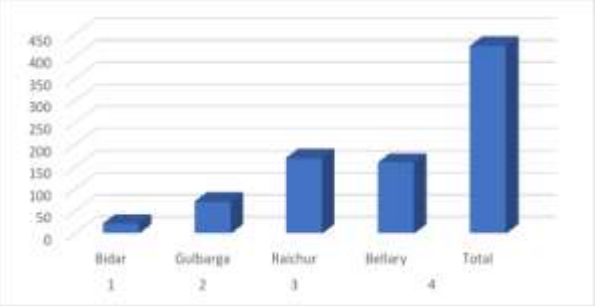

Figure 2: Medical college libraries in Hyderabad Karnataka region

Observation:

In 5 districts, the Hyderabad Karnataka department is comprised of 3 medical colleges and libraries in Raichur and in its suburbs, whereas in Bidar, Gulbarga, Bellary only one

medical library is located. A total of 07 libraries are established in this division.

Ranking of Medical College by Percentage wise in Hyderabad Karnataka region

Table 2: Ranking of Medical College

Sr. No.	District	No. of medical college
1	Bidar	3
2	Gulbarga	14
3	Raichur	3
4	Bellary	2
	Total	22

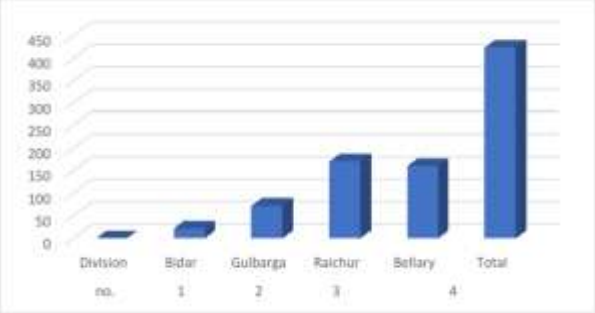

Figure 3: Division wise Percentage of Medical College in Hyderabad Karnataka region

According to the research report, the district, Bellary (11.90%) Bidar (14.28%), Raichur (16.67%) and Gulbarga (21.43%) is identified in medical college.

Status of Medical Libraries users in Hyderabad Karnataka region: Division& Districts wise

Table 3: percentage of Library User

Sr. No.	Division	U. G	P G	Researcher	Total library user	Percentage
1	Bidar	900	180	22	1102	15.77
2	Gulbarga	1800	500	72	2372	22.68
3	Raichur	2145	650	170	2965	27.67
4	Bellary	3180	850	160	4190	33.88
	Total	8,025	2,180	424	10,629	100

Total Library User in Hyderabad Karnataka region

According to a poll, overall user of the library in BIDAR District 1102, District 2372, District 2785, District, District 4190 and District 5770 of Gulbarga.

Figure 4: Library User in Hyderabad Karnataka region

Total Undergraduate Medical College Library User in Hyderabad Karnataka region

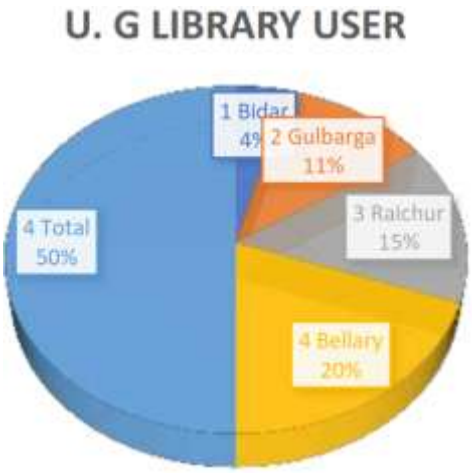

Figure 5: Undergraduate Medical College Library User

In Bidar section (900), Gulbarga District (1800), Raichur District (2145), and Bellary (3180), the complete study survey is conducted by graduate student library users.

Total Post-graduate Medical College Library User in Hyderabad Karnataka region

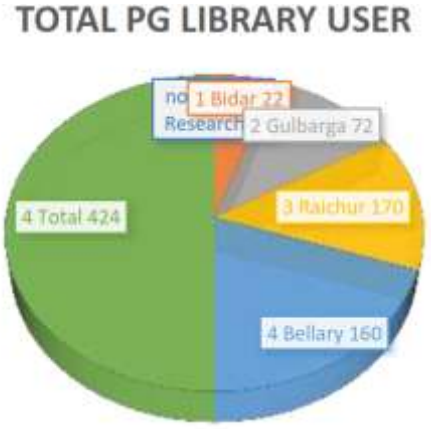

Figure 6: Post-graduate Medical College Library User

As per a study survey, Bidar 180, Gulbarga District 500, Raichur District 650 and Bellary 850 are consumers of the postgraduate complete library.

Total Research Library User in Hyderabad Karnataka region

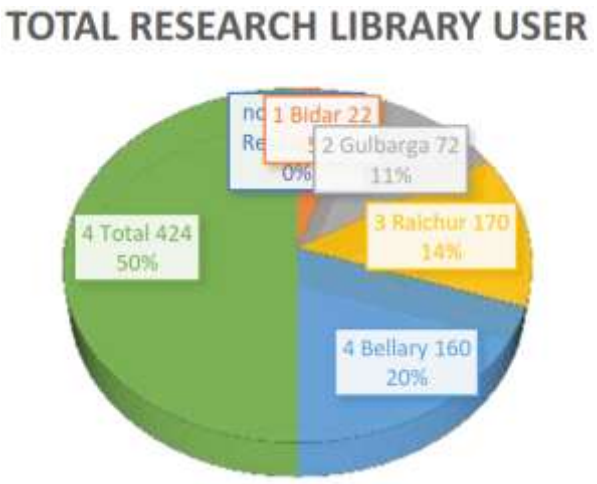

Figure 7: Research Library User

Complete user of the research library according to the inquiry survey in Bidar District 22, Gulbarga District 72, Raichur District 170, and Bellary 160.

CONCLUSION

After the state has been reorganized, significant advances in medical education in Karnataka led to the fast increase in the number of professional and public libraries. As the libraries are regarded part of the college education system, this substantial increase in the number of university libraries has a certain effect on the development of college libraries. The next article deals thus with the Hyderabad Karnataka medical college libraries, and its structure and management.

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Corresponding Author

Shaik Nabi*

Research Scholar, Mewar University, Rajasthan, India