



KIRPAL SAGAR CHARITABLE HOSPITAL



EN-2020

DIRECTLY ON SITE

Jasbir Kaur's Grandmother

In a village nearby the Kirpal Sagar Charitable Hospital. There, on the poster on the tree, it was clearly written: a medical camp was to take place here tomorrow, right next to the school.

The text promised that those in need would be examined and treated free of charge. She had to tell her grandmother, right after school.

Jasbir Kaur remembered that grandmother had not been able to get up for a few days. She felt so weak this morning and was coughing badly. To have a doctor come, they could not afford it. Father worked as a helper in the fields, mother took care of her three brothers and two sisters. She herself was the eldest, had just turned 9 and was in the fourth grade.

A medical camp, here in the village, what a blessing....





India's health care - just a question of income?

From a Central European perspective, the situation of the girl Jasbir Kaur may feel somewhat unreal, after all, we are amply provided for with easily accessible hospitals, ambulance services, doctors' surgeries and pharmacies. Our social security systems provide all-round care for the vast majority.

What is it like in India? The Indian social safety net is very rough. Only about 5% of employees are covered by social security, everything else is left to individual initiative. Similar to the UK, there is basic state medical care, but in India only in very small numbers and often of dubious quality. The gaps are filled by commercial hospitals. Overall, treatment costs are somewhat lower than in Germany, with a wage level of about 5% of what is available to us. Social welfare is hardly unknown.

Those in need thus hardly have access to health care in practice and are dependent on the help of non-profit organisations.



DIRECTLY ON SITE



Dispensary



Office hours



shortly before eye surgery

Grandmother was breathing heavily in the morning and was so weak that she could not come to the camp herself. Jasbir Kaur was supposed to give a message to the doctors and ask them if they could not look after her.

After the camp, two men came by. Grandmother was examined, had to be taken to the hospital. The ambulance took her right away. At the hospital she was given medication and after a few days she was feeling much better. In the meantime she was back home and told her granddaughter how it was.

Something was wrong with her heart, she understood, but with medication it would be fine again. And there should also be help for the eyes. She could hardly believe it, after all, her eyes had been getting worse and worse for ten years. By now she was almost blind.

Cataract was written on the note that the granddaughter read to her. They only needed a confirmation from the mayor that she was poor, then it would cost nothing. Next month she would come back for the operation. Until then, she would have to go for another check-up because of the heart failure.

**Names changed, retold*



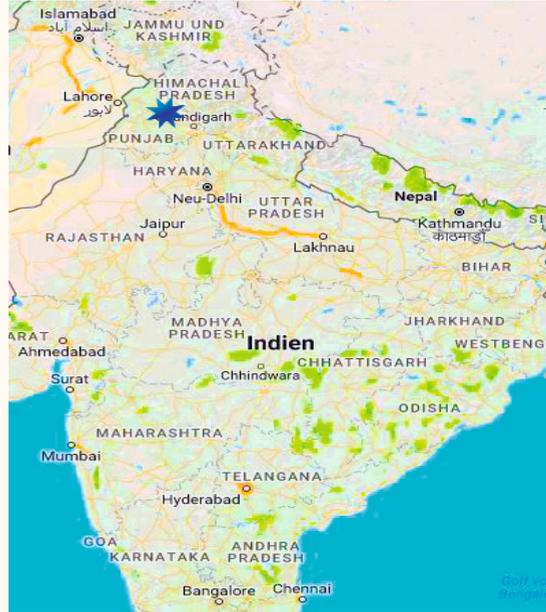
The Kirpal Sagar Hospital - a charitable Institution

The Charitable Hospital is located in Kirpal Sagar, a village in the northwest of India. It is located in the state of Punjab, in the flat countryside amidst small villages. Rahon, the nearest small town, is barely 10 kilometres away, Nawanshar, the capital of the district S.B.S. Nagar, about 25 kilometres.

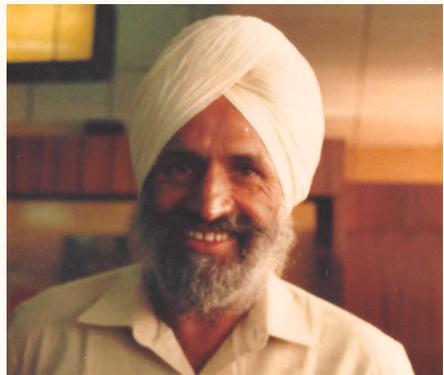
The term hospital is much broader in India than in Europe and simply describe the fact that a practitioner - usually a doctor - is available in one place. The spectrum ranges from a one-room practice that is open for a few hours once a week to an ultra-modern large hospital with 2.000 beds.

The Kirpal Sagar Hospital is a charitable, non-profit institution. Its main focus is the treatment of needy patients, mainly in the outpatient sector. It is available around the clock seven days a week for emergencies.

It is run by Unity of Man, a cultural, charitable and spiritual organisation under Indian law, which was founded in 1979 by the physician Dr. Harbhajan Singh.



Map of India, blue star: Kirpal Sagar



Dr. Harbhajan Singh

BACKGROUND



Western support, 1993



Academy, German exchange students, 2016



Seminar for student teachers, 2017

The **hospital** is an integral part of Kirpal Sagar, a place open to all people, irrespective of nationality, skin colour, social background, religion or other external characteristics. Just from the beginning, volunteers from far and near could contribute, be it as helpers in digging and concreting, in planning and organising, in repairing, maintaining and renovating, meeting other people, ways of thinking and cultures.

Kirpal Sagar today includes among others:

Schools: about 500 students attend the Kirpal Sagar Academy, a state-recognised, English-medium public school cum boarding school, which leads to university entrance qualification. Students from needy families receive a scholarship from the sponsor.

In neighbouring village Daryapur, the K.H. Primary School provides education for about 400 children from the surrounding area.

Training: Since 2007, teachers for grades 6 to 10 have been trained in the College of Education. In Kirpal Sagar there are also many workshops (wood, metal, stone, for the maintenance of vehicles, electrical and sanitary installations). In addition, adult education courses are offered.



Kirpal Sagar Charitable Hospital - the beginning...

In 1982, the first building was erected in Kirpal Sagar, in which a room was immediately set up for the care of the sick.

Since then, poor and needy people have received free medical help here. The treatment was on the shoulders of Dr. Harbhajan Singh, who had already helped many needy people selflessly in his own practice. One or two nurses assisted him.

At medical camps, they were assisted from other hospitals and by volunteers. Dr. Harbhajan Singh willingly took some of us foreigners along to the camps to help. So we could see everything with our own eyes.

It was impressive how he reconciled conventional, naturopathic and homeopathic methods and medicines. Normally, these directions are strictly separated and perceived as hardly compatible. For him, they were simply different tools. Early on, he was sent donations of medicines that he could put to good use on the ground. He left no stone unturned when it came to helping those in need.



Multifunctional building, at ground level the hospital, 1986



Treatment room, Dr. Harbhajan Singh, 1986



Medical Camp

BACKGROUND



Sarovar



Fathers' Home



Aligning a square bar, 1985

Sarovar: in the midst of the other facilities is an artificial pond with a building in the middle that resembles a ship. Its roof clearly bears the symbols of unity, as an indication of the same common goal. Four rooms are integrated into the surrounding wall of the pond, where the Bible, Koran, Vedas and Guru Granth Sahib, the holy scripture of the Sikhs, find their place. Those who wish can also attend religious services there.

Guest House: A guest house was built in 1994 to accommodate western visitors. The cuisine is traditional Indian vegetarian, mildly spiced.

Old people's home: India is changing - also in terms of social structures such as the extended family. In the old people's home, support in the household and care for health nevertheless help people to lead as independent a life as possible.

Agriculture: Here, crops are grown mainly for subsistence. Circular economy concepts protect the soil and groundwater. Many trees have been planted in the meantime. They slow down the wind, hold soil and moisture.

Service to others: the focus is on helping people to help themselves. It promotes personal responsibility and initiative.



Conventional medicine and alternative methods

Over the years, close contact developed with manufacturers of homeopathic medicines in Germany, who provided free medicine for those in need. For its part, the hospital reported on the treatment of diseases that were almost extinct in Europe, thus contributing to the expansion of the wealth of experience.

From this commitment, the field of homeopathy and naturopathy developed, with a focus on the treatment of chronic diseases. Occupational health and safety is almost unknown among the rural population. Various poisons lead to nerve damage over the years, to complex disturbances in the hormone balance as well as to malignant neoplasms. A characteristic of the department was the open discourse with conventional medicine, whose diagnostic possibilities were integrated into the treatment concepts, also an attractive model for European practitioners.

While the department for „normal medicine“ was initially very small and mainly covered emergency care and the treatment of acute infections, it was continuously expanded and extended from 1995 onwards - in terms of staff, technology and also space.



Check-up, P.K. Chopra



Alternative medical treatment



Exchange of experience among practitioners

BACKGROUND

*He who serves others selflessly
develops himself
at the same time*

Dr. Harbhajan Singh



*Be yourself the change,
that you wish for this world.*

Mahatma Gandhi

...a few words about the editor

KS-plus e.V. supports the charitable institutions and activities of Kirpal Sagar, be it through assistance on site, planning and logistical support, expert advice, donations and the provision of information material.

...and to the sponsor of Kirpal Sagar

Dr. Harbhajan Singh established Unity of Man (registered) in 1979 as a cultural, charitable and spiritual institution under Indian law. The extended Governing Body and the Board of Kirpal Sagar are international. Unity of Man as a movement was founded by Kirpal Singh already in 1974.

The institutions of Kirpal Sagar offer practical possibilities of exchange, of getting to know and appreciate each other. A core concern is to promote a universal view and to overcome barriers of racism, religious narrow-mindedness and nationalism: we are human beings first, and only then come the various external characteristics. This perspective adds other interesting aspects to the hospital and its activities.



Medical Camps

In addition to hospital consultations, mobile teams travel to underserved areas and carry out examinations and simple treatments there on a fixed date, so-called medical camps. They are similar to serial examinations that were carried out in Europe after the Second World War. At that time, tuberculosis patients were searched for in order to limit the further spread of the disease through targeted treatment.

Many people come in a short time, often around 500 in 3 to 4 hours, the majority with harmless complaints. Examinations are usually free of charge or available for a minimal contribution., medical explanations often the most valuable gift.

Commercial hospitals sometimes use medical camps to bring patients to the respective hospital for further (chargeable) treatment.

On the other hand, there are also many projects that deliberately do not want to benefit financially and have dedicated themselves to caring for the needy. The Charitable Hospital is one of them. This was the heart's desire of Kirpal Singh, Dr. Harbhajan Singh and Surinder Kaur.

What was the significance of these three persons for the hospital?



Kirpal Sagar, posts guiding to the Hospital



Medical Camp, discussion of the findings



Medical Camp

BACKGROUND



Kirpal Singh, Indira Gandhi, 1974



Dr. Harbhajan Singh, Surinder Kaur



Commissioning of the mobile clinic, 2012

Initiator, Founder, Pioneer

Helping the poor and needy has always been a concern of Kirpal Singh. Already in his younger years he spent many hours in hospitals and was actively involved in the great plague and flu epidemics. For him it was self-evident that lived spirituality should be at the service of people, no matter what their religious conviction, social background or status would be.

Kirpal Singh was a universally respected personality. Among other things, he was President of the World Communion of Religions for 14 years. He had the vision of a place open to all people. Dr. Harbhajan Singh and his wife Surinder Kaur worked for this all their lives. In the meantime, the vision has become reality, today's Kirpal Sagar. For charitable activities, Surinder Kaur specially founded a non-profit Welfare Society in 2011 with a focus on promoting girls and women as well as health. The first joint project was the mobile clinic in 2012.



Treatment and prevention in view

Hospital outpatient clinics like the one at Charitable Hospital are like fixed camps with extra equipment. We Europeans always wondered how to filter out essential diseases in a few minutes and also inform people about how to avoid damage to their health. Here, as a practitioner, you need above all „the diagnostic eye“, in other words, a lot of experience and practice.

It is important to inform patients about painkillers, which often lead to irreparable kidney damage and early death when used over a long period of time. Another focus is on skin diseases, mostly caused by unprotected use of chemicals. Providing patients with comprehensible information helps to prevent further progression and consequential damage.

From Africa, most people remember images of vaccinations in camps. In India, this is reserved for the public health system, which conducts its own vaccination campaigns.

Medical camps run by non-profit organisations are held in close coordination with the local health authorities in places that on the one hand accommodate many needy people and on the other hand are underserved in terms of health.



Opening of a major camp, 2012



Information event after the camp, 2008

*Health is not everything,
but without health
everything is nothing.*

Arthur Schopenhauer

Kirpal Sagar Charitable Hospital: it started with two rooms



Multifunctional: formerly hospital, today boarding school



New hospital, 1995, nowadays the bed wing



An emergency, now the clock is ticking...

While two rooms in a multi-functional building were sufficient in the beginning, the requirements grew in the course of time. More space was needed.

Protection against flooding during the rainy season became more important with the increased use of electronic equipment, as did the air-conditioning of individual sections later on. The hospital changed rooms several times, and finally a new building was needed.

In India, old houses are rarely demolished, but transferred to another use. The first building now houses a part of the boarding school. Since the mid-1980s, cataract operations had been performed there by teams of the health authorities at eye camps. The method used then was technically very simple, in use since the Middle Ages.

With doctors returning to India from abroad, a more modern procedure, the removal of the clouded tissue followed by the insertion of an artificial lens, spread to this region as well. Not least, this kind of operation - inserting artificial parts in a poorly vasculated organ - also increased the hygienic requirements for the premises.



Kirpal Sagar Charitable Hospital: Eye surgery in the mirror of time



First row: examination and classic staring 1994

Second row: Check-up camp with mobile clinic 2013, eye examination 2008

Third row: Eye surgery with the microscope 2008, control examination 2013

First steps towards the new hospital



Laboratory, bed wing



In the consulting room, bed wing



Operating theatre extension, bed wing, 2007

A proper operating theatre including an operating microscope could not be set up in the old building. In 1991, therefore, planning began for a new building adapted to the requirements of a hospital (see also sketch on page 20), which was to be built in several sections.

In 1995, its first part, the bed wing built in the traditional style, was ceremonially opened. The ground floor housed at that time:

- Outpatient department
- 15 in-patient beds
- Pharmacy room
- Laboratory for basic examinations
- Examination rooms for two doctors
- Emergency room for emergencies.

An operating theatre was to be built on the first floor of the bed wing in a further construction phase.

At the end of 2007, the operating area with an operating theatre, changing rooms, recovery room and attached instrument sterilisation could finally be put into operation on the first floor of the bed wing. The first „real operation“ was performed. Some of our members were closely involved in the planning, execution and furnishing at that time.

Parallel to the bed wing, a second building was erected in a modern post-and-beam construction.



Functional wing, mobile clinic

In 2012, the time had come. The ground floor of the functional wing was ready for use and could be handed over. Since then, the 800-square-metre facility has housed

- extended laboratory
- Radiology with X-ray equipment
- Emergency room with ECG, oxygen, ventilation facilities
- spacious waiting area
- consulting and examination rooms
- on-call rooms
- dialysis
- ultrasound.

The staff was increased accordingly, and the previous general medicine was expanded in terms of specialisation. Since then, a specialist in cardiology and internal medicine has headed the department. The nephrology department is also supported by consultants.

In the same year, a special vehicle, the mobile clinic, was put into service. It is like a doctor's office on wheels, with an examination area, laboratory and pharmacy, and makes it much easier to hold medical camps.

In 2015, classic medical camps were temporarily no longer legally possible. In the meantime, patients were picked up at collection points by ambulances and taken to hospital.



Dialysis shunt unit, operating theatre in the bed wing, 2012



Opening of functional wing, Minister of Health, 2012



Mobile clinic, commissioning 2012

General surgery, means testing



Since 2014, more general surgery operations have been performed, especially hernias as well as gallstones treated.

Short-term changes in the legal framework repeatedly required reorganisation and adjustment. For example, after a break of several years, ultrasound examinations can now be performed at the hospital again. The state of Punjab had bound these nationwide to hardly fulfilable conditions for the protection of unborn girls.

For more than 30 years, cataracts had been operated on here. Since 2016, an ophthalmologist has been required for ophthalmological operations and is permanently available. The hospital is working hard on this.

The neediness of the patients is checked by a committee on the basis of official documents. In addition, the majority of patients are also visited at home. If the conditions are met, exemption cards are issued for a limited period of time. At present, almost 1,000 needy patients have such an exemption card.

The hospital's out-patient department also caters to the schools and the staff of Kirpal Sagar. Their contribution finances the basic operation.



Waiting area, 2017



Admission ward, functional wing, 2017



The hospital, currently in 2020

The extended functional wing now comprises on the ground floor:

- patient admission
- Outpatient clinic and emergency room
- X-ray and ultrasound
- pharmacy
- eight beds for monitoring
- dialysis and laboratory.

The dialysis department provides a total of three treatment places. Two of them are reserved for so-called infect patients. Infectious dialysis units are rare elsewhere, Here they are available.

The bed wing was also extended on the ground floor:

- 32 beds (toilet in each room)
- Physiotherapy room.

On the first floor, the operating theatre with recovery room and instrument preparation as well as sterilisation is still in operation.

Internal medicine has three doctors, the radiologist comes three times a week. The general surgeon is at the hospital two days a week, additionally when needed. There are 35 nursing staff, 10 are employed in the laboratory, X-ray and dialysis, and four in administration and IT.

In 2020, 20,000 patients were treated, more than 17,000 of them outpatients.

Voices about the hospital:

Four years ago I started my training as a nurse. I was inspired by Kirpal Sagar Hospital, by Dr. Harbhajan Singh's work, by Kirpal Singh's selfless service.

In the meantime I have completed my training and I am caring for dying people. So I am even more aware of our mortality and fragility than before. It is very important that places like Kirpal Sagar Hospital exist.

I hope that in the near future I can help there again myself. The world desperately needs such places. My best wishes for the project!

Danijela G., nurse, Slovenia



Access to the emergency room

Vision for the next years



Functional wing left (F), bed wing right (B)



Bed wing front (B), functional wing rear (F)

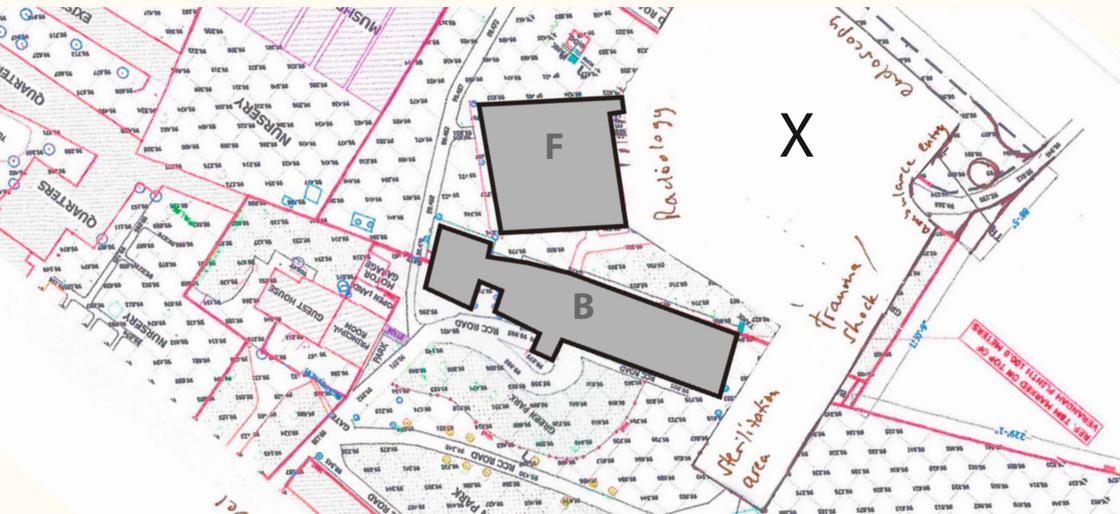
The Indian monsoon, the summer heat and occasional sandstorms affect the buildings more than in our latitudes, so that maintenance measures are continuously necessary.

Parallel to the renovation in the **bed wing** (see photo: **B**), the further development of the hospital is being driven forward. In 2019 the urgently needed dentist moved into the ground floor, and the physiotherapy department is to get new rooms.

In the medium term, the following is planned in the bed wing:

- surgical ophthalmology department
- gynaecological-obstetrics department
- bed department
- general surgery department, to be expanded into a main department.
- C-Arm X-Ray machine for the OT

The main focus of the construction work is on the **functional wing** (see photo: **F**).





A part of the upper floor (red dyed roof), which will house the recovery room, is already in place. Next to it, two operating theatres and the instrument preparation including sterilisation will be built in the future.

Currently, infrastructure data (electricity, fresh water and waste water) are being collected and plans for construction and technology are being drawn up.

In the longer term, the functional wing will be extended to two storeys in two further construction phases (photo: area outlined in black, columns with foundations already in place). The ground floor will later contain the diagnostic department including the X-ray department, while the upper floor will house the operating theatres, the intensive care and monitoring ward as well as the delivery room.

In the long term, further parts of the building are planned (see sketch: white area, right of F, marked with an X).

Financially, ideally and practically, there are many ways to help. The project lives from the enthusiasm of its staff and supporters. Like a mosaic, many small parts make up a large whole.

*First do what is necessary,
then the possible,
and suddenly you achieve
the impossible
Francis of Assisi*

Voices about the hospital:

I have been coming to Kirpal Sagar since 1989. Dr. Harbhajan Singh, who founded the hospital, took me to camps. He gave an example of holistic treatment. Moreover, he had great knowledge of human nature, was empathetic and simply knew exactly what the sick person really needed. As a doctor, he could have earned a lot of money elsewhere. Instead, he was there for the poor. And all in such a natural, humble way. In 1991, he started planning a large hospital with a medical college, where we could also get involved. I am extremely pleased that his practical example should continue to be felt and demonstrated through the daily practice of the hospital.

Walter S., MD, Germany

It is said „no one is useless in this world who lightens another’s burden“. The purpose of life is not to enjoy it to the fullest, but to be helpful, honourable and full of compassion. Those in need receive free treatment and medicines here at the Kirpal Sagar Charitable Hospital.

Karamjit Singh, Board UoM India

OUTLOOK



And that is now both a task
and a challenge.

Just as a strong tree does not grow overnight, so it is with a hospital, especially in the flat countryside, especially if it is to be charitable and non-profit. Can medical aid really be a means of making money without serious ethical conflicts?

Most doctors still feel obliged to the patient first and foremost, which is no easy task in today's times of profit maximisation and rationalisation. There are also hardly any patients who want to feel that they are a lucrative source of income. Medicine is actually a matter of trust. But what to do?

A first step is to set goals. The Kirpal Sagar Charitable Hospital has a clear concept here: to give back to humanity in medicine the high value it has had for thousands of years and which seems to move more and more into the background in our time.

Dr. Harbhajan Singh was an inspiration and practical example for this.

The Kirpal Sagar Charitable Hospital is planned to have 500 beds and to be the teaching centre of a medical college.

*The highest reward for our efforts is not what we get in return,
is not what we get for it, but what we become through it.*

John Ruskin

*Every human being
is a member of the one family
with equal rights and privileges.*

*Each of us will thus develop appreciation, respect
and understanding for the other,
and in this way the gross injustices of life
will be eliminated.*

*In reality, unity already exists:
we are one as human beings,
born in the same way,
but we have forgotten this oneness.*

We only need to reawaken to this knowledge.

Kirpal Singh

Site plan Kirpal Sagar



Kirpal Sagar, from bottom right: GH = Guest House; B = Library; S = Sarovar; AC = Academy and College; then to the left boarding school and residential building; KH = hospital; bottom left AH = old people's home



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