CHAPTER-7

ROLE OF NON GOVERNMENT ORGANISATIONS IN PROVIDING LIBRARY SERVICES TO THE HOSPITALISED PATIENTS

7.1 Introduction:

With the existence of innumerable sociocultural, economic, educational, political and religious problems, the development of backward areas and people occupies a significant place in our efforts towards planned and directed social change. The government alone cannot solve the multi-dimensional problems which the community is faced with. The essential thing in any meaningful attempt in the direction of development is to ensure economic growth with equitable and disruptive social justice. The real and everlasting development is not what is given to people from outside but it very much depends upon the willing co-operation and whole-hearted participation of the people in such endeavour routed through social action. The dawn of independence has opened a watershed from the point of view of role of voluntary organisations in realising the aspirations of the community.

Therefore, in the field of social welfare, social service and development of people and to solve the community problems, Non-Government Organisations (NGOs) are increasingly gaining attention and prominence and looked upon as alternative agencies in promoting awareness, change and development in the society. Under the broad umbrella term, “Voluntary Action”, we find synonymous terms such as “Non-Government Organisations”, “Voluntary Organisations”, “Grossroots Organisations Action Groups” etc. However, one cannot deny the role of the state completely. If strong vibrant and lively civil society is the foundation of modern open democratic polity, NGOs are the very life force for the civil society. One cannot exist without the
other. In formal structure and functioning and closeness to the people at grassroot are their distinctive features. In other words, NGOs approach to development is based on the important principle of people’s participation. In contrast to the top down approach of the government, their approach to the development is based on people’s expectations and analysis of priorities, issues and needs. The approach adopted by the NGOs treats people not as objects but as subjects who possess cultural knowledge as well as abilities to take their own independent decisions, which can be implemented in bringing about change in the desired direction.

7.2 Concept of Social Welfare:

NGOs are mainly concerned with social welfare, social services and social work. It is necessary to study the term social welfare before the growth and development of voluntary organisations. The concept and term “Social Welfare” in the sense of a scientific programme has developed in connection with social problems of our industrial society. Poverty, sickness, suffering and social disorganisation have existed throughout the history of mankind, but the industrial society of 19th and 20th century had to face many social problems that the older human institutions-family, neighborhood, church and local community could no longer adequately meet them.

“Social Welfare” is organised system of social services and institutions, designed to aid individuals and groups to attain satisfying standards of life and health, personal and social relationship which permits them to develop their full capacities and to promote their well-being in harmony with the needs of their families and the community. “Social Work” is a professional service, based upon scientific knowledge and skills in human relations which assists individuals alone or in groups to obtain social and personal satisfaction and independence.\(^1\) It is usually performed by a social agency or a related

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organisation. The term “Social Welfare” has broader implication than professional “Social Work”. Finally the term “Social Service” is often used in a very general sense. Social Welfare are those organised activities that are primarily and directly concerned with the conservation, protection and improvement of human resources and include as social service, social assistance, social insurance, child welfare, corrections, mental hygiene, public health, education, recreation, labour protection and housing. The objective of social welfare is to secure for each human being the economic necessities, a decent standard of health and living conditions, equal opportunities with his fellow citizens and the highest possible degree of self-respect and freedom of thought and action without interfering with the same rights of others.

Although, social welfare covers a very broad areas of human activities and different people understand the term “Social Welfare” differently, yet according to the definition of the working group on social welfare for the Third Five Year Plan and accepted by the Planning Commission, Govt. of India, social welfare refers to services which are meant for the well-being of the weaker sections of the society, who-because of various handicaps-social, economic, physical etc., cannot make use of the services or are traditionally denied the use of social services. The weaker sections include women, children, handicapped, aged and infirm, Scheduled Castes, Scheduled Tribes, etc. Social welfare also includes a variety of services which help in the development of human material. Thus, “Social Welfare” includes both curative and preventive services. The term “Social Service” or “Social Welfare” are comparatively modern terms. The terms like ‘Charity’, ‘Philanthropy’ “Poor Relief”, “Social Reform”, etc. were in use in older times. Whereas mutual aid and good neighbourliness is the most important part of social service. It is still implicit in the notion of voluntary social service that some help shall be given by the privileged to the under-privileged.

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But it is also true that because of enormous nature of social problems in our society, which have been increasing at the faster rate, the state machinery can not by itself tackle all of them. Participation of people in organising themselves into voluntary efforts for identifying their needs, giving priority to their needs and mobilising resources for taking appropriate action, as what is highly desired for the social welfare of the community. It is for this purpose, the government is also seeking cooperation from voluntary organisations called NGOs in providing social services for the social welfare of the people.

7.3 Growth and Development of Voluntary Organisations in India:

Voluntary social work to the community is not a new thing for this country. Social work based on spirit of sympathy, charity and spiritual urge to help one’s fellow beings in distress, existed in different societies from the time immemorial. In every society, there are individuals and groups, who inspired by sanity of service of one’s fellow beings provided this service in their homely ways which are today known as “Social Welfare Services”. The form, content and method of service varied from society to society, depending upon its social needs, values and cultural patterns. History affords remarkable examples of selfless workers dedicated to the service of suffering humanity.

7.3.1 Social Work in Ancient and Medieval Period:

India has long and splendid tradition of social service by social workers. Social work in the form of mutual assistance, charity and philanthropy in India is an activity as in other parts of the civilised world, serving the needy and helping one’s fellow men have been virtues greatly valued in Indian Culture. The responsibility of society towards individuals in distress and the groups in need was shared by the rulers, the rich and also by the individual members of the community. According to M.S. Gore\(^3\), “in ancient and medieval periods, the

kings, merchants, land lords and various corporate organisations vied with one another, according to their means for helping the cause of religion. This took various forms, such as foundings, temples and monasteries, making endowments for their maintenance, construction of residences for the monks and making permanent deposits with appropriate guilds for the supply of food, clothes and other requisites of wandering ascetics or temples and monasteries”.

According to Bhagwad Gita, charity is valid, if it takes into account “Desh” (place), “Kal” (time) and “Patra” (recipient). The forms of charity were “Artha” (money), “Vidya” (education) and “Abhaya” (courage). Kautilaya has mentioned in his Arthashastra that the responsibility for the care of the poor, the aged, infirm, destitute etc. was that of the ruler. There is also a mention about the existence of workshop for the destitute persons. During king Ashoka, we hear of appointment of Gopas whose duties were similar to those of the social workers or voluntary organisations of today. The rulers and chiefs also provided free kitchens and work and shelter to the homeless. Promotion of people welfare was considered the highest duty of the state of those days. The joint family and the village panchayat system provided mechanism for the care and need of the aged, physically-handicapped, chronically-ailing and mentally-deficient persons.

The stories preserved in Jatakas provide some references to the ideals of social work. These sources relate to the period approximately 500 years before the birth of Christ. Those sources also indicate spirit of men and women to do good, work for the benefit of others. The expression “Danam” used in Rig Veda refers to the booty captured by the victor in tribal war. This booty belonged to the community as well and was usually distributed among all its members. In the course of time, “Danam” did not have merely social connotation, but it began to be considered as a personal duty or virtue.

The Hindu religion laid down emphasis on charity and religious institutions such as Temples, Maths, Dharamshalas etc. were the centers of
social service on a large scale. The best example of the contribution made by religious institutions is the great “Buddhist Stupa” at Sanchi near Bhopal. The Muslims who were dormant in India in the 13th and 14th centuries onwards were also inspired by the same spirit. This is evident by the payment of “Zakat” or poor tax by every Muslim which meant one fifth (20%) of one’s income for charitable purposes. The concerns of the Muslim Kings for their community is evident from the famous social reforms of Sher Shah Suri, Akbar and subsequent Mughal emperors.

The economic system was also governed by the customs, like the “Jaimani System” (Patron-Client relationship) which made it imperative for the “Patron” (mostly higher class people) to look after the interests of the “Clients” (mainly to the lower castes).

The above services were provided during this period spontaneously without making any social difference. The persons providing these services, except kings and emperors were not usually considered a separate category, since they belonged to the family, caste and community of the persons to whom services were rendered.

7.3.2 The British Period:

The beginning of change in the voluntary efforts from informal efforts by family and caste to the relatively formal and group efforts started with the advent of British rule in India. The change in the later years formed the basis of present day voluntary organisations. The consolidation of the British rule brought out for reaching socio-economic changes in the society. The villagers lost their relatively self-contained village life by becoming exposed to a bigger world. This resulted in weakening of many traditional institutions, thereby creating a situation wherein intervention from outside became necessary to supplement local interventions to meet the needs of the people.
The British Government policy of non-interference in the Socio-religious life of the people created opportunities of intervention to individuals and groups. Individuals providing these services included Christian missionaries, individual philanthropists & social reformers. The philanthropists and social reformers were drawn mostly from the elite sections of the Indian society (higher, middle class, urban based groups) mostly with the background of English education. The spirit of religion, secularism, rationalism and humanism often provided the impetus for their efforts. The missionaries were interested in evangelical work, but they were also motivated by the strong conviction that many social and religious reforms were necessary within the Hindu social structure itself. They attacked child marriage, polygamy, female infanticide and also worked for the abolition of “Sati” system.

The activities of the Christian missionaries mainly in the areas of health and education in remote villages and hilly areas and their approach to human problems evoked defensive reaction among the Hindus. This reaction along with the spread of English education, liberal, humanistic and rationalistic values coupled with the development of communication, motivated persons like Raja Ram Mohan Roy, Ishwar Chandra Vidyasagar, Kesab Chandra Sen, M.G. Ranade, Telang, Phule, Pandita Rambai, Annie Besant and many others, to take up the various social reforms issues.

Many of them formed group organisations or associations some of these were: Brahma Samaj (1828), Paramhansa Sabha (1849), Widow Marriage Association (1850), Arya Mahila Samaj (1868), Sarvajanik Sabha (1871), Prarthana Samaj (1872), Arya Samaj (1875), Theosophical Society, Indian National Congress (1885), Indian Social Conference (1887) and Rama Krishna Mission (1897). The individuals and groups connected with these groups and associations stressed for improving the conditions of women through spread of education and enactment of legislation for abolition of “Sati” permitting widow marriage, enhancing the age of marriage and improving the conditions of lower castes. Till the end of 19th century, voluntary service, however, remained the
domain of the volunteers and they started working through organised groups and agencies because of complexity of problems and change in situation.

7.3.3 All India Social Organisations:

With the death of Ranade in 1901, Chandavarkar became the secretary of the Indian Social Conference. The Conference declared the object of social reforms. Indian social reforms were transformed from Madras (Chennai) to Bombay (Mumbai). A Central Social Reform Association was formed, which was to coordinate activities, publish literature and strengthen the provincial and district associations. In 1904, Conference was attended by Muslims, Sikhs, Arya Samajis and Brahma Samajis, Theosophists, Buddhists and Rationalists from all over India. It was resolved in the Conference to form networks like public health, education, labour welfare and promotion of voluntary organisations. Relief and welfare programmes were launched at the time of natural calamities such as floods, famines, earthquakes etc. During the early 20th century i.e. 1905, the “Servant of India Society” was formed by G.K. Gokhle. It laid stress on social, economic, educational and depressed classes. The “Social Services League” was formed in 1911, in Mumbai (Bombay). There was a separate “Ladies Conference” with the annual session of “Indian Social Conference” since 1905. But in 1927, a separate organisation as “All Indian Women’s Conference” came into being and “Women’s Association of India” was formed. During this period, the Christian missionaries intensified their activities and brought into existence various welfare institutions based on Christian ideal of service, Social legislation also received some more attention of the government and voluntary organisations.

7.3.4 Gandhiji and Social Work:

Gandhiji in his political career, also showed a deep understanding of Indian social problems. Due to growing influence of Gandhiji in Congress and emergence of independent organisations like “All Indian Women’s
Conference”, “Depressed Classes Conference” and “Mission, National Council of Women”, etc. Gandhiji started his own programme of removal of untouchability, temperance and some constructive programmes. Gandhiji also started “Satyagraha”. He laid foundation of national organisation to solve specific problems e.g., “Harijan Sewak Sangh”, “All India Village Industries Association”, “Nai Talim Sangh”, etc.

However, the new social workers or voluntary organisations were reformers not for independence but in submission to Gandhiji’s leadership and they drew they strength from organisation and its funds and poetical agitation often affected the work of voluntary organisations and began to start their social work in fast way. This created courage in the heart of voluntary organisations.

7.3.5 Post Independence Period:

After independence, the government also realised the importance of voluntary organisations and encouraged it by various means. The First Five Year Plan gave thought to the cooperative venture between the government and voluntary organisations to work for the welfare of the masses. For this, the “Central Social Welfare Board” (CSWB) was set up in 1953. The main aim of CSWB was to assist the voluntary organisations in organising welfare programmes for women, children and physically handicapped. The members of the Board were drawn from voluntary agencies, central ministers dealing with social services and the two houses of the Union Parliament. One of its main functions was also to give financial assistance to the welfare voluntary organisations, in order to improve, expand and develop their programme to sponsor through voluntary organisations and four crores rupees (Rs. 4,00,00,000) were spent for welfare social programmes in this plan. In 1966, the “Central Institute of Training in Public Cooperation and Child Development” was formed. The objective of this organisation is to conduct research in the field of volunteering and providing training programmes for the
volunteers as well as paid professionals in voluntary agencies all over the country.

7.3.6 India as a Welfare State:

Many changes took place in the functions of the government when India was declared as Welfare State after independence. The government took up various social welfare activities in rural as well as urban areas. The central and state government set up Social Welfare Departments. The Central Social Welfare Board was constituted to assist voluntary organisations by sanctioning liberal grants. Many new organisations came up to avail these grants. The government also decided to take or involve voluntary agencies to improve conditions in rural areas with improved technology. The Council for Advancement of People’s Action and Rural Technology (CAPART) emerged in 1987 as a new agency with largest amount of funds to Voluntary Agencies. The amount of foreign funds received by various agencies i.e. Rs. 254 crores in 1984, Rs. 350 crores in 1986 and Rs. 500 crores in 1989. As a result, a new organisation known as Association of Voluntary Social Agencies and Workers (India) was formed in Delhi to revive the idea of “Lok Sewak Sangh” given by Mahatma Gandhi. Number of meetings, seminars and conferences of voluntary organisations were held from 1985-1993. In 1994, first All India Conference of Voluntary Social Agencies and Workers was organised in Delhi. The report of this committee was sent to the Planning Commission, Govt. of India and also to various ministers concerned. The Planning Commission gave sanction with some grant for organising four regional and one All India Conference during the next year. These were organised in Ghaziabad, Calcutta (Kolkata), Hyderabad and Bhopal, respectively, in 1995. The second All India Conference was held on March 20-21, 1995, in which 12 states participated. Besides panel discussion in eight broad fields, the “Agenda NGO India 2000” with fourteen items was adopted. These eight fields were (i) Child and Woman Welfare (ii) 

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Handicapped and Old citizens (iii) Social Defence (iv) Programmes for SC/ST (v) Slum Improvement (vi) Adult Education and Non Formal Education, (vii) Health and Family Welfare and (viii) Protection of Environment. In the Seventh Five Year Plan, greater stress has also been laid for the involvement of Voluntary organisations (NGOs) in the implementation of “Development Programmes”.

7.4 Voluntary Efforts in the Western Countries:

Although, there is complete Social Security and Social Assistance Programmes in the United States of America, Canada, Great Britain and other European countries and welfare services for the needy, destitute and the handicapped persons etc are being provided by the state, there are still certain areas where welfare activities are being provided by local community on voluntary basis.

7.4.1 United States:

The “Voluntary Community Organisation” has its main roots in the charity organisation movement. The need for the coordination of the work of charities and philanthropic societies had been recognised earlier, but its realisation became one of the objectives as the association for improvement of conditions of the poor which was founded in New York city in 1843. Charity organisation societies, whose development in this country began in 1877, recognised that their main goal was to coordinate the existing charities and relief societies to avoid over-lapping and duplication of services and to encourage cooperation between social agencies instead of rivalry and competition. To overcome these problems, Special Councils of Boards were established in charity organisation in 1882. These councils were composed of representatives of the major charities in the city. In 1908, Associated charities of Pittsburgh, organised a Community Welfare Council. Similar councils, usually called “Council of Social Agencies” were set up in Milwaukee in 1909,
in St. Louis in 1911, in Cincinnati and Cleveland in 1913 and so many others. In 1960, more than 700 Community Welfare Councils were members of the national federation, “United Community Funds and Councils”. The main goal was the coordination of social welfare activities and inter-agency cooperation between public and private social agencies. After that, many community social agencies and institutions were set up.

The vast and increasing number of relief societies, charitable institutions, so many other community social organisations in large cities led to continuous solicitation of donation and contributions from well-to-do citizens. Another element in the development of joint financing of social agencies was the “Charity Work Endorsement Committees”, which, at the turn of century, were sponsored by Chambers of Commerce and Commercial Associations. At last in Cleaveland, in 1913, the first “Community Chest”, as a special organisation for financing of social organisations, was founded under the title “Federation for Charity and Philanthropy”. In a few years, fifteen metropolitan cities introduced Community Chests. In 1960, about 2000 “Community Chests and United Funds” conducted fund raising campaign for health and social welfare agencies. The main objective of community is to provide the necessary funds for the operation of its members.

Social welfare agencies in the west plan for their programme in such a way that there is no chance of over-lapping. The areas which voluntary agencies covered are:

(i) Care centers Well Baby Clinic, etc;
(ii) Services for the orthopedically handicapped and physically handicapped such as blind, deaf and dumb; and
(iii) Services for the aged and infirm including “Day Centres”, “Homes for the Aged Infirmaries”; and
(iv) Neighbourhood or Community Centres.
The work in the field of Juvenile Delinquency, Social Defence, Mental Hygiene etc. is being done under state. Voluntary workers in the west do not render direct service to the beneficiaries but their position in the community, experience and knowledge is utilised in policy making. Fee is collected from beneficiaries and annual funds are given by Community Chest. Although welfare or community organisations are autonomous and do not seek assistance but state has some control through licensing. A license is required to maintain statutory standards.

7.4.2 Canada:

In Canada the work relating to education, training and rehabilitation of blind is being handled by Canadian National Institute for the Blind, a voluntary agency with seven divisional and 13 district branches across the country. The services organised by branches of the Canadian Institute include:

(i) Hobby-clubs for the adult blind;
(ii) Library services of talking and Braille books;
(iii) Job replacement for employer blind;
(iv) Training in self cadre, home teaching etc;
(v) Prevention of blindness (Eye Banks);
(vi) Residential facilities for aged and handicapped blind persons;
(vii) Training of pre school blind children and parents education;
(viii) Registration of blind persons; and
(ix) Concessional passes for buses and theatres.

The voluntary agencies in Canada are also running programme of rehabilitation of prisoners and handicapped persons. The rehabilitation of prisoners are handled by the John Howard Society (for men) and Elizabeth Fry Society (for women). These two societies work closely with prisoners through qualified workers in various branches by giving counseling services, arranging job placement training, financial assistance etc to the discharged prisoners. The
societies also work with parolees on behalf of the Parole Board. The provisional offices of the society get some lump sum grant from the government without any formal condition.

In Canada, all the Child Welfare Programmes except those relating to Juvenile delinquency under the statutory provisions, are run by voluntary agencies. The most important organisation in the field of child welfare is the "Children’s Aid Society" working all over the country. Voluntary agencies are also running special institutions for emotionally disturbed children or with special problems. The other programmes undertaken by voluntary agencies in Canada are family services, relief, medical care, services for migrants, community centers and homes for aged etc. The coordination work in the field of planning, public education, research etc. is done by National Council of Welfare.

Canada has statutory provisions for assisting private agencies. Municipal grants are available to voluntary agencies working for children, aged, physically-handicapped etc. There are number of voluntary agencies run by and financed by churches, some of them secretarial in nature. All such church-sponsored agencies get state assistance. Voluntary welfare work is financed by the Community Chest.

7.4.3 United Kingdom:

The concept of voluntary effort and contribution of voluntary organisation was recognised by the “Poor Law Commission” of 1909 and the members of the “Majority and the Minority Report”. It is mentioned in the “Minority Report” that there was nothing more disastrous than alms dispensed by well-meaning persons in the relief of distress. The utmost use under proper conditions be made of voluntary agencies and personal services of both men and women of goodwill also recommended by them. It was mentioned in the report of charitable trust, which was published in 1952, that state actions and
voluntary efforts were not antithesis to each other rather they sprang from the same roots, were framed to fulfill the same requirement and had the same motivating force behind actions crystallised and made universal. The cooperation between voluntary organisations and state agencies is one of the special features of British Public life.

There are major contributions of great deal in voluntary work for social welfare services by the churches of all denominations and other religious organisations, Roman Catholics Anglican, Salvation Army, Jewish Board of Guardians. The Moral Welfare Association, Marriage Guidance Council and Citizens Advice Bureau have also made contribution in social welfare work.\(^5\) The women’s voluntary services enlist the help of women for various jobs under the social welfare programmes and the National Council of Social Services coordinates social services. The Family Welfare Association gives case work services to the statutory authorities and to fulfill the non-material needs for friendship and encouragement for well-informed advice etc.\(^6\) There is a society named “The Friends of the Poor” which helps in teaching disabled ex-servicemen.

The voluntary organisations combine pioneering work with direct help given to individuals like “National Association for Mental Health” and “National Council for Unmarried, Mothers”. As a result of the Second World War, major voluntary organisations dealt with mental health, gathered themselves under the name of “National Association for Mental Health”.

In the United Kingdom, voluntary organisations have made great contribution in the health programmes. These are almost counted as official organisations and very frequently utilised by the statutory authorities through grant-in-aid. The national health services are being supplemented through the

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\(^5\) Bourdillon, A.F.C.

\(^6\) Mess, Henry A.
organisations like the Red Cross, the St. John’s Ambulance Brigade etc. Among the national level organisations like “National Association for the Prevention of Tuberculosis”, the “British Council for the Disabled”, “National Council for Maternity and Child Welfare”, “National Institute for the Blind and Deaf”. The medical and social service is provided by the voluntary organisations.

The voluntary organisations are also provided financial assistance for their activities. The “National Old People’s Welfare Committee” coordinates the work done for the social welfare of the aged. Similarly, according to the “Children’s Act”, homes run by voluntary agencies are also utilised with necessary financial assistance. The financial position of voluntary agencies in the U.K. differs from one agency to the other. It may be thus seen that the problems of finances of voluntary agencies in U.K. are similar to those of agencies in India. This is due to British influence in India.

7.5 Non-Government Organisations (NGOs):

Non-Government Organisations (NGOs) are called voluntary organisations or agencies. These organisations have the long history of active involvement in the promotion of human welfare and well being. Our literature is replete with examples where the tendency to help the poor, weak, old, sick, disabled, helpless, hungry and thirsty existed from ancient times. This tendency of helping others by an individual or a group of benevolent people has been considered a service to the God and a path to “Moksha” (Salvation). Religion and charity always co-existed in our set up. Lord Berveridge called them “a private enterprise for social progress”. NGOs came into existence spontaneously, voluntarily and without any compulsion or control to fulfill the particular needs of some groups of people. These agencies are flexible and

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7 Shenfield, B.E. 
8 Younghusband, Eileen L. 
possess the virtues of human service with dedication. Voluntary action is the soul of democracy as this medium secures the active involvement of the people from policy making to implementation of social services.

The private voluntary organisations are tax exempt non-profit organisations working in or intending to become engaged in international development activities. These organisations receive some portion of their annual revenue from the private sectors (demonstrating their private nature) and voluntary contributions of money, staff time, or in kind support from the general public (demonstrating their voluntary nature) and NGOs can not be separated from Civil Society.

A voluntary agency or organisation is an organisation that is administered by an autonomous board which holds meetings, collects funds for its support, chiefly from private sources and expends money whether with or without paid workers, in conducting a programme directed primarily to furthering the public welfare by providing services or education by advancing research for research or legislation or by a combination of these activities. In other words, a voluntary agency is a group of persons who have organised themselves as a legal corporate body to render social services or rural development through organised programmes. It is accountable to the community that it serves and from which it has been supported. It is controlled and administered by an association of citizens, rather than by the government, although primarily financed by contribution from the community.

Non-Government organisations include many groups and institutions that are entirely or largely independent of government and that have primarily humanitarian or cooperative rather than commercial objectives. They are private agencies in industrial countries that support international development indigenous groups organised regionally or nationally and member groups in villages. NGOs include charitable and religious associations that mobilise private funds for development, distribute food and family planning services and
promote community organisations. They also include independent cooperatives, community associations, water user societies, women’s groups and pastoral associations. Citizen groups that raise awareness and influence policy are also NGOs. NGO is an organisation that is flexible and democratic in its organisation and attempts to serve the people without profit for itself or people’s organisation working for and for assisting in the empowerment of economically and socially marginalised groups. NGO is Community Based Organisation (CBO), Non-Government Organisation (NGO), Non-Government Development Organisation (NGDO), Private Development Organisation (PDO), Public Service Organisation (PSO) and Voluntary Organisation (VO).

7.5.1 Characteristics of Non-Government Organisations:

(i) It is an organisation initiated and governed by its own members on democratic principles;

(ii) It has definite aims and objectives and programmes in fulfilling these objectives;

(iii) It has an administrative structure and duly constituted managing/executive committee;

(iv) It is registered under an appropriate Act to give a corporate status to a group of individuals, so that they get a legal personality and an individual liability may give place to group liability;

(v) It is known and accepted by the community in which it is formed;

(vi) It is the result of the voluntary efforts, which though motivated by different factors is spontaneous in nature; and

(vii) It plans and implements its own programme through its own voluntary and paid workers.

7.5.2 Types of Non Government Organisations:

The type of NGOs can be understood by their orientation and level of cooperation:
7.5.2.1 Types of NGOs by Orientation:

“Charitable Orientation” often involves a top down paternalistic effort with little participation by the “beneficiaries”. It includes NGOs with activities directed toward meeting the needs of the poor, distribution of food, clothing or medicine, provision of housing, transport, schools etc. Such NGOs may also undertake relief activities during a natural or man-made disaster.⁹

Service Orientation includes NGOs with activities such as the provision of health, family planning or education service in which the programme is designed by the NGO and people are expected to participate in its implementation and in receiving the service.

“Participatory Orientation” is characterised by self help projects where local people are involved, particularly in the implementation of projects by contributing cash, tools, land, materials, labour etc. In the classical community development project, participation begins with the need definition and continues into the planning and implementation stages. Cooperation often has a participatory orientation.

“Empowering Orientation” is where the aim is to help poor people develop a clear understanding of the social, political and economic factors affecting their lives and to strengthen their awareness of their own potential power to control their lives. Sometimes, these groups develop spontaneously around a problem or an issue, at other times outside workers from NGOs play a facilitating role in their development. In any case, there is maximum involvement of the people with NGOs acting as facilitators.

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⁹ Goel, S.L. and Kumar, R.  
7.5.2.2 Types of NGOs by Level of Operation:

City wide organisation include organisations such as the Rotary Club or Lions Club, Chambers of Commerce and Industry, Coalition of Business, ethnic or educational groups and associations of community organisations. Some exist for other purposes and become involved in helping the poor as one of many activities while others are created for the specific purpose of helping the poor. Community Based Organisations (CBOs) arise out of people’s own initiatives. These can include sports clubs, women’s organisations, neighborhood organisations, religious or educational organisations.

There are large variety of these organisations some supported by national NGOs or international NGOs or bilateral or international agencies and others independent of outside help. Some are devoted to rising the consciousness of the urban poor or helping them to understand their right in gaining access to needed services while others are involved in providing such services.

International NGOs range from secular agencies such as “Redda Barna” and “Save the Children Organisations”, “OXFAM”, “CARE”, “Ford Foundations” and “Rockfeller Foundations” to religiously motivated groups. Their activities vary from mainly funding local NGOs, institutions and projects, to implementing the project themselves. National NGOs include organisations such as “Red Cross”, “YMCA”, “YWCA”, professional organisations etc. Some of these have state branches and assist local NGOs.

7.5.3 Objectives of Non-Government Organisations:

The objectives of the NGOs are as under:

(i) Organising and operating social welfare programme;
(ii) Perceiving and publishing the changing needs of community;
(iii) Creating public opinion in favour of progressive social legislation;
(iv) Pioneering new services which statutory authorities are slow in recognising;
(v) Experimenting with new techniques in bringing about changes in traditional attitudes or in organising social services; and
(vi) Stimulating civil consciousness and public participation and enlisting voluntary assistance to improve state or voluntary social service.

7.5.4. Activities of Non-Government Organisations:

The activities of NGOs or social services in this country or other countries have a long history and have been playing important role in providing services to the underprivileged, destitute and the handicapped. Even today, in spite of government of our welfare state assuming increasing responsibilities in the field of social welfare, the number of NGOs or voluntary agencies and their activities have considerably increased because the government cannot undertake social welfare services with its limited resources. The following are the activities which are performed by NGOs towards community

7.5.4.1 Child Welfare Services:

According to the official definition, the broader concept of child welfare includes such services which are meant for the total development of the child from the point of view of physical, mental and social well-being. The NGOs have been doing work in a variety of areas related to child welfare like health, education, recreation, custodial care etc. There are two broad areas of child welfare- one is preventive i.e. relating to provisions of social services which is the responsibility of the government and second is curative- custodial care of the destitute or orphan children special service for the handicapped children etc. in which NGOs are playing a broad role and are primarily engaged.

NGOs are providing institutional services to socially-handicapped children. In the initial stages only the Christian Missionaries did some work in this field. In the pre-school work, voluntary organisations, have played an
important role. With the industrialisation and urbanisation, a large number of women have taken employment in industry, commercial firms and government offices. No doubts, “Bal Bhawans” have been set up by the government but the bulk of the work in the field of children’s recreation has been done by voluntary agencies. 26% of the NGOs are providing cultural and recreational facilities including libraries to children. Among these agencies which are working for children are “YMCA’s”, Balkon-Ki-Bari” and “Indian Council of Child Welfare” etc.10

7.5.4.2 Women Welfare Services:

In view of social conditions of women, most of the NGOs and social workers or reformers concentrated on abolition of Sati, widow remarriage, provisions of educational opportunities for women and institutionalisation of widows and destitute women. In fact, entire work before independence was done by voluntary organisations without any state assistance. With the industrialisation and urbanisation in India has enabled more educated women seeking employment and created a need for hostels with cheap and protected residential facilities. Voluntary agencies are running rescue homes for women. “Young Women Christian Association” (YWCA), the “All India Women Conference” and so many others are running 61 hostels, 1633 institutions are providing social and cultural activities and many socio-economic units are working for the women welfare services. Central Social Welfare Board also assists in the field by giving financial assistance to so many NGOs. There are 40% agencies, who are working for the welfare of women.

7.5.4.3 Services for the Aged and Infirm:

So far, work for the welfare of the aged and infirm was done by the voluntary agencies only, particularly by Christian Missionaries. The “Cheshire

Home Foundation” has set up homes for the aged and infirm at various places in the country. The “Friend in Need Society”, “Little Sisters of the Poor”, “David Sasoon Infirmary” and so many others also have done credible work to the services for the aged and infirm.

7.5.4.4 Services for the Handicapped:

Welfare services for the handicapped include blind, deaf, dumb, crippled and mentally retarded. Remarkable work has been done by NGOs in this regard. Even today, in terms of size of the programme, number of beneficiaries etc., contribution of voluntary agencies in this field has been much better. Out of 131 institutions, working for blind, 115 are running with the help of voluntary agencies. In addition to the government institutions, 40 institutions for deaf and dumb are run by voluntary agencies. In the welfare services for the crippled also NGOs are not lagging behind. Twenty two institutions are working for this. No doubt, the number of institutions are less but this is due to costly equipment which voluntary agencies can not afford. NGOs have done remarkable work for the crippled also.

7.5.4.5 Creating Sense of Responsibility:

NGOs create sense of responsibility among the people by doing work themselves. For example, if uncollected garbage, draws flies or drains become clogged and overflow or if dirty pathway becomes ankle deep mud sloughs in the rainy season. These things spread diseases among the people. Many voluntary agencies also do this work by themselves and create sense of responsibility. By these activities of NGOs, surroundings will be clean and diseases will not spread. This activity is also important.

7.5.4.6 Rectification of Planner’s Misconception:

Voluntary agencies rectify the planner’s misconception. It is very difficult for people to let their views be known individually and planners find it
difficult to appreciate their needs. People’s participation through voluntary agencies rectify planning errors by making it possible for clients to point out to planners, policy makers and administrators as to what will work and what will not. All these works are done by NGOs because they are nearer to people and know the problems of the community.

7.5.4.7 Channelise Human Resources:

It is very difficult to provide all the social services through the government. The voluntary agencies do this job by channeling human resources among the people. Voluntary agencies highlight the provision of primary health care. They trained the educated and willing workers in the art of elementary health care and health education. Such trained and motivated people also provide primary health care to people.

7.5.4.8 Effective Policy Formation:

NGOs present the real needs of the social welfare and development of the people to the various decision making bodies. They also interpret social welfare plans based on their contacts with bilateral and multi-lateral agencies. Information is the policy maker’s raw material, forming the basis of his diagnosis, strengthening his projections and permitting him to evaluate the programmes which have been planned. This activity of voluntary organisations is reliable, as it is based on the outcome of their intimate contacts with the population.

7.5.4.9 Advancing Social Legislation:

In a welfare state, social welfare levels are as essential as security laws. These come under the purview of social legislation. The social legislation need radical changes to cover all the people. The voluntary organisations are doing this job by mobilising public opinion in support of such legislation. This
activity of NGOs prepare the people to act as a pressure group to motivate the government to enact legislations for the welfare of masses.

7.5.4.10 Supplement the Efforts of Government:

This activity of NGO's helps the government to solve the problems of community, as the problems of development are so vast and stupendous that it is difficult to solve with the efforts of government. The voluntary organisations supplement the efforts of government and by doing this job, they have played remarkable role in promoting people’s welfare. This partnership or complementary relationship is helpful in social welfare services of the people.

7.5.4.11 Creating Positive Attitude Among the Beneficiaries:

NGOs create great understanding and positive attitude among the people towards new methods of social welfare by acting as mediator between the people. The voluntary organisations interpret the new techniques of the government. By doing this activity, practical shape is given to social policies of government bodies.

7.5.4.12 Perceiving and Publishing Developing Needs in Changing Society:

Voluntary agencies also play an active role in perceiving and publicising developing needs in the changing society. This highlights the policy makers for developing needs of the society.

7.5.4.13 Creation of Community Consciousness:

This activity of voluntary organisations by sponsoring and promoting of widest possible creation of community consciousness and voluntary action help in success of democratic method. This activity of voluntary organisations is also important towards democracy.
It is evident from the preceding pages that NGOs play an important role towards welfare of the community. They endeavour for making good living conditions of the neglected, the under privileged and the destitute people. NGOs are properly implementing government policies towards welfare of the people. But without proper implementation by NGO’s role at grass root level, the budgetary allocations, government grants and aids schemes will go down the drain. It is the NGOs who execute the various government policies and programmes and thus plan a remarkable role in achieving the socialist objectives of our constitution. It is because of NGOs we see a more civilised society.

7.6 Role of NGOs in Providing Library Services to the Hospitalised Patients:

NGOs are playing important role towards social welfare of the people. Hospitalised patients are also part of the society. Therefore, there is dire need of services of the voluntary organisations. The role of NGOs can be more beneficial towards speedy recovery of the hospitalised patients. These agencies can prove of great value to visually and physically handicapped patient readers. The inability of many patients to handle the necessary equipment by themselves is in fact, one of the main obstacles to use the individual playback machines. Just as librarians differ as to the extent to which non-professional volunteers should be scheduled for the ward service, there is also a variation in opinion on the advisability of their serving in reading aloud to the hospitalised patients, although there is little question as to the value of a live reader in certain situations, such as the recently blinded who have not become accustomed to talking books or the blind child who can not read Braille. The volunteer reader who recognises that it is not desirable for the blind patient to become too dependent on the outside help, can have the way to later acceptance and use of such aids as talking books and Braille.


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While acquaintance with resources and activities of all the volunteer groups of NGOs and professional associations which concern themselves with the problems of the handicapped is important to librarian, it will be particularly useful to be aware as those in the field of visual and physically handicapped patients. These NGOs can concern themselves directly not only with increased effectiveness of the hospitalised patients, but also with the process of reading and dissemination of knowledge. Role of NGOs to assist the admitted patients in various wards of hospitals can be as follows:

7.6.1 Pediatric Ward:

The NGOs can be of great help to the hospitalised patients of all ages in the Pediatric WARD by story telling as they would like to hear good and interesting stories. The stories should be selected according to their tastes and needs and should fit the patient groups. The age and interest should alone not be considered into account but also sex, illness and the handicaps of the patients in the Pediatric Ward.

7.6.2 Medical Ward:

The hospitalised patients who are admitted in the Medical wards have chronic diseases and have to stay for long time for their ailments. Some time they are anxious and sometime bright. Due to long illness, they remain nervous. NGOs can make great contribution by visiting personally and can encourage to ask for any book. These agencies can create eagerness for demanding reading materials. They can collect the requests and sent to Public Library or Central State Library and deliver the books the same day or the next day. The hospitalised patients will be thankful to the NGOs by getting books or other type of reading materials and will demand more books. There is, however, no doubt that patients who will enjoy reading and find it a help during their admission in the ward. By this, patient’s idle time will be passed
easily and will get relief from the tension of their diseases and there will be speedy recovery of the patients.

7.6.3 Psychiatric Ward:

Psychiatric patients admitted in the hospitals are in great need of voluntary services as these patients are related to their personal problems, tension, anxiety etc. They cannot tell their family members and generally remain silent. But NGOs services to the patients, their psyche problems can be solved or minimised after visiting the patients personally. Voluntary organisations can know the exact cause of their psychiatric problems, but doctor or physician must be consulted. By supplying the reading materials according to their problems and needs can remove anxiety, tension and psyche problems of the patients. Doctors also recommend books in order to keep the patients busy NGOs can provide right book to the right patients at the right time for reading purpose. Voluntary organisations are much more helpful to the psychiatric patients.

7.6.4 Orthopedic Ward:

The patients admitted in the Orthopedic ward have to stay for longer period and they also need library services to pass their idle time. NGOs can be greatly helpful for these patients by providing books or other reading materials, by bringing books from the local public library. The voluntary organisations can also guide them to choose their alternative profession. They can also provide vocational training books according to their choice and needs. Therefore, by providing services to these patients, NGOs can bring to the patients prosperous and happy life again.

7.6.5 Aged Patients in the Hospital Wards:

The aged patients are also in need of the voluntary services. They want to talk to another person for long time or want to exchange their views of life,
but family members can not devote their time due to their busy routine. Moreover, some of them do not bother about these patients. Therefore, only voluntary organisations or social workers can do this job by ascertaining only their interest. By providing books according to their liking can create interest in their life and can utilise their idle time into constructive use. This activity also diverts their tension from their ailment and will pave way for their speedy recovery.

7.6.6 Surgical Ward:

NGOs can make great contribution to the surgical hospitalised patients before and after the surgery. Some patients before the surgery worry too much and think negatively. Consequently at the time of the surgery, they become unfit for surgery due to blood pressure, sugar/diabetes or any other problem. Only NGOs can make the patients fit for surgery by exchanging their views or providing the required literature to divert their tension of surgery. After the surgery, there is also need of the voluntary services, when the patients feels comfortable and have to stay for one or two weeks more. It becomes a problem to pass idle time. The NGOs again can provide books or other reading materials according to their tastes and requirements. By providing such type of reading materials, the idle time of the patients can be passed easily and they can gain speedy recovery.

7.6.7 Neurology Ward:

The hospitalised patients in the Neurology Ward also have to stay for longtime. It is very difficult to pass time. NGOs may be helpful in providing various types of books and magazines, according to their demand. Moreover, the voluntary organisations can exchange views with the patients regarding their diseases. The patients will feel relax and free from tension of the disease. Some patients think that their disease has no permanent treatment and they
always think in negative. NGOs can change their thinking into positive by exchange of views with them.

7.6.8 Maternity and Gynecology Ward:

The role of NGOs can not be ignored in supplying library services to the hospitalised patients of Maternity and Gynecology Ward. Hospitalised patients in this ward tend to move from Antenatal ward to the labour ward and then to the maternity ward after they have had their babies. The books will move with them and cause the social workers to use all their efforts of ingenuity to find them.

The hospitalised patients in this ward who have lost their babies may find reading a help before they can face the world again after their said experience. There is need of social workers, human understanding and good knowledge of books to assist them in such cases in the maternity and gynecology ward.

7.6.9 Radiotherapy Ward:

NGOs can play an important role in providing books or other literatures to the hospitalised patients in the Radiotherapy ward. The patients in the Radiotherapy ward may be up and about for a part of the day and will be glad to spend their idle time with the social workers. Normally reading material may be issued through the social workers to the patients in the ward as there is no risk of contamination except in some special cases. Doctor’s opinion may be ascertained in the special cases for providing books to the patients as to whether it is safe for the patients to be permitted books and other readings materials.
7.6.10 Ophthalmology Ward:

Through the Social Workers, reading materials can be provided in the Ophthalmology Ward with prior permission of the doctor concerned. Readings aloud by the Social Workers to the individual patients for eyes treatment is a possibility. Such patients can also be provided the talking books i.e. audio cassettes, music etc.

7.6.11 E.N.T. Ward:

In the E.N.T. Ward also there is need of the Social Worker for the hospitalised patients. These patients have lot of idle time before the surgery. Their idle time can be put into constructive use through Social Workers by providing literature according to their needs and tastes. But doctor may also be consulted after the operation for providing reading materials to such hospitalised patients of the E.N.T. Ward.

7.6.12 Drug De-Addiction Ward:

The patients admitted in the Drug De-Addiction Ward are more in need of services of the Social Workers because they can convince them through books regarding drug effects on their health which can change their life. There is need of too much time to spare to understand them for drug effects on illness. But only Social Workers can spare their time for such patients. Therefore, services of NGOs are more beneficial for the patients admitted in the Drug De-Addiction Ward.

7.6.13 Urology Ward:

There is also need of NGOs for patients in the Urology Ward as they have to stay in the hospitals for longer time. These patients have too much idle time before surgery which can be put into use by NGOs by providing literature to them, but after the surgery the concerned surgeon may be consulted for supplying reading materials to such hospitalised patients.
7.6.14 Private Ward:

In the Private Ward, the role of NGOs are more beneficial for the patients as these agencies can talk freely with them due to non-disturbance area. The patients admitted in the private ward can also express their views freely and the voluntary workers can convince them. By doing so, these voluntary organisations can provide literature after judging their needs and tastes. The hospitalised patients have free time for discussions for reading books and magazines due to non interference in the private ward rooms. Therefore, NGOs role is more beneficial to spend the idle time and will help to remove tension and lead to speedy recovery as compared to patients in the General Wards.

7.7 Conclusion:

It is evident from the discussion in the precedings pages that Non-Government Organisations can play a very significant and positive role in assisting the patients admitted in almost all wards of the hospitals (except the Emergency Wards, Intensive Care Units and Operation Theatres) to provide reading material, to help them in reading and also to read to them reasonably loudly so that they can hear, enjoy, relax, pass their idle time and also get informed through library services. This is one of the most pious and useful service to the indoor patients in the hospitals, which the NGOs can render, in addition to numerous other services which already rendering to the society.