

## **From the limits of self to the unlimited Self: A Case Study of Aravind Eye Hospitals**

It was the year 1991, and the venue was Harvard Divinity School where a man in his early 70's stood up to deliver a special lecture in the honour of Harold. M. Wit. The man was earlier described by the Dean of the Divinity School, as one whose "life and work are integrated with deeply held spiritual beliefs in a way that is nothing short of remarkable." The name of this remarkable personality is Dr. Venkataswamy, who is fondly referred to as Dr. V by his myriad friends and admirers spread all over the world.

### **Childhood**

*In me the spirit of immortal love  
Stretches its arms out to embrace mankind.  
Too far thy heavens for me from suffering men.  
Imperfect is the joy not shared by all.  
To spread forth, O to encircle and seize  
More hearts till love in us has filled thy world!*

-- Sri Aurobindo, 'Book XI, Canto I, Savitri'  
(An entry in Dr. V's Diary)

This extraordinary person, however, had an ordinary beginning. Born into a farmer's family in a small village in South India, he had to combine cattle grazing with his schooling. It was a school to which he had to walk a few kilometers across a river; which had no black boards, no pencils and not even a slate. The students collected sand from the riverbed, spread it neatly and wrote with their fingers. While many dropped out at such a primary grade school, Swamy (childhood name of Dr. V) persisted with his higher education, thanks to the keen support of his father who insisted on perfection in all his works and, which as Swamy would say later, he passed on as his legacy to his off-spring.

The early influence in Swamy's life was that of Mahatma Gandhi, who was then leading the Indian freedom struggle. Inspired by his ideals of simple life, non-violence, and truthfulness, Swamy too boycotted foreign foods, spun yarn with hand charkas and started wearing 'khadi'. Among other notions which particularly impressed Swamy were Gandhi's emphasis on living (rather than on renunciation) and transforming such life to reach the Divine. Also, Gandhi's capacity to love people holding divergent views and his conviction that spiritual progress can be made even in politics, in business and in all facets of life – had a deep impression on Swamy. The other abiding influences in those formative years included the teachings of Ramakrishna Paramahansa and Swami Vivekananda and a general orientation of yoga in Indian philosophy. All these combined to shape a worldview, which did not place the acquisition of wealth as the central goal of life but rather pointed to an aspiration to achieve some perfection, more in the realm of spirituality.

In the meantime, Swamy joined the medical school and on graduation, joined the British army in 1944 and served in India and Malaysia. In 1947, Swamy was struck by a tragedy, a severe arthritis that crippled him and hospitalized him for over a year. His joints were badly swollen and were painful and he could not even hold a pen in his fingers. Swamy would describe the distressing condition, “I was in Madras hospital for over a year. I could not hold anything. I could not sit up. Severe pain has been my companion since then, and it has never left me. The arthritis crippled me badly, and for years I could not walk long distance, something I was accustomed to doing as a village boy. In that acute stage, for several months I could not stand up, and I was confined to bed.” As he slowly recovered from this crippling disease, he re-learned the art of surgery in a sense and trained slowly to hold the knife and perform cataract operations. With indomitable will and the urge to attain perfection he went on to acquire the strength to stand for a whole day and perform 100 eye surgeries at a stretch.

### **Aurobindo’s Influence**

The most decisive influence which governed much of the subsequent life and mission of Swamy was to occur soon. It was in April 1950, that Swamy visited Pondichery and had his first meeting of the master Sri Aurobindo. Swamy began to visit Aurobindo’s ashram regularly and became involved with his teachings in a steady way, soaking up and absorbing their deeper transformative essence. He was also influenced by the personality and teachings of Mother who was the disciple of Sri Aurobindo and who spent all her life since 1920 in Pondichery. This meant that a vibrant second track was added to Swamy’s life, which over the years started influencing and shaping his thoughts and actions.

Aurobindo’s thought was not confined to the spiritual domain of Swamy’s life. Rather, Swamy wanted those teachings to permeate all his endeavours and propel him towards spiritual perfection. For him, work and worship were not two different strands but an integrated stream, which flowed seamlessly. For instance, Swamy often recalled that Aurobindo’s essential method was to quieten the mind so that it can face both good and bad with equanimity. This in practical terms meant that Swamy had to translate these ideals into his own day-to-day hospital life. Swamy was relentless in his analysis of his own efforts in living the above ideal. He would say, “Everyday I pray in the morning that I will not lose my temper. But then, I go to the hospital, something happens and anger seems to possess me.....I have constantly tried to experience peace and calmness.....I experience it, but it is so transitory that I seem to lose it in no time.”

### **Medical Career**

Dr. V stayed in Madras until 1956 and then was posted to the medical school in Madurai, the town famous for the great temple of Goddess Meenakshi. As the head of the eye department, Dr. V explored ways to strengthen the department and introduced innovative methods in the diagnosis and treatment of eye diseases. In the wake of this work the state government provided him, in 1961, a mobile unit to reach out to people who could not avail the meager facilities at the hospital. In the very first camp there were as many as 200 patients to be operated. They also had to be fed for a week post-surgery and the

feeding was done with enormous voluntary support from the local community. This amazing response made the camps extremely popular.

Dr. V was invited to the United States in 1965 to learn about the rehabilitation of the blind. In New York, Dr. V had a momentous meeting with Sir John Wilson, himself a blind person, who founded the Royal Commonwealth Society for the Blind. He became close to Sir Wilson who offered the help of the Royal Society in conducting many more camps. For Dr. V, it was a great gift, which enabled him to restore sight to numerous poor villagers who lost their sight and could not afford the treatment for regaining vision. As a consequence, lot more camps were organized with help coming even from local industries and businesses. Once, over 700 cataract operations were performed in a single day, which was a world record. In 1973, the government set up the Chief Minister's Eye Camp Project resulting in restoration of sight to thousands of people. A few years later, a meeting came about with the Prime Minister Indira Gandhi herself during which Dr. V and Sir John Wilson communicated the need for a national organization to cater to the millions of people in the country who were blind. Their proposal was accepted and Dr. V's work now transcended the small hospital and encompassed the supervision of ever-growing network of camps. Dr. V described this expansion in an interesting way. "More and more people joined us in our work, and the national consciousness kept widening to include many people. As Sri Aurobindo would explain it, spiritually you feel happy that you are no longer left inside your small, narrow ego and limited to your own life and your own family; you try to break that ego and widen your consciousness. You grow in spiritual consciousness"

Dr. V was also highly distressed about the blindness in young children caused by the deficiency of Vitamin A which made him to initiate research in that direction. In 1971, he started a nutrition re-habitation centre in the hospital with the support of the Royal Society. After an immensely contributing career, Dr. V retired from Government service and from the professorship at the medical school in Madurai, at the age of 58. He had a comfortable pension and had no need to work any more for his sustenance, especially since he had chosen to remain a bachelor so he could, as the eldest son, look after his siblings after his father's premature death. It was a perfect culmination of three decades of service paving the way for a relaxed retired life, when one could look back with satisfaction on a fruitful and well-lived life. It may be so for anyone else but not for Dr. V. In fact, it marked the beginning of a second innings in the life of Dr. V, which would prove to be far more influential and definitive. In this venture he was a free person who could establish an institution, on the lines he chose and fulfill his life's mission in the way he wanted.

## **Second Innings**

*One soul's ambition lifted up the race;  
A power worked, but none knew whence it came.  
The universal strengths were linked with his;  
Filling earth's smallness with their boundless breadths  
He drew the energies that transmute an age.*

-- Sri Aurobindo, 'Savitri'

In 1976, Dr. V started a non-profit public charities trust under which he founded an eye hospital named after Sri Aurobindo at Madurai. That was the birth of the Aravind Eye Hospital, which started as an eleven-bed eye clinic. Over the years, it has grown by leaps and bounds, and is more appropriately called Aravind Eye Care System, encompassing a plethora of well-integrated organizations. The progress was not easy, as Dr. V did not have any substantial resource-base. He describes the arduous journey: “In 1980, my friend Dr. Charles Schepens came from Boston and laid the foundation for a main building. I still did not have the money; the bank said that I was not credit worthy. So I had to mortgage my house and borrow 500,000 rupees to begin construction. The family construction company built the ground floor. One-third of the admissions were paying patients. With the revenues from the paying patients we could finish building the place, buy the equipment, and take care of the other two-thirds of the patients for free”.

In 1992, Dr. V was faced with a challenge. Aravind Hospitals, which was performing surgeries employing IOL (Intraocular Lens) had to import the IOL, as there was no local manufacture. As the number of surgeries grew, Aravind started facing the brunt of the high import cost. IOL cost as much as US \$ 200 each, which was clearly beyond the affordable range of the poor patients of Aravind. The alternative was to go in for the cheaper but inferior ICCE surgery. But this was not acceptable to Dr. V as he believed that the poor deserved the same good quality medical care as did the rich. Displaying a rare insight into the value of eye-sight, once he remarked:

“In America, there are very powerful marketing devices to sell products like Coca-Cola or hamburgers. All I want to sell, to market, if you will, is good eyesight, and there are millions of people who need it badly. Nothing more basic is needed than good eyesight. A man who loses it, loses fifty or sixty years of life. If that man can afford to pay me for it, certainly he should pay. If the man cannot afford to pay, still he needs eyesight. So how exactly should the market work?”

Given this, Dr. V took a bold decision to undertake manufacturing of IOLs in-house. It was a truly bold decision as Aravind was basically a hospital and had no previous manufacturing experience of any kind whatsoever, and IOL production was considered extremely high-tech involving high-precision machining. Nevertheless, Aravind rose to the challenge, bought the technology from a small manufacturer in Florida, trained its personnel and ensured necessary quality-checks.

Aurolab started the manufacture in 1992 and steadily brought down the price of IOL eventually to a mere \$ 5. Aurolab also obtained the ISO 9002 and CE certification. Today it produces lenses on par with International Standards and exports its output to over 100 countries, after meeting the complete requirements of Aravind Hospitals (the latter consume only 25% of Aurolab’s output). It also produces high-quality sutures which cost only one-fourth of the imported cost. No wonder, Dr. Balakrishnan, MD of Aurolab says “Aurolab was responsible in driving down the prices of IOL all around the world. Our lenses are high quality, low price and take us nearer to our goal of eliminating needless blindness.”

Over the years, four more hospitals have been added to the Aravind System. Today Aravind Eye Care System has grown to become the largest eye hospital in the world with about 2,00,000 eye surgeries being performed every year, more than any other institution in the world, two-third's of them for free. The institution is financed from international, non-governmental agencies. It has also become a global centre for training which the medical school residents from Chicago, Boston, New York and elsewhere visit to work and learn. WHO sends doctors and technicians here for training in community ophthalmology. Sri Lanka, Nepal, Indonesia, etc. also receive ophthalmology training from the hospital. The self-sustaining Aravind model without state support has attracted much attention and there are efforts to replicate that model in other parts of the world.

Thus Aravind model has proved itself as an extremely effective delivery system in addressing a critical social domain. More importantly, it is doing it in a self-sustaining way with highly impressive financial track record, which amazes many an expert in economics. Exclaims exultantly C. K. Prahlad, the celebrated management guru, "How many enterprises have 200% return on capital employed .... and that too with world-class quality..... The Aravind model is relevant to most parts of Asia, all of Africa and most of Latin America." One might add here that while it costs about \$ 1650 to perform a cataract operation in US, it costs about \$ 10 at Aravind. Still Aravind manages to secure a gross margin of about 40% thanks to its relentless cost-cutting measures and high productivity of its doctors. The paying customers (who constitute about 1/3<sup>rd</sup> of the patients) and the handsome margins from the sale of lenses abroad by Aurolab strengthen the bottom line and facilitate the free-treatment of the remaining 2/3<sup>rd</sup> poor patients. Explaining this financial achievement, Mr. Srinivasan, who heads Finance and New Projects, says: "Tight financial control, on time accounting, coupled with appropriate pricing and transparency are the reasons for this financial success". All this money so meticulously squirreled away is ploughed back into the system, for buying capital equipment, constructing new buildings and opening new branches. Aravind, as a policy, does not approach banks for loans as it might compromise their financial freedom. Nor does the top brass of Aravind get huge bonuses. In fact, Dr. V does not take even a rupee from Aravind and supports himself on his pension. Dr. Pararaja Segaram, a Consultant at WHO, sums up the Aravind Model succinctly: "It goes to show the innovative and visionary spirit of Dr. V, who more than anyone else has revolutionized the concept of high volume, high quality cataract surgery and eye care in general at an affordable price to cater to the large unmet need in our countries." He also explains the spiritual element integrally woven into the mission. He says, "the spirit of divinity that has permeated the development and growth of Aravind hospitals springs from Dr. V's deep faith in the divine and the potential that it unfolds for human progress."

It is this unusual combination of efficiency and humane care which impressed Dr. Daniel Goleman, the proponent of "Emotional Intelligence" and a good friend of Dr. V. He observes insightfully, "For though it is an eye care hospital, under Dr. V's guidance the philosophy at Aravind is to care for the total person, to offer comfort and solace as well as excellent medical care. For example, patients' families are welcome to stay with them at the hospital, rather than having patients face their surgery isolated and alone. In that philosophy there is a lesson for medicine in the West, which seems to have seized on

methods of assembly-line cost efficiency at the expense of humane care.” He further adds: “Those lessons will soon be shared. People in public health and eye care will come to Madurai to learn the community eye-care techniques Dr. V and his team have evolved-innovations such as mobile eye camps that bring sight-restoring surgery to the blind in even the remotest of villages. And beyond these innovations in technique, those who come to train at Dr. V’s center will take home the philosophy of total care, from eye to soul.”

### **Expansion of Aravind Model**

Aravind is also sharing enthusiastically the fruits of its experience garnered over three decades, especially through its educational arm, Lions Aravind Institute of Community Ophthalmology (LAICO). LAICO already worked with more than 200 eye hospitals, in different states such as UP, West Bengal, Orissa and Delhi as well as in other countries such as Malawi, Kenya, Zimbabwe and Zambia. LAICO’s contribution is in terms of teaching, training, research and consultancy and is aimed at enhancing the efficiency and effectiveness of the eye-hospitals, especially in developing countries. Residents from places like Johns Hopkins, Harvard, UCSF and other major medical schools receive training at Aravind. It is also a WHO collaborating centre and is designated as a centre of excellence in eye program capacity building.

As American Academy of ophthalmology described, “his (Dr. V’s) innovative service delivery models revolutionized the quality, accessibility and affordability of vital eye services around the world”. But, when Dr. V is confronted with the natural question of how he accomplished it all, his answer is disarmingly simple. “I didn’t. If you have the right intention and purify your mind and heart, the right action springs spontaneously.”

At other times, the amiable doctor speaks a little more albeit, grudgingly “You see, when people need help you can’t run away... you say, I will help and then you do what you can. Even when we started, we did good quality work. So the rich people came and paid us and we could treat the poor people with that money. The poor people brought more poor people, the rich people brought more rich people. So we now have five hospitals.”

But for people like Dr. Susan Gilbert, it is a saga of persistence and patience. Dr. V visited the University of Michigan School of Medicine in 1978. Being impressed by the institution, he said that he would like to have a centre like this one day. Hearing this Dr. Susan Gilbert said to herself, “Now wait a minute – he has an eleven bed eye clinic in India, he is coming to the United States for the first time, and walking around this 40,000 sq. ft. facility saying he wants one just like this.....how is he ever going to do it?”

Years later, Dr. Gilbert admits with admiration that he indeed had done it in a matter of years – in around 18 years! If some one dreams of something seemingly impossible and yet persists patiently and relentlessly without expecting overnight miracles and without demanding immediate gains, then, realizes the dream after 18 long years, it would call for new definition for the term “persistence of vision.” It is this persistence of vision which impressed Professor Sue Ashford, of Michigan Business School who together with a

group of MBA students visited Aravind on a project work. She even came forward with a funding support to help finish and distribute the film “Infinite Vision”, made on Aravind.

Though conscious of the distinct contribution of Aravind, Dr. V likes to maintain a low profile. He says: “Though Aravind Eye Hospitals do the largest volume of eye operations in the world, we seldom talk about it. We do not publicize the excellent work that goes on in the special clinic’s retina vitreous unit, the IOL unit, and the cornea unit. It may take longer for people to know about us, but it is better to be slow and steady, and to aspire for perfection in our work.”

### **Aravind Today**

Behind the phenomenal growth of Aravind, there was the single-minded focus of “eradicating needless blindness” as Dr. V likes to put it. He believed that lack of money should not be a constraint in the restoration of vision, and hence ensured that the poor patients got the treatment free. More important, he believed, that even lack of knowledge should not become a constraint. He would say “In the third world, a blind person is referred to as a mouth without hands. He is detrimental to his family and to the whole village. ...all he needs is a 10 minute operation...but people do not realize that the surgery is available, or that they can afford it because it is free. We have to sell them first on the need.” Hence Dr. V pioneered the concept of eye-camps, in which the doctors and staff go to villages, conduct free eye-check-ups, identify people requiring surgery, arrange for their free transport to the hospital, where the surgery is performed. Patients are welcome to bring their family members along for support and they are generally housed with others from their own district so that they do not feel lost or isolated.

Often Dr. V remarks that being a villager himself, he can easily empathize with their problems and put them at ease quickly. He serves them not as a superior doctor, but as an equal and one among them. He has a deep understanding of their deficiency and its adverse effect on their economic condition. He says: “The bulk of the people we treat are poor people. They have nothing to fall back on except the support that their children can give them. They usually subsist on one meal a day, or sometimes nothing at all.” He makes every effort to set the villagers at ease and is keen that his doctors and staff share his spirit of service. He adds: “We normally work for eight to ten hours a day and six days a week. We want doctors to develop a helpful and kind attitude towards patients, especially poor villagers. The bureaucracy of government institutions intimidates people. That is a remnant of colonial rule. We regularly send our staff to village eye camps, where there is no fear or intimidation, and try to develop in them love and affection for the people. We create an opportunity for comradeship between the hospital staff and the villagers, and the staff can also observe the villagers’ living conditions and aspire to improve them.”

## **High Productivity**

Once the demand is generated through eye-camps, the obvious sequel is to gear up the system to handle the large inflow of patients. For that, Dr. V drew inspiration from McDonalds and designed an assembly-line system, which catapulted the productivity of the doctors. To cite some figures, typically an Aravind Doctor performs about 2600 surgeries per year, which is more than six times the national average (400 per year). Dr. Pararaja Segaram describes the clinical efficiency of the process, at an eye camp as follows:

“The improvised Operating Room had been set up in a factory building. There were twelve operating tables with each of the surgeons assigned two tables. All the basic aseptic techniques were observed. The surgeons took up their positions, the paramedics and volunteers (youth groups, boy scouts, and community members) came into the system. Patients were brought in walking to each table in an orderly fashion and the operated patients were carried out on stretchers. It was truly conveyer belt surgery done in a very systematic way. Little time was wasted – it was the era of intracapsular cataract extraction, with no microsurgery -- between surgeries.

The technique was a Graefe knife corneo-scleral section, iridectomy (peripheral or broad), Arruga forceps extraction and three Corneo-scleral sutures, under local infiltration (retrobulbar) anaesthesia given by the trained medical officers – the whole surgical procedure lasting under five minutes per surgery. We started at 7 o’clock and finished the day at around 6 o’clock in the evening. There was no lunch break. We had liquid nourishment of aerated water.”

“I relate this experience as it goes to show the innovative and visionary spirit of Dr. V, who more than anyone else has revolutionized the concept of high volume, high quality cataract surgery and eye care in general at an affordable price, to cater to the large unmet need in our countries.”

Even at such high volumes, the quality is maintained meticulously. Dr. V explains, “We also have tried to achieve the efficiency of a factory assembly line at Aravind. Four of our doctors assisted by twelve nurses could do about one hundred cataract operations in one day. This is something new to the ophthalmic world. How on earth do you set up to do a hundred operations? When visitors came and saw it, they were very happy. Although we are doing a large volume of operations, the quality doesn’t suffer. We have a system and we can control its efficiency. This also helps to bring the cost down”.



The extraordinary productivity is not a trade secret, which Aravind guards zealously. On the contrary, it wants to share the process openly. Dr. Namperumalsamy (Dr. Nam), who now heads Aravind says: “It is possible for other hospitals to come to our level of productivity. We are willing to help them to do so.”

Aravind also has rather an unusual approach to their “so-called” problems, which might surprise an on-looker, but is perfectly logical for an Aravindite. Shenoy, a long time Aravind watcher has the following story to relate:

“In the earlier years a problem was brought before the senior management team regarding the work flow on Monday mornings. Because of the high number of camps held over the weekend, extra busloads of patients would be waiting for surgery on the first day of the week. Though there were systems in place to deal with the influx of camp patients, they were not geared to deal with such a sudden and dramatic variation in crowd size... each Monday burdened with this extra load, everything was thrown off course, becoming slower and less efficient.

Listening to this story being related, the solution to the problem seems almost disappointingly obvious. You assume the next thing you will hear about is how the management rescheduled the camps more evenly across the week to equalize the distribution of the patient load.

That solution seemed simple enough and you think it makes sense-until you hear how it all really turned out... Aravind management decided that if they could maintain higher patient volumes through the rest of the week, the increment on Monday would have less impact on the system. Or in other words – rather than redistribute the old patient load, to even things out they were going to see how they could bring in *even more* patients to make up the difference!...

...Often times in our minds and in our mindset we associate the “right” solution with the “easy” solution. It takes a certain sort of outlook to be able to recognize the opportunities that come disguised as “More Work” and to take up that work without grumble or complaint, and to know its worth and believe in its purpose.

You see this willingness to work hard and then work even harder at every level here at Aravind. Especially at times like these, when we are into the summer months and the crowds peak and the rooms overflow and the clinics stay open later and later into the night.....”

Shenoy is also amazed at the steady stream of innovation that permeates Aravind and says with unconcealed admiration...

“Seniors like Dr. Nam or Dr. Natchiar seem to effortlessly switch the hats of clinical work, leadership and human resources. Aurolab produces sutures and then along with Aravind pushes for suture-less surgery. Aravind pioneers the concept of the eye camp. Then after creating an incredibly efficient model, it begins to delve even further into the community through telemedicine and vision centers.

One can compare the organization to an organism always thinking and breathing, always alive. Just as the heart of Aravind lies in its sense of service, the pulse of Aravind lies in its ability to innovate...

...The system pushes for change, the goal of eliminating needless blindness means reaching out to more and more people. It calls for questioning existing ways of doing things, of adapting and yet remaining true to the core principles. It keeps Aravind nimble on its feet.”

### **Economy and Quality**

Like the head of the organization, the senior staff too swear by simplicity and no-frills approach. Dr. Natchiar, a senior surgeon and Director (and the younger sister of Dr. V), occupies a very small cabin, but has no complaints whatever. In fact, she is glad that her small room allows more space for the more important operating theaters and para-medical functions. Stating that Aravind does not believe in expenditure on non-essentials, she elaborates further: “We save a lot of money by providing just minimum comfort but that money we spend on quality eye care ...the equipment we buy is of the very best quality. We simply don’t compromise on quality when it comes to equipment and instruments.”

She adds: “The healthcare business is so bad (meaning extravagant). Alternative models are needed. There is a new machine used to help with surgery that recognizes the doctor’s voice. It is egotistic. That is another \$100,000, which the patient pays. You have to stop and think, ‘is this the best way to spend money?’ At our hospital, machines are not doing the surgery: people are. We need technology, but medicine also needs the practices of the east.”

## **Recruiting System**

In Aravind's medical system, nursing and para-medical staff play a crucial role. Most of them are recruited from nearby villages. Dr. V explains the process: "When we need technical assistants, we select girls from the villages-simple, honest people, brought up in the traditional culture, which includes consideration for family and the community. Their families have provided a certain discipline, love and care in their daily lives. They can be easily trained to care for some-body else. Twice a year we find them and train them intensively."

Dr. Natchiar, who is closely involved in the recruitment and training processes elaborates further:

"We have a ratio of about 1:6 between doctors and nurses. We have also about forty counselors. We have about 900 girls between our four hospitals and at Aurolab. We recruit girls from rural background: generally we don't prefer urban girls. We take them between ages 17 and 19, very rarely more than 19. We look for girls from large families, probably farmers families, with the right attitudes. Knowledge and skills are important, but not so much as the right attitude. We never advertise, usually once a year, we put up a notice in our hospitals indicating our intention to recruit, and word of mouth carries the news. Between the selection cycles, about 400 – 500 applications are received. We take about 60-100 girls per year...parents are always called for the interviews as well. We look for the right kind of person. After recruitment, we give them 3 years of training. The training is considered to be excellent and is recognized in the USA and the Govt. of India is considering adopting our training syllabus for nurses training."

Dr. Natchiar says with evident pride: "We take very simple girls and make them top class people. In fact our nurses are so good they visit places like Egypt, Indonesia, Cambodia, Maldives and Malawi to train nursing personnel in those countries."

Doctors are also gradually conditioned to undertake longer hours of concentrated work which varies from 8-10 hours a day and six days a week. Aravind employs only full time doctors and not any part-time or visiting doctors unlike in many large hospitals. Because, they believe that the external doctors' may not facilitate development of institutional loyalty and the specialized skills which Aravind needs.

## **Culture of Service**

Commenting in respect of service, Dr. V says: “You identify with the people for whom you work. It is not out of sympathy that you want to help. The sufferer is part of you.” With such a perspective, no wonder a culture of caring is specially nurtured at Aravind.

Describing his own first-hand experience of Aravind Hospitals, President Abdul Kalam gives the following account vividly in his book, “Wings of Fire”:

“To me at this moment it seems not like one clearly defined sharp-edged thing, but a collage of different elements, aspects and ideas...it is the picture of Dr. V holding two smoky, slender sticks of incense in his hand as he makes his way to the meditation room each morning, it is the spotlessness of a nurse’s sari, and the thoroughness of a Monday evening camp meeting, it is Dr. Natchiar eating a very late lunch in her office after seeing every last patient in her waiting room, it is the barefoot old man with a busy mop who keeps the passageways gleaming, it is in the rigorous quality checks in Aurolab and the freshness of the flowers that the housekeepers arrange in so many vases each morning, it is in a hundred different things some big and small, some visible and some only felt...but it is... and that is what makes the difference. Culture in societies as well as organizations is not something rigid and fossilized, it is shifting, dynamic and constantly evolving and expressing itself...but it is guided, shaped and given coherence by overarching principles, ideals, and aspirations.”

Besides this overall ambience, President Kalam has a specific instance as well to relate:

“I recall an incident which took place few years back. One of my friends, Shri M. R. Kurup, who was the Director of Solid Propellant Rocket Motor Plant, suddenly lost his vision. People around him took him to Aravind Hospital for treatment. I visited him in the hospital and saw the treatment of various patients. That is the time I could see all the patients are given equal priority, equal care, irrespective of their status. It was a divine environment. It did not look like a hospital. It virtually looked like a temple. My friend was fully treated and he got back the sight. He told me, ‘When I got the sight, the first person I saw was Dr. Venkataswamy. I am grateful to God that not only I got the sight but he gave me an opportunity to meet a great soul.’ This was the type of patient – doctor relationship in Aravind Eye Hospital.”

Courtesy to patients is another hallmark of Aravind. A doctor at Aravind dwells on this aspect: “We have a unique culture based on service. All the doctors speak softly to patients and nurses. No shouting here. If a doctor behaves in an unacceptable manner, word goes round the hospital in no time, and the doctor will be in trouble. We believe in mutual respect as a core value.”

### **Unconscious Competence**

Discussing the distinct strengths of Aravind, Mr. Thulasiraj, who heads LAICO, elucidates, “A lot of our strength comes from what I call unconscious competence. Our strength is really not our technical skills or equipment. This can be easily replicated. Values are our unique strength. Values are the real reason for efficiency. We must find ways of sustaining and strengthening our values and culture. Integrating the culture of all our units is very important.” He adds: “Integrity is a hallmark of this place. We never give commissions to other doctors, chemists or other hospitals for special tests. We tell other diagnostic facilities what they should charge a poor patient sent from Aravind for a particular test and they oblige. We have been able to have our way.”

Christine Melton, a healthcare expert, had something unusual to say when a reporter from Wall Street Journal called her for an article on Aravind. She relates, “He wanted to know about his (Dr.V) management style....How can you explain that it was quiet not loud, that it was respectful not oppressive; that it was attentive, not intrusive? Dr. Bill Stewart, the Director of the Institute for Health and Hearing, USA and a long time friend of Dr. V says:

“Here is a surgeon with gnarled fingers, and yet he is a surgeon of perfection....where his fingers may not be perfect – his soul is perfect and his soul is a much more powerful tool for the surgeon than his hands. And soon after noticing the physical attributes of Dr. V, you cannot possibly but be taken by his keen vision, by his charisma, by his kind of cosmic joy and wry sense of humour and by the intense commitment that he carries to fight the battle against needless blindness. And it is always felt to me that it is not a battle against just blindness as in physical sense but a battle against our lack of vision. Dr. V has brought together the spirituality of India and the technology of modern science to bring health care to the masses. And what you will feel in him is beyond words....his soul force.”

Responding to an inevitable question about how such great institutions with noble principles can be created and then sustained over a period of time, Dr. V in his typical innovative strain draws an unusual comparison with the magnificent Meenakshi temple in the same town and drives home his point in the following way, “The Meenakshi Temple was not started and finished by one ruler. It was a work of love and faith and vision that spanned a whole succession of rulers and several generations and yet it has maintained its integrity. Hundreds of years since its beginning, it draws more and more bare-foot pilgrims with each passing year. Temples are not built for individuals or by individuals. They are created for all humanity by a band of skilled dedicated workers and the result is a living, timeless gift to the world. And it can be the same with institutions like Aravind.”

## **Indomitable spirit and going strong at 88!**

After guiding Aravind Hospitals for nearly three decades of distinguished service, Dr. V was caught in a reflective mood one day. As usual he was thinking big and exploring new horizons. He was looking beyond Aravind, on to the nation and the whole world .... how to eradicate needless blindness in the country and the world. He said: “Despite all our efforts, only about 7% of target population is coming to (eye) camps. We have to increase this percentage.” He outlined his key concerns: “I am now seriously wondering how to develop sustainable systems..... I feel existing doctors in the country are heavily underutilized..... We have to bring up the productivity of doctors.” His vision was focused on clearing the backlog of 20 million blind in India, about which he discussed passionately with a Harvard Professor more than a decade ago. He also wondered how Aravind may leverage its decades of experience on the world stage, especially many developing countries that were in dire straits with regard to eye care.

## **Leadership**

*Spiritualism is a progressive awakening to the inner reality of our being, to a spirit, a self, a soul that is something other than our mind, body and life. Spirit is an inner aspiration to know, to enter into contact and union with greater reality beyond, a reality that also pervades the universe and dwells in us. As a result of that aspiration, contact and union, there is a conversion, a birth into a new being.*

(Dr. V at Harvard Divinity School)

Dr. V was speaking about a new birth. Interestingly, his resurgence after a crippling disease to emerge as perhaps the most celebrated ophthalmologist (who performed more than one lakh eye surgeries with those very twisted fingers), was, in a sense, a new birth. Also his founding of Aravind, after retirement (when most people would be happy to call it a day), and nurturing it assiduously to turn it into a world-class eye-care centre is not only a new birth for himself and for the institution, but for the millions of patients too who regained their sight at Aravind. His relentless pursuit of innovation, sometimes, breathtakingly bizarre, seems to reflect his inner urge to renew and rejuvenate himself and his surroundings.

Ask him to spell out the key leadership traits that characterize his institution-building prowess, his answer, like the man, is simple and direct. “The qualities for leadership are: to be a visionary and to know execution,” he says and then adds an enigmatic rider in his inimitable style, “If I can go from consciousness to higher consciousness, then I will be a leader.” This reference to higher consciousness is a clear echo of Aurobindo’s thought, to which he was drawn like a magnet and which he internalized over decades, by delving its depths time and again. Aurobindo’s magnum opus “Savitri”, was his dear companion. Offering an insider’s view about Dr. V’s engaging absorption into Aurobindo’s thought, Pavi Mehta, his grandniece shares some intimate moments.

“When I was around thirteen, my mother urged me to read a little bit from Sri Aurobindo’s ‘Savitri’ with Dr. V everyday. At that age, it was not an appealing prospect ... what I knew of Sri Aurobindo’s work was that it was full of very long sentences and phrases like ‘Supramental Consciousness’ that I couldn’t begin to fathom.”

“Close to ten years later, six months before starting work on ‘Infinite Vision’, I asked Dr. Thatha (Thatha = Grand Father, referring to Dr. V) if I could come in each morning to read with him. This time it was something within me that prompted the request: A dim understanding that there was value to starting the day in this way, and with this person. It became a tradition that would continue on for as long as I was in the same place as Dr. V – most of our readings were in Madurai and Pondicherry, and when she could, my cousin Dhivya joined us. I am grateful beyond words for the uniqueness of that time and space, and all that it has taught me. In some sense it was the beginning of my real understanding of Thatha; his spirit of service and compassion, his strength as a leader, his incredible discipline, his dedication to the truth and his unwavering commitment to a participatory evolution.”

She puts in perspective her grandfather’s search for wisdom and striving for higher consciousness as follows: “There is so much I have to learn from the elderly man who sits across the desk from me, his impossibly twisted fingers holding a book he has read from each morning for long decades now. Dr. V has reached the end and returned to the beginning of this book again and again and again with all the beautiful humility and wisdom of the open, waiting heart that knows it cannot hurry its way into some kinds of understanding.”

Speaking of his endearing and pervasive influence in her own life, she concludes: “So many of the explicit and implicit blessings in my life (and thousands of others) are directly related to his pivotal presence in it. Everything from the work I choose to do, and the values I hold dear, to the friends I am privileged to live amongst, are indebted in inexplicable ways to him – and the wonder and privilege of that is at once humbling and inspiring. It strikes me today as I write this, that perhaps the gift I am most grateful for, is his gift for growing people closer to ‘an inkling’ of their souls. It was his example of active, generous, tireless integrity that first prompted me towards looking within. And I cannot think of a greater way to honor his place in my life – than to continue that inquiry with sincerity.”

It is this tireless integrity coupled with humility that Dr. V brings to bear upon his work day after day. He would say: “We have a meditation room in the hospital, and I go there at 6.30 in the morning. I ask - not in words but in a silent talk with God – that I be a better tool, a receptacle for the divine love, and I ask how exactly we can have love and compassion for the patients who come to us... if work is approached from a spiritual perspective, then it becomes divine work. If in your actions you allow the divine force to flow through you, you will accomplish things far greater than you ever imagined.”

Tireless he is indeed, an octogenarian, who makes fifty-year plans, as Suchitra Shenoy puts it humorously, for his institute, for his community and for his country.

Not only does he make plans, but he makes them painstakingly thorough. K.V.S. Lakshmanan, an admirer, presents a first hand account.

“There is a tirelessness to his generous ambition that is truly awe-inspiring. Even now as these words are being typed, Dr. V is on a journey halfway around the world to receive an award from a health care institute in San Francisco. In the weeks leading up to this trip he has researched meticulously all the centers he will be visiting on this trip, created folders for all the people he will meet and thought carefully on what aspects of Aravind’s work must be presented to each in order to further strengthen the combined effort against blindness. Every speech that he is to give, he has rehearsed and rehearsed several times over, every slide has been scrutinized and submitted to various people for review. His diligence, sincerity and commitment is almost puzzling.”

“Why, you wonder, should he spend so much time at his age on all of this, when he is so well-known and so well-respected, anything he does or says will be accepted. Why must he prepare so much? Because that is exactly why he is so well-known, and so well-respected. For the will-power and strength to look past excuses for imperfection and work steadily, stubbornly towards a goal that must be reached....”

Wondering about what makes Aravind attract hundreds of volunteers all over the world, to come and contribute year after year, Mike Myers, another admirer (himself enjoying a 20 year association with Aravind), finally puts his finger on the central issue. “I think the bottom line is that while so many companies and people are simply trying to earn lots of money for themselves, the goal at Aravind has always been to use the ‘paying structure’ to support the ‘free structure.’ In today’s world, that is very unique.... And worthwhile. I think that in most of my discussions with anyone connected with Aravind, their ‘work’ goal is just as strong, may be stronger, than their personal goals, and anything / everything that leads to a better Aravind is worth working towards.”

Dr. V was not content to understand intellectually the finer points of his mentor’s (Shri Aurobindo’s) thought. He distilled from it the goal of life, which he describes as follows:

*The goal of life, Sri Aurobindo also taught, is not to escape from the world to some higher heaven, but to transform life on earth into a divine life. This process is accomplished, not by the mind, but by surrendering the mind and the vital life forces to the Divine – allowing the divine force to work on the body, the mind, and the life forces, and to transform them.*



This divine force is not a remote abstraction for him, but a living reality, which has a meaning in life's trials and tribulations. Dr. V applies this insight to his personal predicament of overcoming the effect of arthritis and comes up with the following insight: "But how can I train myself to practice spiritual perfection? Once you separate your inner consciousness from your outer consciousness, you must try to realize your soul, which can contact a deeper reality than your reason can. We have the opportunity to do this all the time, every minute, every second. You can see from my arthritic hands that I had to learn how best to train my fingers to hold a surgical knife, when for years I couldn't even hold my pen. But I wanted to be the perfect surgeon. Sometimes I had to perform operations on hundreds of patients each day. How could I pray for the divine grace to do that and to get my physical body to help? What you need is the higher power to make your mind perceive truth."

For him spirituality is not a hobby for old age or mystery after death, but has significance in every day life. He says, "Normally, people think of spiritual or religious practice as a means to attain salvation or heaven. They think that spirituality is for old age, after you have had your share of life's pleasures by whatever means. But spiritual discipline and practice can enhance the capacity of the body, mind, and heart, and make them better tools. Spiritual life is not reserved for life after death only; its purpose is to make the present life rich in all aspects."

This enrichment of life through elevation of consciousness, in a sense, was the life journey for Dr. V which seems to manifest in terms of his several visionary initiatives and innovative interventions.

Besides Aurobindo, the other major influence in Dr. V's life is that of Mahatma Gandhi. The simple and almost austere life style, steady adherence to integrity and relentless self-introspection of Dr. V – bear a close resemblance to the Gandhian ideals. The following description of Dr. V's honest self-analysis seems almost like a page out of "My experiments with truth."

"I want to radiate love and goodwill on all occasions, without giving any place in my consciousness to pride or prejudice. I want to love the patients and staff uniformly all the time. But I know that I create a sense of fear in my staff if they come late, or if they are not efficient in their work. This has become a strong habit with me, as I have been keen to maintain discipline in work. I should have tried love and kindness rather than instilling fear in them. I find that when people are not effective in maintaining discipline, morale declines, and the quality and quantity of work also declines rapidly. It would be ideal if discipline could be maintained with love and kindness. But when some people have complete freedom to act, they degenerate very quickly. They still need some amount of external force to main discipline. If people could grow into the higher consciousness and act from the higher level, they could influence others."

Also, in an ingenious way, Dr. V identified a common chord, between the philosophies of Aurobindo and Gandhi - - an emphasis on living rather than on renunciation and wove it into the fabric of his life.

Dr. V recalls Gandhi's influence on his life.... "But in our early days Gandhiji was all in all for us. He said one can make spiritual progress in this life, not by going to a monastery or an ashram, but by living the life of *Gita*, in politics, in business, in all facets of life." He adds: "Gandhiji was not for renouncing the world to seek the Divine. Rather, he was for living and transforming life to reach the Divine. This notion shaped some of us, and we used to be called Gandhi-ites. Gandhiji talked constantly of "soul force," and he used it for all problems in the lives of individuals and institutions, and in politics".

This life-affirming philosophy, garnered from two highly diverse sources - - Aurobindo, the philosopher and Gandhi, the mass leader - - seems to have supplied a referential template for Dr. V's notion of leadership. This influence is not something, which Dr. V experienced within himself alone, but was evident to others as well, who clearly felt and articulated it. Joanie Mitchell, who had known him for a long time, writes: "Dr. V's life has been one of realized visions and obstacles overcome. He has lived out the principles of his spiritual mentors, Gandhi and Sri Aurobindo. Now in his eighties he is active, curious about everything, full of ideas. He has an extraordinary energy and clarity."

Perhaps Dr. V would not very much dispute the account of Vijay Poddar, who summed up the essence of Dr. V's life journey, as follows:

"I think Dr. V never considered anything to be impossible. He believed that there were no limits to human achievements. With twisted fingers, he became one of the greatest eye surgeons. He provided the best and the latest eye care even to the remotest corners of Tamilnadu. So much so Aravind has become today a model for the world. Dr. V achieved all this in his life time, because, every thing Dr. V did had its origin in a deeper source, the divinity in man. He became conscious of it after he had his first darshan of Shri Aurobindo in 1950."

Dr. V believed that spirituality was not separate from life, whatever one did had to be done with a spiritual approach. He knew that the same divine is in every one and in every thing. Therefore the doctors, the nurses, the workers and even the patients were not only the part of his own family but were of himself. And he said, "in that consciousness there is none but yourself you are helping, it is yourself you are healing...."

It was indeed an expansion of limits of self to experience the unlimited and universal Self.

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Dr. V passed away on 7<sup>th</sup> July 2006, at the ripe age of 88, in Madurai.