

## **Best Practices at MGIMS Sevagram Social Service Camp**

### **1. Title of the Practice**

Social Service Camp: a community immersion program for medical students

### **2. Objectives of the Practice**

This Social Service Camp is conducted in the first year of MBBS around the Dussehra vacation with the following objectives:

- To orient medical students to rural life and to sensitize them about environmental sanitation, socio-economic conditions and health problems of the individual, the family and the community in rural area
- To provide them early clinical exposure by sensitizing them to the social and cultural factors responsible for health
- To promote basic leadership and communication skills among students
- To promote the importance of the practice of public health

### **3. The Context**

Medical education in India has become confined to the four walls of tertiary care hospital. This results in creation of doctors who are culturally and professionally ill-equipped to deal with the problems of rural communities.

### **4. The Practice**

For each batch of medical students, a village is selected within a distance of 25 Km from the medical college. For this, a resolution is passed by the Village Panchayat and a request is submitted to the institute.

During the first year in medical school, around the Dussehra vacation, all students participate in a fortnight long village residential camp, where they experience the same conditions as the local inhabitants. They reside in the village and learn from the community. Each student conducts socio-demographic, dietary and health appraisals in three or four families. Due to this camp approach which uses community oriented training, medical students gain a heightened understanding of the need for adequate nutrition, safe water and basic sanitation, and of the influence of various socio-economic and cultural factors on health. The concept of family health care is brought home to students with the

help of auxiliary nurse midwives, social workers, health educators, sanitary inspectors, psychologists and social physicians working in the villages.

The roles of village health workers, school teachers and village health committees are examined. The students are also able to observe how villagers themselves identify and solve the health problems and how community leaders, social organizations and village health committee work together for health. This community-academic partnership offers unique opportunities for learning about the social and cultural determinants of health, health promotion etc.

All the individuals in the village are physically examined and OPD and Specialist services are given free of cost during the camp. Patients referred from the camp are also treated free of cost (both outpatient and inpatient care) at Kasturba Hospital if they visit the hospital within 10 days after the camp ends.

#### **5. Evidence of Success**

The feedback from all stakeholders (students, teachers and the community), both through quantitative and qualitative methods has always been extremely positive. We have evaluated this camp in several different ways. Medical students attending this camp strongly feel that this camp helps them learn about the realities of village life, socio-political environment affecting health and imparts them cultural competence (respecting diversity, gender sensitivity, compassion/empathy). They said that it helped them recognize the rights and equal value of all people, gave them the concept of health as a human right and made them believe in health equity. It helped them in developing several personal and professional attributes, e.g. communication skills, team work, leadership, being a change agent. And, it also helped them develop a research aptitude and prepare them as life-long learners.

#### **6. Problems Encountered and Resources Required**

As expected, organizing a residential camp for 100 students is going to have several challenges. Arranging for accommodation with the most basic amenities (e.g. toilets and bathrooms) for 100 students (boys and girls) and approximately 20 support staff (including teachers) who stay with them, getting prepared for power cuts, fear of insect bites, and occasionally problems arising due to the local village level politics are some of the challenges. However, 47 years of organizational experience in conducting these camps comes handy. It is team work which involves all academic departments and administrative



sections of the institute. Taking out two weeks of time from a packed schedule of preclinical subjects is also a huge challenge.

For almost all the students, it is for the first time that they stay in a village in a dormitory setting. However, the orientation camp at MGIMS, Sevagram when the students stay in Gandhi Ashram for 15 days prepares them to a large extent for this camp.

The resources required for organization of the Social Service Camp includes the following:

- **Preparatory activities** include several meetings with the villagers, survey of all households, which is supervised by a biostatistician and a social scientist and is conducted by 5-6 social workers/ ANMs over a week duration
- **Human resources:** Approximately 20 support staff (including one teacher, 3-4 post-graduate students, 3-4 ANMs and/ or social workers, one electrician, one security person, several safai workers and approximately a team of 8-10 persons to manage the kitchen) stay 24x7 in the residential camp. Apart from this, another 30 persons (including teachers from community medicine, specialists from different clinical disciplines, post-graduate students, social workers, ANMs, Pharmacists, Lab technicians, Health educator, Artist, Sanitary inspector, electrician, plumber visit the camp daily from MGIMS, Campus.
- **Material resources:** The material resources required are:
  - Arranging accommodations for residential stay for the students and support staff in the village, construction of toilets, plumbing, electrical fittings, Pandal for conducting camp activities, arranging for kitchen
  - Arrangements for running OPDs at village level – General OPD as well as OPDs for different clinical departments, drugs for dispensary, provision of investigations
  - Organization for health exhibition
  - Arrangements for organizing classes for students in camp setting
  - Two – three vehicles ply 3-4 times daily from the campus to the camp venue

## 7. Notes

After the social service camp, the students visit the adopted village every month on a Saturday, which forms the total community immersion experience of students at MGIMS, Sevagram.

It is also important to understand the Social Service Camp together with other curricular innovations at MGIMS, Sevagram.

MGIMS, Sevagram has strategically mobilized community for health action in all villages of its field programme area. During the Social Service Camp, students get to interact with the community-based organizations in the adopted village. This helps students learn how community participation for health could be best invoked.



*Am*  
DEAN  
MGIMS, SEWAGRAM