



MAHATMA GANDHI INSTITUTE OF MEDICAL SCIENCES, SEVAGRAM

Nurturing creativity, analytical skills and innovation among students

CREATIVITY:

Cultural programme in Orientation Camp: Every year, first year undergraduate students showcase their talent in the cultural programme organized in the valedictory function of Orientation camp. The entire program is primarily planned by students and they use creative ideas to make it more interesting. Socially relevant issues are raised through skits. Since we admit students from all over the country, national integration is reinforced through performance of dances, songs and activities from all parts of India.





Painting competition in Orientation camp:- Like every year, interested students draw and paint various art pieces on canvas. As a tradition, we display these in the valedictory function to choose the best paintings. All the paintings are then used as a decorative art pieces in our premises.



College magazine:

Each year, students release their magazine Sushruta. This magazine has three language sections, a clinical section and an art section. This can be accessed here:

<https://www.mgims.ac.in/index.php/research/in-house-publication>

Cultural function at Social Service Camp: Every year in the Social service camp in the adopted villages, students hunt out talents from among the villagers. They organize a cultural function. Starting from the planning to anchoring of the programme, all these are primarily done by our first year UG students.



They also organise various competitions with help of social workers of community medicine department during the social service camp for the villagers like: Rangoli competition, Healthy baby competition and healthy elderly competition etc.



ANALYTICAL SKILLS:

In every Social Service Camp, we also demonstrate various participatory learning and action techniques. Students observe the entire process and then we ask them to present a summary with the all students. PLA techniques like social mapping, focus group discussions, Venn diagram, seasonal calendar, transect walk etc. are demonstrated and conducted





One of the major activities in Social Service Camp and ROME camp are group research projects. Students discuss among themselves regarding major issues/questions which they have felt is important in their adopted village and they finalise their research questions with help of faculty members. Then students prepare a protocol and conduct rapid survey using electronic data collection tool. Every year in both camps students conduct at least four group projects. Many times after completion of the camp they publish it/ present it in scientific forum and also win prizes.



List of group research topics in Rome 2021 camp:-

- a) Covid vaccination coverage in rural part of Central India and factors inhibiting vaccine acceptance
- b) Prevalence of depression in rural Wardha
- c) Treatment compliance and health-seeking behaviour of hypertensive and diabetic patients in rural Wardha
- d) Experience of women regarding ANC services received by them in rural Wardha: A qualitative study
- e) A time-motion study in rural Wardha on ASHA and Anganwadi workers during the covid pandemic and studying the facilitating and inhibitory factors affecting their performance
- f) Physical Activity and Dietary patterns among adults in rural areas of Wardha district

INNOVATIONS:

Every year in ROME camp we organise school health education session which is followed by development of IEC materials. Students create educational material in groups. These are then presented by students in nearby schools in the rural area. Students use many innovative techniques to convey message to rural masses.





UG COVID warrior volunteer groups:

During the COVID pandemic, our UG students came forward to join hands with the hospital staff and formed a volunteer group. They mainly helped us to develop effective social media messages to circulate in our field practice areas. They also developed materials on COVID awareness, vaccine myths etc.

Appropriate technology session:

We also conduct one session in every social service camp on appropriate technology to sensitize our students regarding innovation for real-life problems with suitable examples. E.g demonstration of soak-pit



Field visits:

After completion of 15 days residential social service camp; students visit the same village and adopted families once in a month for next three years. Each field visit has topic which we expect our students to study in their families and to provide a solution. There are many interesting case studies where our students have provided innovative solutions at the individual/family or community level.





Schedule for ROME (Re-Orientation of Medical Education) Camp July 2021										
Date	8am – 9am	9am - 10am	10 am -11 am	11am - 12pm	12pm - 1pm	LUNCH BREAK		2pm - 3pm	3pm - 4pm	4pm – 5pm
8 th April Friday	Introduction and briefing about ROME camp activities	ROME Camp: The Concept Dr. BSG	Workshop on Rapid Survey Methodology (SSG, CM, DGD, AVR, AK, AM, AJ, AD)			LUNCH BREAK	Workshop on Rapid Survey Methodology (SSG, CM, DGD, AVR, AK, AM, AJ, AD)		Identification of research topics (in groups)	
9 th April Saturday	Tool development for RS	Primary health care: AM		Developing health education materials: AVR			RMNCH+A – AJ, PGs (interactive session)		Tool development for RS	
10 th April Sunday	Tool development for RS		Hands-on Data entry using Kobo: AK	Discussion on PHC/SC/ HWC checklist			Clinico Social History taking: PGs		Tool development for RS	
11 th April Monday	Batch A (1-50): Data Collection for RS – Warud (8-10 am) Clinico-social case discussion (10:30 am -1 pm) Batch B (51-100): Visit to Anji PHC and Pipri HWC						LUNCH BREAK	RBSK: Mr. Prabhakar Patil (Dist. Coordinator), SSG		Understanding health system at district level: DHO
12 th April Tuesday	Batch B (51-100): Data Collection for RS – Warud (8-10 am) Clinico-social case discussion (10:30 am -1 pm) Batch A (1-50): Visit to Anji PHC and Pipri HWC					NPSP and MR surveillance: Dr Thosar (SMO, WHO)		Developing health education materials for patient/beneficiary Counselling and health education		
13 th April Wednesday	Data Collection			NVBDCP: Dr. Jayashree Thote (DMO)		NTEP: Dr. Seema Mankar (DTO)		Developing health education materials for patient/beneficiary counselling and health education		
14 th April Thursday	Trip to Bordharan					LUNCH BREAK		Guest lecture: Role of international organizations in public health: Dr. Aparna Deshpande, UNICEF		Guest lecture (NGO and public health): Dr. Yogesh Kalkonde

15th April Friday	ICDS Scheme: Interactive session - PGs	Discussion: observations from visit to SC/HWC/ PHC		Management of pandemic (COVID-19) – perspectives and learnings for District administration: Dr Sachin Ombase, CEO ZP
16th April Saturday	Facts for life: Discussion	Health Insurance schemes: AD	NBCP: Dr. AK Shukla	NACP: DAPCU
17th April Sunday	Preparation for Valedictory			Valedictory function

IDSP-IHIP: Dr Vinit Zalke (District epidemiologist)	NHM and Routine Immunization programme: Dr Prabhakar Naik (Dist. RCHO)
Data analysis/ preparation of report	

‘Essential National Health Research’ (ENHR) Workshop

June 2020 for UG 2018 batch

First contact session and subsequent exercises (8th June)	
	Introduction of participants and Ice-breaking
	ENHR – concept, need, process – Dr. B S Garg
	Identifying a health problem – Dr. Anuj Mundra
	Group work – Identify the health problems - All participants
	Health problem to Research question – Dr. Abhishek Raut
1 hour	Group work – Framing the research question – group facilitators
Second contact session and subsequent exercises (11th June)	
5 min for each group	Plenary Session – Presentation of Research Question – All participants and facilitators
	Writing a research protocol – Dr. Subodh Gupta
	Searching the Literature – Dr. Ashwini Kalantri
	Hands on Literature Search
Third contact session and subsequent exercises (15th June)	
2 hours	Group work*: Protocol writing – group facilitators
15 min for each group	Plenary – Protocol presentation - All participants and facilitators
Fourth contact session and subsequent exercises (18th June)	
	Designing Data collection tool – Dr. Chetna Maliye/ Dr. Amey Dhatri
2 hours	Group work – Designing Data collection tool – group facilitators
	Computer Assisted Personal Interviewing/ Kobo toolbox –Dr. Arjun Jakasania/ Dr. Ashwini Kalantri
Fifth contact session for finalized protocol presentation (22nd June)	
10 min for each group	Plenary – Presentation of Questionnaire - All participants and facilitators

* Relevant study design, sample size & sampling strategy to be discussed in their respective groups by Faculty facilitators

‘Essential National Health Research’ (ENHR) Workshop

2018 MBBS batch, MGIMS Sewagram

June 2020

Group	Facilitators	Mentor
Group 1	Dr. Abhishek Raut Dr. SarinKumar PS Dr. Komal Muneshwar Dr. Trupti Chavan	Dr. B S Garg
Group 2	Dr. Anuj Mundra Dr. Rutuja Kolhe Dr. Nikhilesh Nagtode	Dr. Subodh S Gupta
Group 3	Dr. Amey Dhatrak Dr. Arjun Jakasania Dr. Sophiya K Dr. Ruchita Khandre	Dr. Chetna Maliye
Group 4	Dr. Ashwini Kalantri Dr. Shiv Joshi Dr. Pranit Patil	Dr. D.G. Damhare

List of participants

1. Karan Karwani
2. Pulkit Nandal
3. Tejaswini Meshram
4. Pranjal Jain
5. Shashvithaa Shivakanthan
6. Deepanshi
7. Shristy Mishra
8. Ritwiz Mishra
9. Shayon Mukherjee
10. Adarsha Gupta
11. Nilay Mitash
12. Anmol Wadhwa
13. Shriyash Gadade
14. Shabbir Gheewaala
15. Sudeep Meena
16. Dhruv Mistry
17. Prachi Nikose
18. Girik Rohira
19. Soham Parulkar
20. Shambhavi Jha
21. Sonal Sachdeve
22. Kashmira Zopate
23. Ajay Pole
24. Vaishnav Pai
25. Mihir Waykole
26. Bhumika Fulmali
27. Renuka Kongre
28. Hrutuja More
29. Yugal Jogad
30. Saransh Mourya
31. Aakash Pise
32. Sadique Ameen
33. Gopinath Rajagopalan
34. Rishabh Bansal
35. Lucky Jesrani
36. Mahesh Phad

Proposal developed at end of the workshop from one group

Title:

The availability and utilisation pattern of health care facilities and the factors associated with its inaccessibility in Rural Maharashtra - A mixed method study

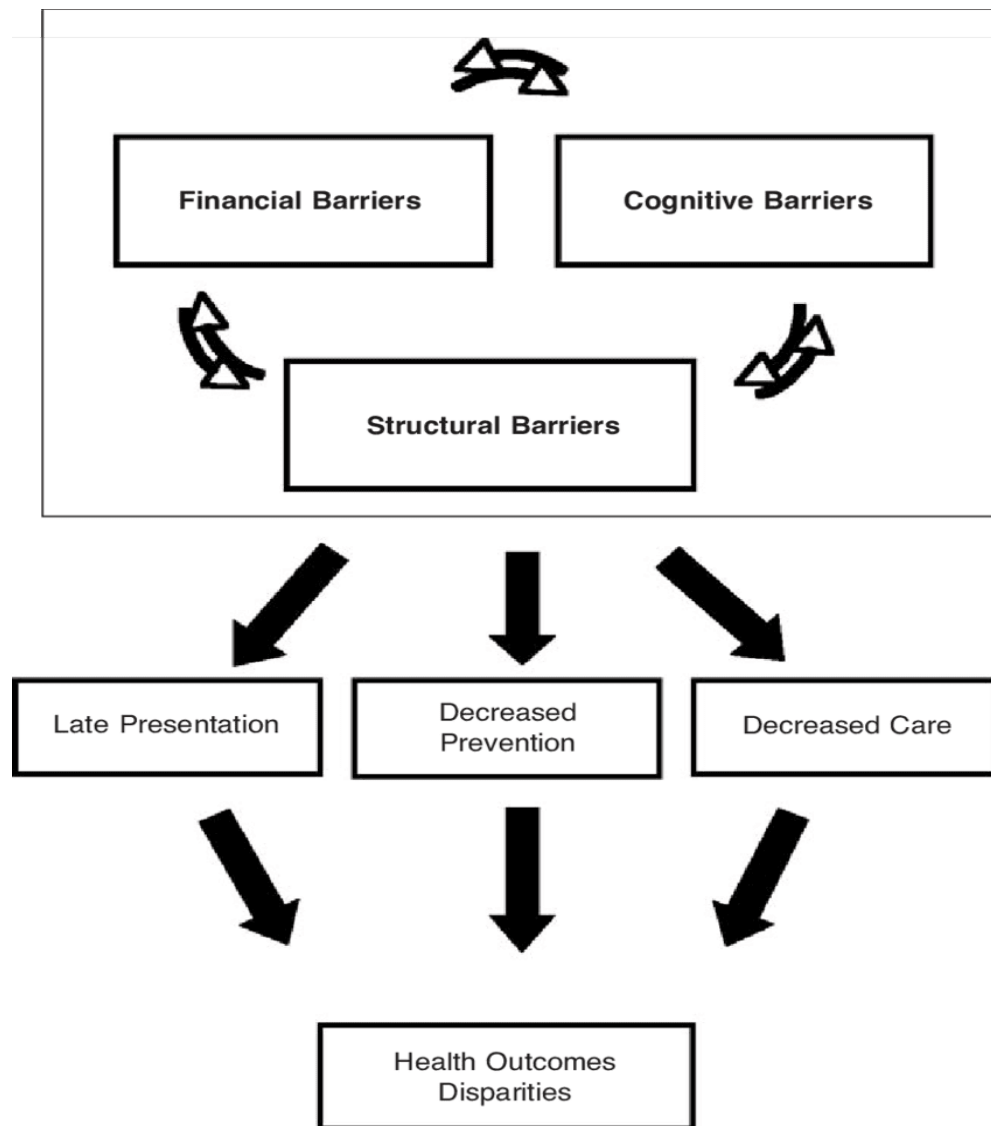
Introduction:

Primary health care is defined as essential health care that is made universally accessible to individuals and acceptable to them through their full participation at a cost the country and community can afford. Equitable distribution is one of the main principles of providing a primary health care. Low income countries have poor utilization of health care facilities and sometimes access to the desired health care facilities is far from reality. Universal health coverage aims at providing universal and accessible health care to all hard to reach and difficult to reach populations, especially the rural villages and the tribal areas.

Although various health care facilities are available at the village level, people often face barriers to access healthcare services, resulting in negative health outcomes. While India has the largest health sector in the world, only one-fifth of healthcare expenditure is publicly financed. Those services that are already available in the area lack in quality and quantity that forces the individual to travel far and wide to access a particular service of health care. However the utilization patterns of the residents of a village differ according to their needs. About 70% of India's population lives in rural areas, and make about 3\$ per day, which is used up in daily necessities like food and not towards healthcare.

When it comes to accessing a particular health care service, various barriers stand in the way such as distance, lack of awareness, lack of need, lack of counselling, failure to provide quality services, non availability of essential drugs, failure to properly guide the people regarding the services that is to be accessed by them and many others.

The Health Care Access Barrier model identifies pertinent financial, structural and cognitive barriers that can be measured and potentially modified. The Health Care Access Barriers (HCAB) Model facilitates the design of community health interventions by targeting measurable and modifiable determinants of health status. The HCAB is not a comprehensive that attempts to use all the determinants; rather it targets modifiable access barriers in order to serve as a practical tool for root cause analysis and community based interventions. The HCAB model sets health care access barriers as the units of analysis and provides an approach that focuses on the causal pathways between the access barriers and the adverse health outcomes.



Rationale:

Access to proper health care facilities is everyone's right and should be available to people from all socio-economic classes. Hence assessing the problems faced by the people of Mandwa will give an insight of these problems and help provide a solution to them. This will result in better access and utilization of the health care facilities and ultimately strengthen community health. Here in this study we are trying to find health care facilities available in village Mandwa, their utilisation pattern and barriers to access desired healthcare.

Objectives:

1. To study the utilisation pattern of the healthcare facilities in the village Mandwa.
2. To explore factors associated with inaccessibility of the healthcare facilities.

Methods:

Study design:-

A mixed method study

Study area :-

The study will be conducted in one of the adopted villages under the field practice area of Department of Community Medicine, MGIMS

Study period :-

The study will be conducted for a period of 3 months.

Study population :-

The study will be conducted by interviewing the community health leaders and health workers of the said village and questionnaire will be drafted on the basis of the interviews taken which will be used to explore the various factors associated with inaccessibility of health care facilities.

Sample size :-

Initially Participatory Learning and Action (PLA) techniques will be carried out with the selected residents of the village to know in brief the various health care facilities available and their utilization pattern for the same following which Key Informant Interviews will be conducted.

Sample size- Key Informant Interviews:

An informed consent will be sought after which around 8 Key Informant Interviews will be conducted, the Key Informants being Sarpanch, ASHA, Anganwadi worker, Social Workers representing the supply side and four active members of the residents of the village representing the demand side.

Based on the Key Informant Interviews a semi structured questionnaire will be prepared using KoBo Toolbox and around 50 residents belonging to above poverty line and 50 residents belonging to below poverty line will be interviewed.

Sampling technique :-

For the Key Informant Interviews, a convenient sampling method will be adopted. To explore the factors associated with inaccessibility of healthcare facilities, simple random sampling will be done. List of residents with APL/BPL status will be sought from the Gram Panchayat and using a random number generator, 50 residents belong to APL and 50 residents belonging to BPL will be interviewed using the semi structured questionnaire and their responses will be recorded in KoBo Toolbox.

Inclusion criteria :-

Participants above 18 years of age, who have been living in Mandwa for at least a year and have given consent.

Exclusion criteria :-

Those below 18 years of age

Those who have been residing in Mandwa for less than a year.

Data collection:

After seeking a written informed consent, Key Informant Interviews will be conducted from which various themes will be analysed. Based on this a semi structured questionnaire will be prepared for interviewing the locals of the village. The data will be collected through the KoBo tool box.

Data analysis:

Data obtained will be entered in excel sheet and analysed using EPIINFO.

Rapid Survey Methodology Workshop

ROME Camp 2022 (2018 batch)

Time	Session	Faculty
10 AM – 10.30 AM	How to identify a public health problem	Dr Subodh Gupta
10.30 AM – 11.00 AM	Group work: Identifying public health issue for rapid survey	Faculties
11AM – 11.15 AM	Tea break	
11.15 AM – 12 MD	Introduction to rapid survey method	Dr Chetna Maliye
12 MD – 12.30 PM	How to write objectives/ research question	Dr Anuj Mundra
12:30 PM – 1 PM	Group Work: formulating objectives/ research question	Faculties
1 PM – 2 PM	Lunch Break	
2 – 2.30 PM	Sampling techniques	Dr Amey Dhattrak
2.30 – 3.30 PM	Group work: Writing methodology	Faculties PGs
3.30 – 3.45 PM	Tea Break	
3.45PM – 4.15 PM	Group work: presentation of methodology	Faculties PGs
4.15 PM – 5 PM	Group work: Tool preparation	Faculties PGs

Student led activities: links to reports

Youtube video link for Ganesh festival held in Virtual mode

<https://youtu.be/WG514ikuIBA>

ENHR, ROME, SSC, Orientation camps generic description on the institutional website link:

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<https://www.mgims.ac.in/files/NAAC/Best%20Practices.PDF>

Student-led activities report on institutional website:-

<https://www.mgims.ac.in/index.php/academics/students-activities>

Sushruta '20, the 45th edition of the Annual Magazine of MGIMS

<https://www.mgims.ac.in/index.php/research/in-house-publication>

Schedule: Social Service Camp (2020 Batch), Bhankheda

Date	8-9am	9-10am	10-11am	11am-12pm	12-1pm	3-4pm	4-5pm	5-7pm
28 Aug 2021	Preparation for inauguration		SSC Inauguration		Village Mapping/ interaction with PRI PVB	Reflections SSG	Communication with the Families SW	Allotment of Families All PGs
29 Aug 2021	The concept of SSC SSG	Family and Community Diagnosis AVR/AD	Family and Village Schedule PGs/SWs	Social Determinants of Health and Community Mobilisation PVB/CM		Village Visit Introduction to families Demo of Exhibition		
30 Aug 2021	Environment Health and Housing AK/AM		PHC delivery in India AD	Safe Water with demo DGD	Identification of Ophthalmic problems in elderly Dr AK Shukla	Village Visit Environmental Health, Housing and SLI		
31 Aug 2021	Journal Completion	Leadership in Healthcare BSG	Mental Health and Addiction CM	Focused Group Discussion and In Depth Interviews PVB		Village Visit Adult Schedule (Addiction, Stress, NCDs, Physical Activity, BMI)		
1 Sept 2021	Immunisation AK/AM	Nutrition and Health CM	Nutritional Assessment PGs/AK/AM		Nurturing care for children SSG	Village Visit Child Schedule		
2 Sept 2021	Journal Completion	Equity in health AVR	Interaction with VHNSC Members AJ		Being a change agent SSG	Village Visit ANC Schedule		
3 Sept 2021	Journal Completion	Adolescent well being CM/SSG	Interaction with KP and SHG PVB/SWs		PLA Demo PVB	Village Visit Adolescent Schedule		
4 Sept 2021	Journal Completion	Family Diagnosis	Reflections and feedback SSG	Interaction with NGOs SW		Village Visit		
5 Sept 2021	Family Objectives	Journal Checking and preparation for Valedictory Function		Presentation of Community Diagnosis All Faculties and PGs		Valedictory Function		

Students will be given to read sections of Facts for Life book daily at the end of session. They are expected to read and participate in an interactive session based on the section the next morning.

Mini Bus Schedule:

Date	Time	Reason
28 Aug 2021	9AM	Ferrying members of village for inauguration
29 Aug 2021	3PM	Village visit
30 Aug 2021	3PM	Village visit
31 Aug 2021	9AM	Ferrying AA members
	3PM	Village visit
1 Sept 2021	3PM	Village visit
2 Sept 2021	9AM	Ferrying members of VHNSC
	3PM	Village visit
3 Sept 2021	9AM	Ferrying members of KP/SHG
	3PM	Village visit
4 Sept 2021	9AM	Ferrying members of NGO
	3PM	Village visit
5 Sept 2021	9AM	Ferrying members of village for valedictory

Groups:

Group	Roll no	Faculty	PGs	Social Workers	Intern
Group 1	1-25	DG Dambhare/ Anuj Mundra	Ruchita/ Mohnish	Shubhangi Patil/ Jaiprakash More	Shashank Jangid, Riddhi Patel (29-30 Aug) Shreya Namjoshi, Simran Raka (31 Aug-4 Sept)
Group 2	26-50	Abhishek Raut/ Ashwini Kalantri	Pranit/ Mudita/ Badal	Praveen Bhusari/ Sandeep Sute	Sakshi Chandak, Priya Jain (29-30 Aug) Shraddha Sidgur, Snigdha Sharma (31 Aug-4 Sept)
Group 3	51-75	Subodh Gupta/ Amey Dhattrak/ PV Bahulekar	Sophiya/ Naveen/ Nikhilesh	Alka Kakde/ Chanda Bhondwe	Shubham Sarangpure, Sandra Kiran (29-30 Aug) Suman Meena, Yashika Kotla (31 Aug-4 Sept)
Group 4	76-100	Chetna Maliye/ Arjun Jakasania/ MS Bharambe	Trupti/ Devyani	Surendra Belurkar/ Alka Gaulkar	Sharad Yadav, Pradyut Mallick (29-30 Aug) Teresa, Utkarsha Anwekar (31 Aug-4 Sept)

All interns, PGs and Social Workers will visit the village daily

1	Panchayat (Gram Sevak)	1-5	A
2	SHG	6-12	A
3	Federation (MSRLM)	13-18	A
4	Kishori Panchayat	19-25	A
5	Under 5 Children (caregiver)	26-30	B
6	6-10 children (caregiver)	31-34	B
7	Adolescents Boys	35-39	B
8	Adults Males	40-44	B
9	Elderly Males	45-50	B
10	Adolescents Girls	51-55	C
11	Adults Female	56-60	C
12	Elderly Female	61-65	C
13	ASHA	66-70	C
14	AWW 1	71-75	C
15	AWW 2	76-81	D
16	ANM/ MPW	82-86	D
17	RMP	87-92	D
18	School Teacher (High/Primary School)	93-100	D

OPD duties of interns in Bhankheda:

Date	Interns
29 Aug	Riddhi Patel, Sakshi Chandak
30 Aug	Sandra Kiran, Pradyut Mallick
31 Aug	Shreya Namjoshi, Yashika Kotla
1 Sept	Suman Meena, Utkarsha Anwekar
2 Sept	Simran Raka, Snigdha Sharma
3 Sept	Teresa, Shraddha Sidgur
4 Sept	Utkarsha Anwekar, Snigdha Sharma

Orientation Camp 2021 Batch

Teaching Schedule

Venue: Yatri Niwas, Ashram Pratishtan, Sevagram

Duration: 03 – 09 April 2022

Date	10 – 11 AM	11 AM-12 PM	2 – 3 PM	3 – 4 PM	4 – 5 PM	5 - 5.45 PM	6 - 6.30 PM
3/4/2022	Gandhian Thought*	Gandhian Thought	Gandhian Thought	Gandhian Thought	Guided visit to Ashram - Dr Siby Joseph		Prayer
4/4/2022		Screening of the film - Mahatma			Interaction with Sushri Chatura Raskar		Prayer
5/4/2022		Gandhian Thought	Gandhian Thought	Gandhian Thought	Peace Walk		Prayer
6/4/2022		Gandhian Thought	Gandhian Thought	Gandhian Thought	Personal & professional development		Prayer
7/4/2022		Workshop on VIHASA			Interaction with Sushri Ushaben	Interaction with Dr BS Garg	Prayer
8/4/2022		Gandhian Thought	Gandhian Thought	Gandhian Thought	Workshop on VIHASA		Prayer
9/4/2022		Gandhian Thought	Gandhian Thought	Gandhian Thought	Valedictory Function followed by high tea		

* On 03 Apr 2022, introduction session will start at 9.00 AM

** Bus will start from the hostel at 8.30 AM on 03 Apr 2022 and at 01.30 PM on 04 – 09 Apr 2022. For return, bus will start at 6.30 PM from the Gandhi Ashram on all camp days.



Dr Subodh S Gupta
(Director Professor & Head)

Community Medicine
Professor & Head
Dept. of Community Medicine
M. G. I. M. S. SEVAGRAM.



On the occasion of

GANDHI JAYANTI

*students of Mahatma Gandhi
Institute of Medical Sciences,
Sevagram cordially invite you to
a virtual celebration of the 151st
birth anniversary of the
Mahatma on:*



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