

Community Activities

Department of Community Medicine

Women's Self-Help Groups

Self-Help Group (SHG) is a very effective tool not only for women's empowerment, but also for overall development of the community. The Department of Community Medicine fully appreciates the critical link between women's empowerment and health empowerment and considers the involvement of women's self-help groups (SHGs) to be the key to the success of any health programme. The Department has now achieved the formation of 3-4 SHGs per village in all the villages of its field practice area; viz. PHC Anji, Kharangana, Gaul and Talegaon. With passage of time, the members of SHGs have learnt to manage their groups individually and have developed as member-owned and member-managed institutions. The Department provides assistance to SHGs to add a health action agenda to their primary financial function (finance plus) so that the women are able to determine health priorities and to play a pro-active role in health care delivery in their villages. A total of 285 self-help groups were functioning on 31 Mar 2017 in the adopted villages of the institute: Anji PHC area (55), Gaul PHC area (50), Kharangana (77), Talegaon PHC area (78), Wardha Urban Health Centre adopted area (25). All the SHGs are linked with banks and have updated member account books.

Kisan Vikas Manch

Kisan Vikas Manch (Farmers' club) has evolved as a way to involve men in the health activities at village level. The programme provides learning opportunities for members to improve their agricultural yield and in turn improve their economical status. The health action agenda is added to the primary purpose so as to empower them to actively participate in the health programme. A total of 10 *Kisan Vikas Manch* (KVM) were functioning on Mar 31, 2018 in the adopted villages of the Institute. In Anji PHC area, a federation of all the *Kisan Vikas Manch* from the villages has been formed in Dec 2008. This is being utilized as a platform to strengthen health

agenda among the men in the program. An E-Chaupalcentre has been established at Anji for the federation of KVM. This centre will be utilized for training of KVM members. A resource centre for *Kisan Vikas Manch* has been developed at KRHTC, Anji.

Adolescent Girls' Groups (Kishori Panchayat)

The Department of Community Medicine has taken an initiative to form groups of non-school going adolescent girls in several villages in Anji, Gaul, Kharangana and Talegaon PHC areas. At the village level, an elected body of the adolescent girls has been formed, which is known as *Kishori Panchayat*. Adolescent-to-adolescent education program is undertaken in all the villages through these groups. These groups have been oriented towards the issues of adolescent health, maternal health, child survival, environmental health, family life education, RTI/STD, HIV/ AIDS etc. In turn, these girls will train their peers and younger adolescents in their villages. The elected body also provides a mechanism for adolescent girls to participate in decision-making at village level. Apart from health issues, other village development related issues are also discussed with this group. The programme ultimately aims to produce leadership qualities in the adolescents and utilizes them for health action at village level. The Department has successfully formed *Kishori Panchayats* in almost all villages of its field practice area. There are a total of 89 *Kishori Panchayats* functional in the three PHC areas adopted by the department: Anji PHC area (24), Gaul PHC area (13), Kharangana (26), Talegaon PHC area (22) and UHC (06). For the members of the *Kishori Panchayat*, various training programmes on nutrition, pregnancy and newborn care, health and sanitation, menstrual hygiene, safe motherhood, first-aid etc. were taken up. Peer educators were identified from the members of *Kishori Panchayat* and they have been trained for HIV/AIDS awareness in a workshop setting. A number of *Kishori Panchayat* members have taken up responsibility of imparting health education to pregnant and post-natal mothers. These groups have

become an excellent means to create health awareness among the adolescent girls. A resource centre for *Kishori Panchayat* was developed at the RHTC, Bhidi in 2008-09.

Village Health Worker Scheme

The Department has ensured one Village Health Worker per 1000 population in all the villages under its field practice area. Majority of them have been converted to ASHA (Accredited Social Health Activist) under the NRHM programme. They have been given continuing support on their training for treatment of minor illnesses and IMNCI training by the Department of Community Medicine.

Health Insurance

Health insurance has been one of the important activities in the programme villages. The Village Health Nutrition and Sanitation Committee (VHNSC) members have accelerated their activity in respect to insurance coverage in their village with the Kasturba Health Society and a total of Rs 39,13,690 has been collected for insurance coverage for the period Jan-Dec 2017. This includes full insurance coverage of 581 community based organizations and 37 villages.

Continuing Education Programme for Anganwadi Workers

Continuing education programmes for the Anganwadi workers are being conducted in the three PHC areas adopted by the Department of Community Medicine. These programmes aim at improving the skills of Anganwadi workers. During these training programmes, efforts are made to provide workers with training on health as well as other issues of early childhood development.

Health and Nutrition Day at village level

The Department of Community Medicine promoted *Bal Suraksha Diwas* (Child Survival Day) on a monthly basis in all the villages of the three PHC areas under the Department. The *Bal Suraksha Diwas* is an expansion activity of the existing immunization day being observed in villages through the Primary Health Centres. Apart from immunization, the activities on the *Bal Suraksha Diwas* include: health and weight

check-up of children of 0-3 age group, ANC check-up, PNC check-up and nutrition and health education. The Village Health Worker, members of SHGs and adolescent girls are being encouraged to participate actively during the *Bal Suraksha Diwas*. The Village Health Nutrition and Sanitation Committees have been entrusted with the responsibility of organizing the day and also ensuring that the beneficiaries access the services. The active participation of the Village Health Nutrition and Sanitation Committee members has led to increased turnouts of beneficiaries during the Health and Nutrition Day at village level and thus increased coverage with maternal and child health services.

Continuing Education Programme for the Health Workers

Continuing education programme has also been started for health workers from the three PHC areas (viz. Anji, Gaul and Talegaon). A total of 60 health workers from these PHC areas participate in the one-day continuing education programme every month, which is aimed at improving their skills in delivering reproductive and child health services in the community.

Family Life Education through Schools

Propounding the need for Family Life Education (FLE) for adolescent girls, the Department of Community Medicine has facilitated family life education in all the high schools and junior colleges of the three adopted PHC areas. Following this, the trained teachers have started imparting family life education in the respective schools and junior colleges. At RHTC, Bhidi, 61 sessions were conducted in seven schools, while 47 sessions in four schools were conducted at KRHTC Anji. In Kharangana 118 sessions were conducted in 15 schools. In Talegaon, 49 sessions were conducted in six schools, while 31 sessions were conducted in six schools at UHC, Wardha.

World Health Day 2017

A postgraduate symposium titled "Depression: Let's Talk" was organized on 7 Apr 2017 on the theme announced on World Health Day 2017. In collaboration with the National Service Scheme, Kasturba Nursing School and Kasturba Nursing College, a poster contest, a slogan contest and a role play contest were also organized.

Health Insurance Scheme

Key Features

- Creates health consciousness in community
- Aims at integrating development of the community in the village
- Makes people aware of powers of self-assertion and collective resistance. People contribute for their health and their village
- Gives more strength to Gram Sabha. Makes it accountable for village health. Forces it to take decisions for village development.
- Provides health care facilities at doorsteps and arranges for hospitalization of those who need it.
- Avoids charity. Creates awareness of human rights. Brings women out of cloud of darkness, silence and helplessness into the mainstream of development.

Scheme 2018

Insurance	Cards	Members
Family	22438	99576
Village	38473	133617
Jawar	3361	14991
Village Institutional	29651	105416
Institutional	1348	3345
Total	95271	356945

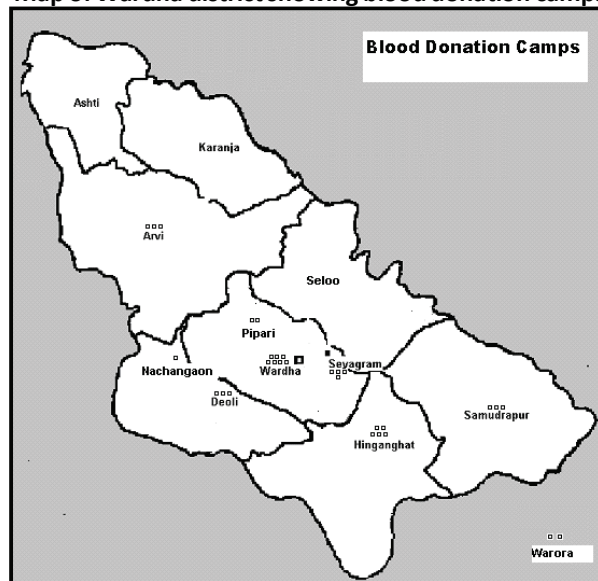
Patients seen at Rural and Urban Health Centres

Urban Health Centre, Wardha	9930
Rural clinics, Anji PHC area	14097
Rural clinics, Gaul PHC area	6192
Rural clinics, Talegaon PHC area	8616
Rural Clinic, Kharangana (Gode)	1427
Rural Clinics, UHC	3253
Geriatric OPD at UHC	330
Mind, Body and Medicine Clinic at UHC	829
Specialist Visits at Anji (Patients)	201
Field visit patients	1395
Total	46270

Blood Donation Camps

- Bhartiya Janta Yuva Morcha, Wardha
- Shri Nav Durga Puja Utsav Samiti, Wardha
- Sai Sadhbhavna Utsav Samiti, Hinganghat
- Chhatrapati Shivaji, Phule, Shahu, Ambedkar Jayanti Utsav Samiti, Shekapur (Mozri), Hinganghat
- Blood Bank, Kasturba Hospital, Sevagram
- Bajrang Yuva Krida Mandal, Akoli
- Tilak Shardsav Mandal & Subhash Mandal, Hinganghat
- Maharogi Seva Samiti, Anandwan (Somnath Project) Warora
- World Blood Donors Day
- Wardha District Body Builders & Weightlifters Association, Wardha
- Sant Kanwarram Seva Mandal, Wardha.
- Sant Nirankari Mandal, Hinganghat
- Sansad Aadarsh Gram, Taroda
- Dr BR Ambedkar Arts & Science Junior College, Hinganghat
- Shri Jai Bhavani Mata Bahuudheshiya Samajik Sanstha, Hinganghat
- Waghadi Foundation, Samudrapur
- Shivsena, Wardha
- Wardha District Saloon Association, Wardha
- BD College of Engineering, Sevagram
- Shri Krushnadas Jajoo Gramin Seva Mahavidyalay, Pipri, Wardha
- Vaishali Nagar Ganesh Utsav Mandal, Wardha
- Kalash Bahuudeshiya Samajik Sanstha, Junona
- National Voluntary Blood Donation Day, Blood Bank, Kasturba Hospital, Sevagram
- Maharashtra Rajya Prathamik Shikshak Samiti, Wardha
- Rabbani Educational Foundation, Hinganghat
- Shri Gurudev Seva Mandal, Paikmari
- Hardayal Govt ITI, Pulgaon
- Uttam Value Steels Limited, Wardha
- Siddharth Vyayam Prasarak Mandal, Hinganghat
- Prahar Paksh, Maharashtra, Borgaon (Meghe), Bhugaon
- 17th Dr Sushila Nayar Memorial Blood Donation Camp, Kasturba Hospital, Sevagram
- Shri Sheshshahi Gurudev Seva Mandal, Shekapur (Bai)
- Anand Niketan Agriculture College, Warora
- Punjabi Sewa Samiti, Wardha
- Earth Yuva Foundation, Pavnar
- Tilak Shardsav Mandal & Subhash Mandal, Hinganghat
- Maheshwari Navyuvan Mandal, Wardha.
- Shiv sena Wagoli Circle, Wagholi
- Dr Sushila Nayar Hospital, Utawali
- MGIMS Students, Sevagram
- Shiv Jayanti Utsav Samiti, Seloo
- Gram Suraksha Dal, Pardi (Chakur)
- Seema Typewriting Institute, Wardha
- Uttam Value Steels Limited, Bhugaon.
- Santh Kanwarram Seva Mandal, Wardha
- Veer Bhagatsingh Gramin Vikas Bahuuddeshiya Sanstha, Seloo
- Sai Sadhbhavna Utsav Samiti, Hinganghat
- Shri Hanuman Devasthan Trust, Sukli (Bai)

Map of Wardha district showing blood donation camps



Strengthening of Public Health Tuberculosis Laboratories working on Newer Diagnostics

Our faculty member has been involved in renovation and management of 9 TB Laboratories working on Newer TB Diagnostics in the states of Karnataka, Tamilnadu, Andhra Pradesh, Telangana, Kerala, and Puducherry.

Evaluation of National Health Programmes:

The Department of Community Medicine has been involved in undertaking the following assessments of National Health Programmes:

- Impact Evaluation of Rajiv Gandhi National Crèche Scheme 2012
- Audit of information regarding malnutrition, under-five & maternal deaths in Melghat tribal area of Maharashtra, 2008 and 2015
- Health system in Maharashtra for addressing NCDs through primary care- A Baseline assessment 2016
- Evaluation of Functioning of accredited Social health Activists (ASHA) in ICDS Related Activities 2012
- Study on Utilization and Impact of Referral services under RCH/NRHM on health outcomes in Wardha 2011-2012
- Evaluation of Janani Suraksha Yojana in Wardha & Chandrapur Districts of Maharashtra 2010-11
- Sentinel Surveillance Unit under National Programme for Control of Blindness 2004-2016
- Baseline Evaluation of National Programme on Prevention and Control of Cardiovascular diseases, Diabetes, Cancer and Stroke (NPCDCS) in three districts of Maharashtra- Pune, Nandurbar and Bhandara, 2016

Diagnostic Camps

This year the institute organized several screening and diagnostic camps. Diagnostic and health camps were organized at Samudrapur, Wardha, Allipur, Kinwat, Mandwa, Pohra and Ekurli. A diagnostic camp was organized in Utawali on 9-10 Feb 2018. The Departments of Community Medicine, Microbiology, Ophthalmology, ENT, Dentistry, Surgery, Medicine, Obstetrics and Gynecology, Pediatrics, Anesthesia, Psychiatry, Radiotherapy, Orthopedics and Dermatology participated in these camps.

Cancer detection camps were organized in Deoli, Sirajgaon, Bhankheda, Waigaon, Chinchkhed, Khapri, Amdi, Arvi, Virul, Khupgaon, Talegaon, Wagholi and Hinganghat. Cancer detection camp were also organized at 28 adopted villages under the Community Based Reproductive Health care Project in Feb-Mar 2018.

Adopted Villages

Dhanora	2014 Batch
Padegaon	2015 Batch
Rotha	2016 Batch
Pavnoor	2017 Batch

The following are the number of patients seen by different departments during diagnostic camps:

Department	No. of Patients
Medicine	2229
Obs/Gyn	526
Pediatrics	975
Surgery	926
Orthopedics	658
Ophthalmology	19433
ENT	661
Dentistry	181
Psychiatry	80
Dermatology	793
Community Medicine	2641
Radiotherapy	742
Utawali	3873
Total	33718

Community Ophthalmology

The Department of Ophthalmology, Kasturba Hospital, MGIMS, Sevagram, has been providing preventive, promotive, curative and rehabilitative eye care. Primary to tertiary level eye care which is currently available to residents in metropolises are provided to poor people living in rural areas and urban slums at their door step. Community-based comprehensive and specialty eye care services are provided to people living in and around Wardha district.

Cataract Blindness Control in Wardha District Project

Under this project, daily screening eye camps have been conducted in all the villages of 8 blocks of Wardha district covering a population aged above 50 years. Screening for blindness and operable cataract is conducted door-to-door. Blind register is prepared at the village level. This year 46,434 villagers have been screened by doctors at their door steps in 855 villages. Individuals aged more than 50 years with visual acuity less than 6/60 due to cataract in either eye who were in need of cataract surgery were motivated, provided free to-and-fro transport and brought to Kasturba Hospital Sevagram for operation. All services- including surgical treatment, medicines, intra-ocular lenses (IOL) and glasses- were provided free of cost. Computerized data bank is maintained to keep records pertaining to all patients screened and operated for follow-up.

In the current year, 5639 cataract surgeries were performed. In 5638 patients, IOL implantation was done and conventional cataract surgery was performed in 10 patients. Visual acuity of 46,434 persons (aged > 50 years) was tested by trained paramedical workers and 15478 villagers who had visual acuity <6/60 was examined by eye specialists at their door steps. 6014 patients were referred to Kasturba Hospital and of these 5756 patients were provided free transport facility.

This project has made a huge contribution to control of cataract blindness in Wardha District. Until now 5,11,136 villagers aged above 50 years have been screened at their door steps in all the 855 villages of Wardha district. So far 66085 poor rural patients from the project area who were suffering from curable blindness have undergone cataract surgery at Kasturba Hospital and 65,159 (98.6%) of these were successfully implanted with intra-ocular lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early post-operative visual rehabilitation of patients. Through this project, benefits of modern cataract surgery have been made accessible to poor, rural patients suffering from curable cataract blindness in Wardha district.

Dr Sushila Nayar Eye Bank

Dr Sushila Nayar Eye Bank is functional in the Department of Ophthalmology, Kasturba Hospital which promotes eye donation activity and provides facilities for corneal transplantation to patients suffering from corneal blindness. The eye bank is registered with Government of Maharashtra and affiliated to the Eye Bank Association of India. During this year, 82 eyes were processed in the eye bank. Out of these, 34 eyes were collected from donors in Wardha district and 48 eyes were brought from Govt. Hospital, Chandrapur and Lions Eye Bank Chandrapur. Out of 82 donated eyes, 29 had corneas suitable for transplantation and 29 patients were provided facility for keratoplasty (corneal transplantation) free of cost. Members of two voluntary organizations were trained in grief counseling and motivation for eye donation.

Lions Eye Centre Melghat

Lion Clubs International Foundation under the project grant SF 1802/ 3234 –H1 of Rs 40 lakhs has provided

necessary diagnostic, surgical equipment and vehicle for establishing Lions Eye Centre Melghat at Dr Sushila Nayar Hospital Utawali.

Community ophthalmology services were started at Dr SN Hospital Utawali from September 2017 for which onesenior resident and one junior resident from the Department of Ophthalmology are being deputed on rotation basis. Till 31 Mar 2018, 983 patients have been provided eye care services at the centre.

Under the National Programme for Control of Blindness, KHS has entered into an MoU with District Blindness Control Society Amravati for providing free cataract screening and surgical services for cataract patients from 152 villages in Dharni Taluka. After inspection by district health authorities we have been permitted to start Eye OT at Dr SN Hospital Utawali by the Civil Surgeon of Amravati in Mar 2018. During this month, 38 cataract surgeries with IOL implantation have been performed.

Cataract Screening camps			
Place	No. of Patients	Place	No. of Patients
Civil Hospital Wardha	3165	Arvi	48
Amravati Screening Centre	912	Gadchandur	898
Wardhamaneri Screening Centre	503	Korpana	648
Karanja Ghadge	59	Lions Club Nagpur	61
Talodi (Balapur)	889	J B Sanstha Wardha	368
Samudrapur	55	Social Service Camp Pavnur Anji	35
Ballarpur	289	Chimur	396
Sahur Camp	72	Virur Station	366
Jiwati Camp	546	Chunala	625
Parsodi (Kalamb)	28	Juni Padoli	65
Borda (Zullawar)	55	Warvat	68
Chorgaon (Chandrapur)	87	Pendhari	1221
Durgapur	128	Ralegaon	308
Bembal	212	Talodi (Bhangaram)	956
Indiranagar	84	Ramnagar Wardha	74
Pandharkavda	472	Nandafata	380
Yerandgaon (Hinganghat)	28	Urjanagar	98
Satefal	16	Dhotra	88
Dewada	147	Sant Gulab Baba Math Chandrapur	126
Durga Pooja Utsav Samiti Wardha	492	Sawli Mul	848
Ratnapur	1203	Gondpipri	188
Gandhi Jayanti Camp KHS	1395	Maheshwari Bhavan Wardha	465
Bagla Convent Wadala Chimur	204	Mool	62

National Society for Prevention of Blindness			
(M.S. Branch)			
	President	:	Dr AP Jain
	Secretary	:	Dr AK Shukla
	Treasurer	:	Dr Smita Singh
	Joint Secretary	:	Dr AM Mehendale
	Members	:	563
Activities			
● Awareness camps on corneal blindness in 4 blocks of Wardha district covering 20 villages			

Utawali Project, Melghat

Coordinator: Dr S Chhabra

Melghat is a tribal area in Dharni and Chikhaldara of Amravati district. Located 250 Kms north-west from Sevagram, this area attracted wide media coverage because of malnutrition-associated deaths in the last decade. Three-fourths of the population is tribal- inhabited by Korku Adivasis. Most people, poor, illiterate and struggling to make both ends meet, live in dark ages and have little or no access to health care facilities, education and communication channels. To access specialized neonatal care most people have to travel 160 Kms on a difficult and hilly terrain. Men, women and children trapped by the grimmest poverty and are further hit by inequality of health services. Children, in particular are the worst sufferers. Most of the sickness and deaths are due to malnutrition, pneumonia, malaria and diarrhoea.

The institute planned a long term project in this area and posted an Associate Professor in Medicine, and an Ophthalmologist, who have voluntarily opted to reach the unreached. A base hospital at Dharni -Trimurti Hospital and 36 villages of Melghat have been chosen for research work. These villages are difficult to access, lack proper transport facilities and are located in the midst of dense forest and hills about 50 Kms from Dharni. Health education on malnutrition, breast feeding, diarrhoea and sexually transmitted diseases has been started since the last 8 years. This area is known for the highest under-five child mortality (80 per 1000 live births) and the highest mortality in the age group (16-50 years) in Maharashtra.

Kasturba Health Society has been providing health facilities in this region through the Mahatma Gandhi Adivasi Hospital and Dr Sushila Nayar Netralaya since the last 16 years. KHS had been running an OPD and 6-bed hospital as part of its Tribal Health Research Project in Melghat since the last 16 years. However in view of high maternal and infant mortality rates, it was decided to take this initiative forward and expand this endeavour with the help of the faculty and residents of MGIMS.

The Kasturba Health Society (KHS) started its OPD in the Dr Sushila Nayar Hospital (earlier called Mahatma Gandhi Adivasi Mother and Child Hospital) on 1 Jan 2012. A 30 bed hospital for women and children in the tribal area of Utawali, Dharni was also initiated with funding support from the Shri Brihad Bharatiya Samaj, a Mumbai-based non governmental organization. The Government of Maharashtra has recognized this as a referral unit.

A multispeciality hospital has been commissioned on the site on 4 Feb 2016, and 7.5 acres of land has been acquired for the purpose. A team of obstetrician-gynecologists, pediatricians, anesthetists, medical officers, interns, administrative officer and nurses are working at Utawali hospital round the clock and managing emergencies, outpatients and inpatients. The team soon realized that more than ill-health, they had to battle the social circumstances. The tribal folk had their unique beliefs, superstitions and cultural practices. Coupled with these prejudices, poverty and illiteracy, it has been an uphill task to counsel patients and ensure compliance. It is a challenge, but the team has been running an operation theatre too in these resource-limited settings. The doctors working here have several heartening stories to share of how they managed critical patients using their ingenuity and expertise. The hospital is now equipped with essential infrastructure including blood storage facilities (whole blood and components), instruments for anesthesia, newborn resuscitation, multipara monitors, suction machines operation tables etc. have been procured. Earlier there were no facilities for conducting Caesarean sections in the entire area. The very first Caesarean section in Melghat was conducted in Utawali hospital on 20 Jan 2012. The first hysterectomy was done to remove a large uncommon ovarian tumor

on 15 Feb 2012. Caesarean sections, major and minor gynecological surgeries are now regularly being conducted in the hospital. An USG machine has been installed with the approval of competent authorities. Permission to perform female sterilization and induced abortion has been obtained.

The area is prone to load shedding, and hence a new 7.5 KV generator has been installed in the hospital. A pipeline has been laid from Utawali village to the hospital to counter the water scarcity. Arrangements have been made to enable proper waste disposal and sanitation. A total of 100 villages receive community based maternal, neonatal care in Dharni block of Melghat.

In 2017-18, a total of 9921 patients were seen in the OPD. 1052 patients were admitted in the wards of the hospital. The numbers of patients admitted in each speciality are as follows: Medicine (73), Ob/Gyn (473), Pediatrics (368), Surgery (49) and Ophthalmology (89). 280 babies were delivered, 109 by Caesarian section. A total of 390 surgeries were conducted (Gynecology-19, Obstetrics-152, Ophthalmology-170, Surgery-49) of which, 304 were major surgeries. Medical officers examined 928 patients in community clinics, while 2954 patients were seen at the prenatal clinics.

A diagnostic and therapeutic multispeciality health camp was organized at Dr Sushila Nayar Hospital on 9-10 Feb 2018 with funding from Kasturba Health Society, where 3873 patients availed the services of clinical specialists from MGIMS. 35 patients were operated, 235 hematological investigations were performed, 47 X rays were taken, 70 ECGs were performed free of cost to patients. 482 patients received spectacles while hearing aids were distributed to 75 patients with funding from Jan Kalyan Trust. A blood donation camp was also organized on 9 Feb 2018. Follow up surgical camps were held on 9-10 Feb, 23-24 Feb and 27-28 Feb where 49 patients were operated.

Regular ophthalmology services and free cataract surgeries have been started from 9 Mar 2018 onwards, when two free cataract surgery camps were organized on 9 March 2018 and 20 Mar 2018 respectively. Of the total 89 patients registered, 47 were operated at Dr. Sushila Nayar Hospital, Utawali and 42 patients with immature cataract and other associated complications were sent to Kasturba Hospital Sevagram, where they have been operated and brought back home with good results.

A number of research projects are being conducted in Melghat. Some of these are:

- Magnitude of day to day life health problems in elderly women of Melghat: Funded by Global Health through Education and Service (GHETS), USA
- Services for health problems in elderly women of Melghat: Funded by Jan Kalyan Trust, Mumbai
- Community based study of magnitude of abortions, spontaneous and induced, immediate and late complications and care sought by rural women in two districts of Maharashtra: Funded by ICMR
- Physical disabilities in tribal communities living in extreme poverty in a rural hilly forest region of India: Funded by Kasturba Health Society
- Day to day life health problems in aging men of rural hilly forest region with a mission to provide services: Funded by Jan Kalyan Trust, Mumbai
- Birth preparedness and complications readiness: Funded by Foundation for Collaborative Medicine and Research, USA
- Making school drop out adolescents/young adults self reliant for their own and their community's development in a hilly forest region of central India: Funded by Jan Kalyan Trust, Mumbai
- Women's and children's health in relation to agriculture status in a hilly forest region with tribal population with extreme poverty: Funded by GHETS, USA

Adolescents, young men and women were trained in stitching. This was done in two batches by a government recognized trainer.

A CNE programme was conducted at Dr. Sushila Nayar Hospital, Utawali on 19 Dec 2017 with Dr Jaya Kore as team leader. Presentations were made by Dept of Pediatrics, Ophthalmology, Anesthesia and Medicine. A total of 30 people attended the CNE.

Seva Bhaav

Coordinator: Mrs Shaily Jain-Kalantri

MGIMS launched a weekly radio-show called SevaBhaav on 23 Apr 2015, in collaboration with a community-based Wardha radio station - MGIRI Radio 90.4 FM. The show throws light on a variety of issues related to health and disease in the community and airs on Thursday at 9:00 am and 8:00 pm.

SevaBhaav is designed with a sole interest - to help the community. Community service has always been the hallmark of MGIMS. The institute has been nurturing Dr Sushila Nayar's vision of rendering service to the rural communities of India. SevaBhaav offers listeners an opportunity to engage with MGIMS doctors from different specialties who can create health awareness in the community, separate myths from truth and help people understand what it takes to stay healthy. This year, the following MGIMS staff and students participated in the radio talk show:

Date	Participants	Topic
13 Jul 2017	Dr R Narang	Zoonosis and its prevention
10 Aug 2017	Dr M Jain	Significance of breastfeeding
17 Aug 2017	Dr R Lanke	Sandhe Pratyaropan Aani Punarvasan (Part I)
31 Aug 2017	Dr R Lanke	Sandhe Pratyaropan Aani Punarvasan (Part II)
14 Sep 2017	Dr R Kothari	VEP Test (Part I)
28 Sep 2017	Dr R Kothari	VEP Test (Part II)
12 Oct 2017	A Yadav, S Bomabatkar, C Mankar , S Srivastava, S Namjoshi, P Kamble , S Raka, M Dixit, M Dhabaliya, A Kokaje, S Chandak	Bioethics team and its activities (Part I)
26 Oct 2017	A Yadav, S Bombatkar, C Mankar , S Srivastava, S Namjoshi, P Kamble , S Raka, M Dixit, M Dhabaliya, A Kokaje, S Chandak	Bioethics team and its activities (Part II)
9 Nov 2017	Mr G Deo	Kasturba Hospital: An overview
1 Dec 2017	Dr V Jain	End AIDS
11 Jan 2018	A Yadav, S Bomabatkar, A Pal, S Azam, S Waghmare, S Srivastava, S Namjoshi, C Mankar, P Kamble , A Kokaje	Youthink
29 Mar 2018	A Yadav, S Bombatkar, S Waghmare, A Bhagat	World TB Day

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established at Anji for the federation of KVM. This centre will be utilized for training of KVM members. A resource centre for Kisan Vikas Manch has been developed at KRHTC, Anji.

Adolescent Girls' Groups (Kishori Panchayat)

The Department of Community Medicine has taken an initiative to form groups of non-school going adolescent girls in several villages in Anji, Gaul, Kharangana and Talegaon PHC areas. At the village level, an elected body of the adolescent girls has been formed, which is known as Kishori Panchayat. Adolescent-to-adolescent education program is undertaken in all the villages through these groups. These groups have been oriented towards the issues of adolescent health, maternal health, child survival, environmental health, family life education, RTI/ STD, HIV/ AIDS etc. In turn, these girls will train their peers and younger adolescents in their villages. The elected body also provides a mechanism for adolescent girls to participate in decision-making at village level. Apart from health issues, other village development related issues are also discussed with this group. The programme ultimately aims to produce leadership qualities in the adolescents and utilize them for health action at village level. The Department has successfully formed Kishori Panchayats in almost all villages of its field practice area. There are a total of 89 Kishori Panchayats functional in the three PHC areas adopted by the department: Anji PHC area (24), Gaul PHC area (12), Kharangana (26), Talegaon PHC area (22) and UHC (06). For the members of the Kishori Panchayat, various training programmes on nutrition, pregnancy and newborn care, health and sanitation, menstrual hygiene, safe motherhood, first-aid etc. were taken up. Peer educators were identified from the members of Kishori Panchayat and they have been trained for HIV/AIDS awareness in a workshop setting. A number of Kishori Panchayat members have taken up responsibility of imparting health education to pregnant and post-natal mothers. These

groups have become an excellent means to create health awareness among the adolescent girls. A resource centre for Kishori Panchayat was developed at the RHTC, Bhidi in 2008-09.

Village Health Worker Scheme

The Department has ensured one Village Health Worker per 1000 population in all the villages under its field practice area. Majority of them have been converted to ASHA (Accredited Social Health Activist) under the NRHM programme. They have been given continuing support on their training for treatment of minor illnesses and IMNCI training by the Department of Community Medicine.

Health Insurance

Health insurance has been one of the important activities in the programme villages. The VHNSC members have accelerated their activity in respect to insurance coverage in their village with the Kasturba Health Society and a total of Rs. 43,44,110 has been collected for insurance coverage for the period Jan-Dec 2018. This includes full insurance coverage of 599 community based organizations and 39 villages.

Continuing Education Programme for Anganwadi Workers

Continuing education programme for the Anganwadi workers are being done in the three PHC areas adopted by the Department of Community Medicine. These continuing education programmes aimed at improving the skills of Anganwadi workers. During these training programmes, efforts are made to provide workers with training on health as well as other issues of Early Childhood Development.

Health and Nutrition Day at village level

The Department of Community Medicine promoted Bal Suraksha Diwas (Child Survival Day) on a monthly basis in all the villages of the three PHC areas under the Department. The Bal Suraksha Diwas is an expansion activity of the existing Immunization Day being observed in villages through the Primary Health Centres. Apart from immunization, the activities on the Bal Suraksha Diwas include health and weight check-up of children of 0-3 age group, ANC check-up, PNC check-up and nutrition and health

education. The Village Health Worker, members of SHGs and adolescent girls are being encouraged to participate actively during the Bal Suraksha Diwas. The Village Health Nutrition and Sanitation Committee have been entrusted with the responsibility of organizing the day and also ensuring that the beneficiaries access the services. The active participation of the Village Health Nutrition and Sanitation Committee members has led to increased turnouts of beneficiaries during the Health and Nutrition Day at village level and thus increased coverage with maternal and child health services.

Continuing Education Programme for the Health Workers

Continuing education programme has also been started for health workers from the three PHC areas (viz. Anji, Gaul and Talegaon). A total of 60 health workers from these PHC areas participate in the one-day continuing education programme every month, which is aimed to improve their skills in delivering Reproductive and Child Health Services in the community.

Family Life Education through Schools

Propounding the need for Family Life Education (FLE) for adolescent girls, the Department of Community Medicine has facilitated family life education in all the high schools and junior colleges of the three adopted PHC areas. Following this, the trained teachers have started imparting family life education in the respective schools and junior colleges. At RHTC, Bhidi, 73 sessions were conducted in eleven schools, while 42 sessions in four schools were conducted at KRHTC Anji. In Kharangana 114 sessions were conducted in 10 schools, in Talegaon 46 sessions were conducted in six schools, while 21 sessions were conducted in five schools at UHC, Wardha.

World Health Day 2018

A postgraduate symposium titled "Universal Health Coverage: Everyone, Everywhere" was organized on 7 Apr 2018 on the theme announced on World Health Day 2018. In collaboration with the National Service Scheme, Kasturba Nursing School and Kasturba Nursing College, a poster contest, a slogan contest and a role play contest were also organized.

Health Assurance Scheme

Key Features

- Creates health consciousness in community
- Aims at integrating development of the community in the village
- Makes people aware of powers of self-assertion and collective resistance. People contribute for their health and their village
- Gives more strength to Gram Sabha. Makes it accountable for village health. Forces it to take decisions for village development.
- Provides health care facilities at doorsteps and arranges for hospitalization of those who need it.
- Avoids charity. Creates awareness of human rights.
- Brings women out of cloud of darkness, silence and helplessness into the mainstream of development.

Scheme 2019

Health Assurance type	Cards	Members
Family	20202	89523
Village	44951	155847
Jawar	3499	11019
Village Institutional	37666	132884
Institutional	2455	4812
Total	107773	394085

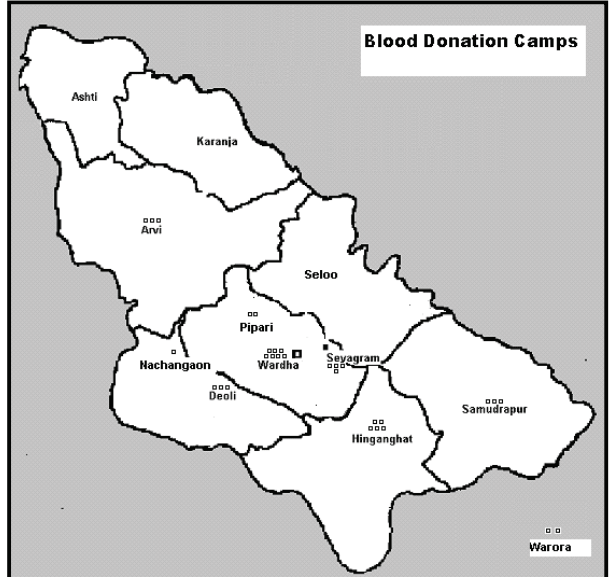
Patients seen at Rural and Urban Health Centres

Urban Health Centre, Wardha	9357
Rural clinics, Anji PHC area	14593
Rural clinics, Gaul PHC area	7041
Rural clinics, Talegaon PHC area	10527
Rural Clinic, Kharangana (Gode)	1406
Rural Clinics, UHC	3378
Geriatric OPD at UHC	334
Specialist Visits at Anji (Patients)	255
Field visit patients	1005
Total	47896

Blood Donation Camps

- Bhartiya Janta Yuva Morcha, Wardha
- Bajrang YuvaKrida Mandal, Akoli
- Prahar Janshakti Party, Parda
- Dr BR Ambedkar Blood Donation Camp, held at Sevagram Blood Bank
- Jivhala Sevabhavi Bahuuddheshiya Sanstha, Wardha
- Maharogi Seva Samiti, Anandvan, Warora
- World Blood Donor Day, Blood Bank, Sevagram
- Sant Nirankari Mandal, Hinganghat.
- Bahujan Samaj Party, Wardha
- Acharya Shrimannarayan Polytechnic, Pipri, Wardha
- Dr BR Ambedkar Arts & Science Jr. College, Hinganghat
- Aamhi Bhartiya Samajik Sangathana, Hinganghat
- B D College of Engineering, Sevagram
- Yuva Mitra Pariwar, Bahuuddheshiya Sanstha, Pulgaon
- Wagadi Foundation, Samudrapur
- Shivsena & Yuvasena, Savali (Wagh)
- Jai Bhavani Mata Charitable Trust, Hinganghat
- Prahar Vidyarthi Sangathana, Wardha
- Shrikrushnadas Jajoo Gramin Seva Mahavidyalay, Pipri (Meghe)
- NSS Unit Blood Donation Camp, Mahatma Gandhi Institute of Medical Sciences, Sevagram
- Ekta Chalak Malak Sangathana, Wardha
- National Voluntary Blood Donation Day, SBTC Mumbai held at Blood Bank, Sevagram.
- Shwas Seva Sanghthna, Hinganghat
- Mahila Seva Mandal, Wardha
- Maharashtra Rajya Parathmik Shikshak Samiti, Wardha
- Lions Club Wardha Trust, Wardha
- Rabbani Educational Foundation, Hinganghat
- Jaishree Gurudev Seva Mandal, Dhamangaon (Wathoda)
- Shri Gurudev Seva Mandal, Paikmari
- Maheshwari Navyuvak Mandal, Wardha
- Gurudwara Seva Samiti, Wardha
- Uttam Value Steels Limited, Bhugaon, Wardha
- Kalpataru Buddha Vihar and Prahar Janshakti Paksha, Veer Bhagatsingh Ward, Hinganghat
- Shri. Sant Barhanpure Maharaj Krishi Tantraniketan, Mandgaon
- PraharJanashakti Paksha at Gram Panchayat Office, Rasulabad,
- Jivhala Seva bhavi Sanstha, Wardha
- 18th Dr Sushila Nayar Memorial Blood Donation Camp, MGIMS, Sevagram.
- Panjabi Seva Samiti, Wardha
- Prahar Vidhyarthi Sangathna, Mandgaon, Wardha
- Tilak Shardotsav Mandal and Subhash Mandal, Hinganghat
- Shivsena District Office, In front of Thakre Market, Wardha
- Anand Niketan College of Agriculture, Anandwan, Warora
- Maheshwari Navyuvak Mandal, Wardha
- Shiv Jayanti UtsavSamiti, Seloo
- Vandaniya Rashtrasant Tukadoji Maharaj Punyatithi Utsav Samiti, Karanji (Kaji)
- Kalar (Kalal) Samaj Yuva Mandal, Wardha.
- Prahar Janashakti Paksh and Padmashanti Samaj, Hinganghat
- Prahar Janashakti Paksh, Kandhali
- Seema Computer Typing Institute, Laxmi Nagar, Wardha
- Shiv Jayanti UtsavSamiti, Karanji (Bhoge)
- Yuvasangharsh Sanghatna and Shiv jayanti Utsav Samiti, Seloo
- Parampujya Paramatma Ek Sevak Mandal, Dahegaon (Gosavi), Kelzar
- Prahar Janakshti Paksha,Pulgaon
- Veer Bhagatsingh Gramin Vikas Bahuuddeshiya Sanstha, Seloo

Map of Wardha district showing blood donation camps



Diagnostic Camps

This year the institute organized several screening and diagnostic camps. Diagnostic and health camps were organized at Mandwa, Kajalsara, Dhamangaon, Chitoda, Neri, Pulfail, Mandavgarh, District Jail, Ratnapur, Wadad, General Hospital Wardha, Melghat (Utavali), Jawahar Navodaya Vidyalaya, Selukate, Dharampur, Talegaon, Anji and Bhidi. The Departments of Community Medicine, Microbiology, Ophthalmology, ENT, Dentistry, Surgery, Medicine, Obstetrics and Gynecology, Pediatrics, Anesthesia, Pathology, Psychiatry, Radiotherapy, Orthopedics and Dermatology participated in these camps. Dentists carried out dental camps for school children and jail inmates.

Cancer detection camps were organized in Giroli, Hinganghat, Kasarkheda, Gadchandur and Watkhedha

Adopted Villages

Padegaon	2015 Batch
Rotha	2016 Batch
Pavnoor	2017 Batch
Mandwa	2018 Batch

The following are the number of patients seen by different departments during diagnostic camps:

Department	No. of Patients
Medicine	1271
Obstetrics and Gynecology	336
Pediatrics	418
Surgery	479
Orthopedics	390
Ophthalmology	5284
ENT	110
Dentistry	685
Psychiatry	71
Dermatology	520
Community Medicine	1125
Radiotherapy	307
Dr SushilaNayar Hospital, Utwali	1831
Total	12827

Community Ophthalmology

The Department of Ophthalmology, Kasturba Hospital, MGIMS, Sevagram, has been providing preventive, promotive, curative and rehabilitative eye care. Primary to tertiary level eye care which are currently available to residents in metropolises are provided to poor people living in rural areas and urban slums at their door step. Community based comprehensive and specialty eye care services are provided to people living in and around Wardha district.

Cataract Blindness Control in Wardha District Project

Under this project, daily screening eye camps have been conducted in all the villages of 8 blocks of Wardha district covering a population aged above 50 years. Screening for blindness and operable cataract is conducted door-to-door. Blind register is prepared at the village level. This year 53,604 villagers have been screened by doctors at their door steps in 855 villages. Individuals aged more than 50 years with visual acuity less than 6/60 due to cataract in either eye who were in need of cataract surgery were motivated, provided free to-and-fro transport and brought to Kasturba Hospital Sevagram for operation. All services- including surgical treatment, medicines, intra-ocular lenses (IOL) and glasses- were provided free of cost. Computerized data bank is maintained to keep records pertaining to all patients screened and operated for follow-up. In the current year, 5397 cataract surgeries were performed. In 5385 patients, IOL implantation was done and in 10 patients conventional cataract surgery was performed. Visual acuity of 53,604 persons (aged > 50 years) was tested by trained paramedical workers and 16081 villagers who had visual acuity <6/60 was examined by eye specialists at their door steps. 5937 patients were referred to Kasturba Hospital and of these 5512 patients were provided free transport facility.

So far 71482 poor rural patients from the project area who were suffering from curable blindness have

undergone cataract surgery at Kasturba Hospital and 70,544 (98.7%) of these were successfully implanted with intra ocular lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early post-operative visual rehabilitation of patients. Through this project, benefits of modern cataract surgery have been made accessible to poor, rural patients suffering from curable cataract blindness in Wardha district.

This project has made a huge contribution to control of cataract blindness in Wardha District. So far 10,29,442 villagers aged above 50 years have been screened at their door steps in all the 855 villages of Wardha District. From the project area 71,482 poor rural patients who were suffering from curable blindness had their sight restored by modern technique of small incision cataract surgery at Kasturba Hospital and of these 71,482 (98.7%) were successfully implanted with intra ocular lens.

Dr Sushila Nayar Eye Bank

Dr Sushila Nayar Eye Bank is functional in the Department of Ophthalmology, Kasturba Hospital. It promotes eye donation activity and provides facilities for corneal transplantation to patients suffering from corneal blindness. The eye bank is registered with Government of Maharashtra and affiliated to Eye Bank Association of India.

During the year, 45 eyes were processed in the eye bank. Of these, 12 eyes were collected from donors in Wardha district and 33 eyes were brought from Govt. Hospital Chandrapur & Lions eye bank Chandrapur. Of 45 donated eyes, 17 had corneas suitable for transplantation and 17 patients were provided facility for keratoplasty (Corneal Transplantation) free of cost. Members of two voluntary organizations were trained in grief counseling and motivation for eye donation.

Dr Sushila Nayar Hospital, Utawali, Melghat Amravati (Lions Eye Centre Melghat)

Lion Clubs International Foundation under the project grant SF 1802/ 3234 –H1 of Rs. 40 lakhs has provided necessary diagnostic, surgical equipment and vehicle for establishing Lions Eye Centre Melghat at Dr. Sushila Nayar Hospital Utawali. Community ophthalmology services were started at Dr SN Hospital Utawali from September 2017 for which 1 senior resident and 1 Junior Resident from Department of Ophthalmology is being deputed on rotation basis. During the year 3322 patients have been provided eye care services at the centre.

Under the National Programme for Control of Blindness, KHS has entered into an MoU with the District Blindness Control Society Amravati for providing free cataract screening and surgical services for cataract patients from 152 villages in Dharni Taluka. After inspection by district health authorities we have been permitted to start Eye OT at Dr SN Hospital Utawali by the Civil surgeon Amravati in March 2018. During the year. 301 cataract surgeries with IOL implantation have been performed.

Under this project daily screening eye camps have been conducted in all the 152 villages of Dharni Taluka of Amravati District. Screening for blindness and operable cataract is conducted door to door. Blind register is prepared at village level. In the current year 17,449 villagers aged > 50 years have been screened. Individuals with visual acuity < 6/60 due to cataract in either eye who were in need of cataract surgery were motivated and provided free to-and-fro transport and brought to Dr. Sushila Nayar Hospital Utawali Melghat for operation. All services including surgical treatment, medicines, Intra Ocular Lenses and glasses were provided free of cost. Computerized data bank is maintained to keep data records pertaining to all patients screened and operated for follow-up.

In the current year 301 cataract surgeries were performed. In all patients IOL implantation was done. Visual acuity of 17,449 persons (aged > 50 years) was tested by trained paramedical workers and 4,458 villagers who had visual acuity <6/60 were examined

by eye specialists at their door steps. 1,383 patients were referred to Dr Sushila Nayar Hospital Utawali Melghat and of these 362 patients were provided free transport facility.

So far 432 poor rural tribal patients from project area who were suffering from curable blindness have undergone cataract surgery. Out of which 339 patients were operated at Dr Sushila Nayar Hospital Utawali Melghat and 93 patients were operated at Kasturba Hospital Sevagram. All of them were successfully implanted with Intra Ocular Lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early postoperative visual rehabilitation of patients. Through this project benefits of modern cataract surgery have been made accessible to poor, rural tribal patients suffering from curable cataract blindness in Dharni Taluka of Amravati district.

Quarter / Year	No. of OPD Patients	No. of Patients Operated
Apr– Jun2018	525	41
Jul - Sep 2018	709	76
Oct - Dec 2018	806	108
Jan – Mar 2019	1282	76
Total	3322	301

GMLF URBAN HEALTH CENTER WARDHA EYE OPD

During the year 4474 patients were seen in GMLF Urban Health Center Wardha Eye OPD and provided refractive and other eye care services.

Quarter / Year	No. of OPD Patients
Apr - Jun 2018	1072
Jul - Sep 2018	1178
Oct - Dec 2018	1058
Jan – Mar 2019	1166
Total	4474

SCHOOL VISION SCREENING

In the current year school vision screening programme was conducted 43 Zilla Parishad primary schools in 4 Blocks of Wardha District. Eye examination of 4010 children was carried out. School children suffering from refractive error and other ocular disorders in need of glasses and treatment of eye disorders were referred to Kasturba Hospital Sevagram.

SN	Name of the School	Block	No. of Children Screened
1	Z P Primary School Anji (Kend)	Wardha	148
2	Z P Primary School Bhugaon	Wardha	50
3	Z P Primary School Boregaon (Kend)	Wardha	150
4	Z P Primary School Boregaon Meghe	Wardha	168
5	Z P Primary School Madani(New)	Wardha	36
6	Z P Primary School Madani(old)	Wardha	20
7	Z P Primary School Mahakal	Wardha	107
8	Z P Primary School Pawnar(K)	Wardha	131
9	Z P Primary School Pawnar(Mule)	Wardha	111
10	Z P Primary School Pawnur	Wardha	42
11	Z P Primary School Piprimeghe	Wardha	129
12	Z P Primary School Rotha	Wardha	14
13	Z P Primary School Salod	Wardha	90
14	Z P Primary School Salod(K)	Wardha	51
15	Z P Primary School Sawangi Meghe	Wardha	69
16	Z P Primary School Selukate	Wardha	94
17	Z P Primary School Talegaon(Mule)	Wardha	28
18	Z P Primary School Talegaon(T)	Wardha	101
19	Z P Primary School Taroda	Wardha	118
20	Z P Primary School Waifad	Wardha	112
21	Z P Primary School Waigaon(K)	Wardha	86
22	Z P Primary School Waigaon(N)	Wardha	130
23	Z P Primary School Zadgaon	Wardha	88
24	Z P Primary School Akoli	Seloo	81
25	Z P Primary School Dhapaki	Seloo	82
26	Z P Primary School Ghorad	Seloo	88
27	Z P Primary School Hamdapur	Seloo	111

28	Z P Primary School Hinganmuli	Seloo	122
29	Z P Primary School Kelzar	Seloo	118
30	Z P Primary School Yelakelimule	Seloo	37
31	Z P Primary School Yelakelimuli	Seloo	79
32	Z P Primary School Ajansara	Hinganghat	95
33	Z P Primary School Arvi(choti)	Hinganghat	93
34	Z P Primary School Daroda	Hinganghat	106
35	Z P Primary School Nandgaon	Hinganghat	94
36	Z P Primary School Pipri	Hinganghat	101
37	Z P Primary School Shekhapur	Hinganghat	84
38	Z P Primary School Wadner	Hinganghat	112
39	Z P Primary School Andori	Deoli	94
40	Z P Primary School Bhidi	Deoli	124
41	Z P Primary School Inzala	Deoli	117
42	Z P Primary School Sonoradhok	Deoli	90
43	Z P Primary School Vijaygopal	Deoli	109
		Total	4010

National Society for Prevention of Blindness

(M.S. Branch)

President	:	Dr AP Jain
Secretary	:	Dr AK Shukla
Treasurer	:	Dr Smita Singh
Joint Secretary	:	Dr AM Mehendale
Members	:	563

Activities

- Awareness camps on corneal blindness in 4 blocks of Wardha district covering 20 villages

Utawali Project, Melghat

Coordinator: Dr S Chhabra

Melghat is a tribal area in Dharni and Chikhaldara of Amravati district. Located 250 Kms north-west from Sevagram, this area attracted wide media coverage because of malnutrition-associated deaths in the last decade. Three-fourths of the population is tribal- inhabited by Korku Adivasis. Most people, poor, illiterate and struggling to make both ends meet, live in dark ages and have little or no access to health care facilities, education and communication channels. To access specialized neonatal care most people have to travel 160 Kms on a difficult and hilly terrain. Men, women and children trapped by the grimest poverty and are further hit by inequality of health services. Children, in particular are the worst sufferers. Most of the sickness and deaths are due to malnutrition, pneumonia, malaria and diarrhoea.

Initially the institute planned a long term project in this area and posted an Associate Professor in Medicine, and an Ophthalmologist, who voluntarily opted to reach the unreached. A base hospital at Dharni - Trimurti Hospital and 36 villages of Melghat had been chosen for research work. These villages are difficult to access, lack proper transport facilities and are located in the midst of dense forest and hills about 50 Kms from Dharni. Health education on malnutrition, breast feeding, diarrhoea and sexually transmitted diseases has been started since the last 9 years. This area is known for the highest under-five child mortality (80 per 1000 live births) and the highest mortality in the age group (16-50 years) in Maharashtra.

Kasturba Health Society has been providing health facilities in this region through the Mahatma Gandhi Adivasi Hospital and Dr Sushila Nayar Netralaya since the last 17 years. KHS had been running an OPD and 6-bed hospital as part of its Tribal Health Research Project in Melghat. However in view of high maternal and infant mortality rates, it was decided to take this initiative forward and expand this endeavour with the help of the faculty and residents of MGIMS.

The Kasturba Health Society (KHS) started its OPD in the Dr Sushila Nayar Hospital (earlier called Mahatma Gandhi Adivasi Mother and Child Hospital) on 1 Jan 2012. A 30 bed hospital for women and children in the tribal area of Utawali, Dharni was also initiated with funding support from the Shri Brihad Bharatiya Samaj, a Mumbai-based nongovernmental organization. The Government of Maharashtra has recognized this as a referral unit.

A multispecialty hospital was commissioned on the site on 4 Feb 2016, and 7.5 acres of land was acquired for the purpose. A team of obstetrician-gynecologists, pediatricians, anesthetists, medical officers, interns, administrative officer and nurses work at Utawali hospital round the clock and manage emergencies, outpatients and inpatients. The team soon realized that more than ill-health, they had to battle the social circumstances. The tribal folk had their unique beliefs, superstitions and cultural practices. Coupled with these prejudices, poverty and illiteracy, it has been an uphill task to counsel patients and ensure compliance. It is a challenge, but the team has been running an operation theatre too in these resource-limited settings. The doctors working here have several heartening stories to share of how they managed critical patients using their ingenuity and expertise. The hospital is now equipped with essential infrastructure including blood storage facilities (whole blood and components), instruments for anesthesia, newborn resuscitation, multipara monitors, suction machines operation tables etc. have been procured. Earlier there were no facilities for conducting Caesarean sections in the entire area. The very first Caesarean section in Melghat was conducted in Utawali hospital on 20 Jan 2012. The first hysterectomy was done to remove a large uncommon ovarian tumor on 15 Feb 2012. Caesarean

sections, major and minor gynecological surgeries are now regularly being conducted in the hospital. An USG machine has been installed with the approval of competent authorities. Permission to perform female sterilization and induced abortion has been obtained.

The area is prone to load shedding, and hence a new 7.5 KV generator has been installed in the hospital. A pipeline has been laid from Utawali village to the hospital to counter the water scarcity. Arrangements have been made to enable proper waste disposal and sanitation. A total of 100 villages receive community based maternal, neonatal care in Dharni block of Melghat.

In 2018-19, a total of 14240 patients were seen in the OPD. 1093 patients were admitted in the wards of the hospital. The numbers of patients admitted in each speciality are as follows: Medicine (55), Ob/Gyn (388), Pediatrics (305), Surgery (12) and Ophthalmology (333). 239 babies were delivered, 85 by Caesarian section. A total of 578 surgeries were conducted (Gynecology-56, Obstetrics-204, Ophthalmology-286, Surgery-27, ENT-5) of which, 383 were major surgeries. Medical officers examined 1728 patients in community clinics, while 1692 patients were seen at the prenatal clinics.

A Compression Only Life Support camp was conducted on 17 Feb 2019 by a team of anesthesiologists from MGIMS Sevagram. Eighty students from nearby colleges were trained in Basic Life Support skills.

Three free diagnostic and therapeutic multispeciality health camps were organized at Dr SushilaNayar Hospital on 17 Sep 2018, 17 Dec 2018 and 18 Mar 2019 with funding from Kasturba Health Society. A total of 1831 patients availed the services of clinical specialists from MGIMS in these three camps. 64 patients were operated, 37 hematological investigations were performed, 11 X rays were taken, 17 ECGs were performed free of cost to patients. 44 patients were referred to Kasturba Hospital for more complicated procedures.

The departments from MGIMS which participated in these camps included Medicine, Surgery, Obstetrics & Gynecology, Pediatrics, Ophthalmology, ENT, Pathology, Dental Surgery and Orthopedics. An optical centre was inaugurated during the March 2019 camp.

The Dr SushilaNayar Hospital has been empanelled under the Mahatma JyotibaPhule Jan AarogyaYojana (MJPJAY) and Ayushman Bharat Yojana (PM-JAY).

Seven camps were organized with the help of the local primary health centres and medical officers posted in villages. A team of specialists conducted camps at Harisal (12 Oct 2018), Chitri (27 Oct 2018), Chakarda (27 Dec 2018), Bairagad (12 Jan 2018), Harisal (8 Feb 2019), Titamba (21 Feb 2019) and Kalamkhar (27 Mar 2019). A total of 346 patients were examined and treated in these camps.

Academic updates and CMEs were conducted on Post-partum hemorrhage, Exclusive breast feeding and neonatal care, Management of shock (15 Aug 2018), Management of eclampsia (10 Nov 2018), Gestational hypertension, Sickle cell anemia, Basic life support (28 Oct 2018), Hypertensive disorders of pregnancy (20 Mar 2019), Basic post-operative nursing care and monitoring high risk patients (23 Mar 2019)

A number of research projects are being conducted in Melghat. Some of these are:

- Magnitude of day to day life health problems in elderly men of Melghat: Funded by Global Health through Education and Service (GHETS), USA
- Magnitude of day to day life health problems in elderly women of Melghat: Funded by Global Health through Education and Service (GHETS), USA
- Services for health problems in elderly women of Melghat: Funded by Jan Kalyan Trust, Mumbai
- Community based study of magnitude of abortions, spontaneous and induced, immediate and late complications and care sought by rural women in two districts of Maharashtra: Funded by ICMR

- Physical disabilities in tribal communities living in extreme poverty in a rural hilly forest region of India: Funded by Kasturba Health Society
- Day to day life health problems in aging men of rural hilly forest region with a mission to provide services: Funded by Jan Kalyan Trust, Mumbai
- Birth preparedness and complications readiness: Funded by Foundation for Collaborative Medicine and Research, USA
- Making school drop-out adolescents/young adults self-reliant for their own and their community's development in a hilly forest region of central India: Funded by Jan Kalyan Trust, Mumbai
- Women's and children's health in relation to agriculture status in a hilly forest region with tribal population with extreme poverty: Funded by GHETS, USA
- Community based study of effects of biomass fuel on pregnancy outcome with special reference to hypertensive disorders, other complications, birth weight, still births, neonatal, infant mortality in tribal communities of Melghat region: Funded by ICMR
- Maternal and perinatal health research collaboration , India (Maathri), improving outcomes in pregnant women with anemia: Funded by Oxford University

Seva Bhaav

Coordinator: Mrs Shaily Jain-Kalantri

MGIMS launched a weekly radio-show called *Seva Bhaav* on 23 Apr 2015, in collaboration with a community-based Wardha radio station, MGIRI Radio 90.4 FM. The show throws light on a variety of issues related to health and disease in the community and airs on Thursday at 9:00 a.m. and 8:00 p.m.

SevaBhaav is designed with the sole interest of helping the community. Community service has always been the hallmark of MGIMS. The institute has been nurturing Dr Sushila Nayar's vision of rendering service to the rural communities of India. *Seva Bhaav* offers listeners an opportunity to engage with MGIMS doctors from different specialties who can create health awareness in the community, separate myths from truth and help people understand what it takes to stay healthy. This year, the following MGIMS staff and students participated in radio talk shows:

Date	Participants	Topic
31 May 2018	A Yadav, S Bombatkar, V Kumar, M Joshi, Hemavaishnave, S Namjoshi, M Dixit, A Kokaje, S Chandak	Anti-tobacco campaign
5 Jul 2018	S Joshi, A Yadav, S Namjoshi, S Chandak, A Kokaje	Ethics, Morality and Intent
19 Jul 2018	Bioethics Unit	Lal Amrut Abhiyaan
9 Aug 2018	Bioethics Wing	Breastfeeding made easy
27 Sep 2018	Dr J Jain	Dengue: Cause, Concern and Cure

Community Activities

Department of Community Medicine

Women's Self-Help Groups

Self-Help Group (SHG) is a very effective tool not only for women's empowerment, but also for overall development of the community. The Department of Community Medicine fully appreciates the critical link between women's empowerment and health empowerment and considers the involvement of women's self-help groups (SHGs) to be the key to the success of any health programme. The Department has now achieved the formation of 3-4 SHGs per village in all the villages of its field practice area; viz. PHC Anji, Kharangana, Gaul, Talegaon and Waifad. With passage of time, the members of SHGs have learnt to manage their groups individually and have developed as member-owned and member-managed institutions. The Department provides assistance to SHGs to add a health action agenda to their primary financial function (finance plus) so that the women are able to determine health priorities and to play a pro-active role in health care delivery in their villages. A total of 230 Self-Help Groups were functioning on 31 Mar 2020 in the adopted villages of the Institute: Anji PHC area (56), Gaul PHC area (5), Kharangana (74), Talegaon PHC area (69), Wardha Urban Health Centre adopted area (26). All the SHGs are linked with banks and have updated member account books.

Kisan Vikas Manch

Kisan Vikas Manch (Farmers'club) has evolved as a way to involve men in the health activities at village level. The programme provides learning opportunities for members to improve their agricultural yield and in turn improve their economic status. The health action agenda is added to the primary purpose so as to empower them to actively participate in the health programme. A total of 13 Kisan Vikas Manch (KVM) were functioning on 31 Mar 2020 in the adopted villages of the Institute. In Anji PHC area, a federation of all the Kisan Vikas Manch from the villages had been formed in Dec 2008. This is being utilized as a platform to strengthen health

agenda among theme in the program. An E-Chaupal center has been established at Anji for the federation of KVM. This centre will be utilized for training of KVM members. A resource centre for Kisan Vikas Manch has been developed at KRHTC, Anji.

Adolescent Girls' Groups (Kishori Panchayat)

The Department of Community Medicine has taken an initiative to form groups of non-school going adolescent girls in several villages in Anji, Gaul, Kharangana and Talegaon PHC areas. At the village level, an elected body of the adolescent girls has been formed, which is known as Kishori Panchayat. Adolescent-to-adolescent education program is under taken in all the villages through these groups. These groups have been oriented towards the issues of adolescent health, maternal health, child survival, environmental health, family life education, RTI/STD, HIV/ AIDS etc. In turn, these girls will train their peers and younger adolescents in their villages. The elected body also provides a mechanism for adolescent girls to participate in decision-making at village level. Apart from health issues, other village development related issues are also discussed with this group. The programme ultimately aims to produce leadership qualities in the adolescents and utilize them for health action at village level. The Department has successfully formed Kishori Panchayats in almost all villages of its field practice area. There are a total of 91 Kishori Panchayats functional in the three PHC areas adopted by the department: Anji PHC area (24), Gaul PHC area (13), Kharangana (26), Talegaon PHC area (22) and UHC (06). For the members of the Kishori Panchayat, various training programmes on nutrition, pregnancy and newborn care, health and sanitation, menstrual hygiene, safe motherhood, first-aid etc. were taken up. Peer educators were identified from the members of Kishori Panchayat and they have been trained for HIV/AIDS awareness in a workshop setting. A number of Kishori Panchayat members have taken up responsibility of imparting health education to

pregnant and post-natal mothers. These groups have become an excellent means to create health awareness among the adolescent girls. A resource centre for Kishori Panchayat was developed at the RHTC, Bhidi in 2008-09.

Village Health Worker Scheme

The Department has ensured one Village Health Worker per 1000 population in all the villages under its field practice area. Majority of them have been converted to ASHA (Accredited Social Health Activist) under the NRHM programme. They have been given continuing support on their training for treatment of minor illnesses and IMNCI training by the Department of Community Medicine.

Health Insurance

Health insurance has been one of the important activities in the programme villages. The VHNSC members have accelerated their activity in respect to insurance coverage in their village with the Kasturba Health Society and a total of Rs.62,78,117 has been collected for insurance coverage for the period Jan-Dec 2019. This includes full insurance coverage of 509 community based organizations and 55 villages (Fully insured).

Continuing Education Programme for Anganwadi Workers

Continuing education programme for the Anganwadi workers are being done in the three PHC areas adopted by the Department of Community Medicine. These continuing education programmes aimed at improving the skills of Anganwadi workers. During these training programmes, efforts are made to provide workers with training on health as well as other issues of Early Childhood Development.

Health and Nutrition Day at village level

The Department of Community Medicine promoted Bal Suraksha Diwas (Child Survival Day) on a monthly basis in all the villages of the three PHC areas under the Department. The Bal Suraksha Diwas is an expansion activity of the existing Immunization Day being observed in villages through the Primary Health Centres. Apart from immunization, the activities on the Bal Suraksha Diwas include health

and weight check-up of children of 0-3 age group, ANC check-up, PNC check-up and nutrition and health education. The Village Health Worker, members of SHGs and adolescent girls are being encouraged to participate actively during the Bal Suraksha Diwas. The Village Health Nutrition and Sanitation Committee have been entrusted with the responsibility of organizing the day and also ensuring that the beneficiaries access the services. The active participation of the Village Health Nutrition and Sanitation Committee members has led to increased turnouts of beneficiaries during the Health and Nutrition Day at village level and thus increased coverage with maternal and child health services.

Continuing Education Programme for the Health Workers

Continuing education programme has also been started for health workers from the three PHC areas (viz. Anji, Gaul and Talegaon). A total of 60 health workers from these PHC areas participate in the one-day continuing education programme every month, which is aimed to improve their skills in delivering Reproductive and Child Health Services in the community.

Family Life Education through Schools

Propounding the need for Family Life Education (FLE) for adolescent girls, the Department of Community Medicine has facilitated family life education in all the high schools and junior colleges of the three adopted PHC areas. Following this, the trained teachers have started imparting family life education in the respective schools and junior colleges. At RHTC, Bhidi, 72 sessions were conducted in 14 schools, while 28 sessions in 4 schools were conducted at KRHTC Anji. In Kharangana 117 sessions were conducted in 10 schools, in Talegaon 35 sessions were conducted in 6 schools, while 16 sessions were conducted in 5 schools at UHC, Wardha.

World Health Day 2019

A postgraduate symposium titled "Universal Health Coverage: Everyone, Everywhere" was organized on 7 Apr 2019 on the theme announced on World Health Day 2019. In collaboration with the National Service Scheme, Kasturba Nursing School and Kasturba Nursing College, a poster contest, a slogan contest and a role play contest were also organized.

Health Assurance Scheme

Key Features

- Creates health consciousness in community
- Aims at integrating development of the community in the village
- Makes people aware of powers of self-assertion and collective resistance. People contribute for their health and their village
- Gives more strength to Gram Sabha. Makes it accountable for village health. Forces it to take decisions for village development.
- Provides health care facilities at doorsteps and arranges for hospitalization of those who need it.
- Avoids charity. Creates awareness of human rights.
- Brings women out of cloud of darkness, silence and helplessness into the mainstream of development.

Scheme 2020

Health Assurance type	Cards	Members
Family	17941	78951
Village	50109	172813
Jowar	2593	11425
Village Institutional	39607	137412
Institutional	1149	3013
Total	111399	403614

Patients seen at Rural and Urban Health Centres

Urban Health Centre, Wardha	10970
Rural clinics, Anji PHC area	15794
Rural clinics, Gaul PHC area	7749
Rural clinics, Talegaon PHC area	11343
Rural Clinic, Kharangana (Gode)	1011
Rural Clinics, UHC	3296
Geriatric OPD at UHC	274
Specialist Visits at Anji (Patients)	143
Field visit patients	1126
Total	51706

Blood Donation Camps

- Poojya Sindhi General Panchayat, Wardha
- MGIMS Students, Blood Bank, Kasturba Hospital, Sevagram
- Jai Bajrang Yuva Krida Mandal, Akoli
- Yuvasangharsh Sanghatna, Seloo, Sevagram
- Yuvamitra Parivar Bahuuddeshiya Sanstha, Pulgaon
- Maharogi Seva Samiti, Anandvan, Warora
- R. S. Bidkar College, Hinganghat
- Jiwhala Sevabhavi Sanstha, Wardha
- Maheshwari Navyuvak Mandal, Wardha
- Sant Nirankari Mandal, Hinganghat
- Aamhi Bhartiya, Hinganghat
- B D Engineering College, Sevagram
- New Bajrang Gramin Vikas Sanstha, Wadgaon (Khurd)
- Yuvamitra Parivar Bahuuddeshiya Sanstha, Pulgaon
- Waghadi Foundation, Samudrapur
- Shri Jai Bhavani Mata Bahuuddeshiya Samajik Sanstha, Hinganghat.
- Shrikrushnadas Jajoo Gramin Seva Mahavidyalaya, Pipri
- Wardha District Saloon Association, Wardha
- Sambhaji Brigade Maharashtra Pradesh Sanghatak, Wardha
- Dakhane Kunbi Samaj, District Branch, Wardha
- Maharudra Bahuuddeshiya Sanstha, Wardha
- Shri Ganesh Utsahi Ganotsav Mandal, Ajant, Hinganghat
- Rabbani Education Foundation, Hinganghat
- Yuva: Parivartan Ki Awaj, Jagdamba Bahuuddeshiya Sanstha, Sindi (Meghe)
- Maharashtra Rajya Prathmik Shikshak Samiti, Wardha
- Maharashtra State Electricity Supply Board, Management Department, Warora at Saibaba Hospital, Anandvan, Warora.
- A. Bha. Shri Gurudev Seva Mandal, Paikmari Paikmari, Samudrapur
- Uttam Value Steel Limited, Medical Centre— Uttam Value Steel Campus
- Kalpataru Buddha Vihar, Dhammadan Sangraha Vyayam Krida Prasarak Mandal, Hinganghat
- 19th Dr. Sushila Nayar Memorial Blood Donation Camp, MGIMS & KHS Employees, Sevagram
- Anand Niketan College of Agriculture, Anandwan, Warora
- Prahar Janshakti Paksh, Maharashtra Taroda Branch
- Bal Yuva Dhyan Prarthana Mandal, Kinhi (Kharda)
- Maheshwari Navyuvak Mandal, Wardha
- Amol bha Bhoge Mitra Pariwar, Karanji (Bhoge)
- Yuva sangharsh-Ladha Asmitecha, Seloo
- Shivshahi Mitra pariwar, Laxminagar, Wardha
- Shivray Sporting Club, Mirapur
- Gram Suraksha Dal, Pardi
- Agnihotri Institute of Pharmacy, Sindi (Meghe)
- Shivsena, District Office, Wagholi Circle
- Grampanchayat Office, Wabgaon, Deoli

Map of Wardha district showing blood donation camps



Diagnostic Camps

This year the institute organized several screening and diagnostic camps. Diagnostic and health camps were organized at Ajansara, District Jail Wardha, Bhidi, Allipur, Dahegaon (M), Pavnoor, Inzapur, Yesamba, Melghat (Utavali). The Departments of Community Medicine, Microbiology, Ophthalmology, ENT, Dentistry, Surgery, Medicine, Obstetrics and Gynecology, Pediatrics, Anesthesia, Pathology, Psychiatry, Radiotherapy, Orthopedics and Dermatology participated in these camps. Dentists carried out dental camps for school children and jail inmates.

Cancer detection camps were organized in Dhakulgaon, Ridhora, Takli and Melghat.

Adopted Villages

Rotha	2016 Batch
Pavnoor	2017 Batch
Mandwa	2018 Batch
Mahakal	2019 Batch

The following are the number of patients seen by different departments during diagnostic camps:

Department	No. of Patients
Medicine	1562
Obstetrics and Gynecology	734
Pediatrics	573
Surgery	676
Orthopedics	1088
Ophthalmology	5803
ENT	483
Dentistry	470
Psychiatry	272
Dermatology	1016
Community Medicine	4918
Radiotherapy	156
Dr SushilaNayar Hospital, Utwali	3005
Total	20756

Community Ophthalmology

The department of Ophthalmology, Kasturba Hospital, MGIMS, Sevagram, has been providing preventive, promotive, curative and rehabilitative eye care. Primary to tertiary level eye care which are currently available to residents in metropolises are provided to poor people living in rural areas and urban slums at their door step. Community based comprehensive and specialty eye care services are provided to people living in and around Wardha district.

Cataract Blindness Control in Wardha District Project

Under this project, daily screening eye camps have been conducted in all the villages of 8 blocks of Wardha district covering a population aged above 50 years. Screening for blindness and operable cataract is conducted door-to-door. Blind register is prepared at the village level. This year 48,936 villagers have been screened by doctors at their door steps in villages. Individuals aged more than 50 years with visual acuity less than 6/60 due to cataract in either eye who were in need of cataract surgery were motivated, provided free to-and-fro transport and brought to Kasturba Hospital Sevagram for operation. All services- including surgical treatment, medicines, intra-ocular lenses (IOL) and glasses- were provided free of cost. Computerized data bank is maintained to keep records pertaining to all patients screened and operated for follow-up. In the current year, 5988 cataract surgeries were performed. In 5979 patients, IOL implantation was done and in 9 patients conventional cataract surgery was performed. Visual acuity of 48,936 persons (aged > 50 years) was tested by trained paramedical workers and 19968 villagers who had visual acuity <6/60 was examined by eye specialists at their door steps. 6432 patients were referred to Kasturba Hospital and of these 6103 patients were provided free transport facility.

So far 77470 poor rural patients from the project area who were suffering from curable blindness have

undergone one cataract surgery at Kasturba Hospital and 76,523 (98.8%) of these were successfully implanted with intra ocular lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early post-operative visual rehabilitation of patients. Through this project, benefits of modern cataract surgery have been made accessible to poor, rural patients suffering from curable cataract blindness in Wardhadistrict.

This project has made a huge contribution to control of cataract blindness in Wardha District. So far 10,78,378 villagers aged above 50 years have been screened at their door steps in all villages of Wardha District. From the project area 77,470 poor rural patients who were suffering from curable blindness had their sight restored by modern technique of small incision cataract surgery at Kasturba Hospital and of these 76,523 (98.8%) were successfully implanted with intra ocularlens.

Dr Sushila Nayar Eye Bank

Dr Sushila Nayar Eye Bank is functional in the Department of Ophthalmology, Kasturba Hospital. It promotes eye donation activity and provides facilities for corneal transplantation to patients suffering from corneal blindness. The eye bank is registered with Government of Maharashtra and affiliated to Eye Bank Association of India.

During the year, 44 eyes were processed in the eye bank. Of these, 18 eyes were collected from donors in Wardha district and 26 eyes were brought from Govt. Hospital Chandrapur and Yeotmal. Of 44 donated eyes, 11 had corneas suitable for transplantation and 11 patients were provided facility for keratoplasty (Corneal Transplantation) free of cost. Members of two voluntary organizations were trained in grief counseling and motivation for eye donation.

Dr Sushila Nayar Hospital, Utawali, Melghat, Amravati (Lions Eye Centre Melghat)

Lion Clubs International Foundation under the project grant SF 1802/ 3234 –H1 of Rs. 40 lakhs has provided necessary diagnostic, surgical equipment and vehicle for establishing Lions Eye Centre Melghat at Dr. Sushila Nayar Hospital Utawali. Community ophthalmology services were started at Dr SN Hospital Utawali from September 2017 for which 1 senior resident and 1 Junior Resident from Department of Ophthalmology is being deputed on rotation basis. During the year 4515 patients have been provided eye care services at the centre and 541 Cataract surgeries with IOL implantation have been performed. In the current year Optical Dispensing Unit has started functioning at the centre and manufactured spectacles for 288 needy patients and supplied the same at subsidised rate to the needy patients.

Under National Programme for Control of Blindness, KHS have entered in to a MoU with District Blindness Control Society Amravati for providing free cataract screening and surgical services for cataract patients from 152 villages in Dharni Taluka. After inspection by district health authorities Eye OT was started at Dr SN Hospital Utawali in March 2018.

Under this project daily screening eye camps have been conducted in all the 152 villages of Dharni Taluka of Amravati District. Screening for blindness and operable cataract is conducted door to door. Blind register is prepared at village level. In the current year 10,666 villagers aged > 50 years have been screened. Individuals with visual acuity < 6/60 due to cataract in either eye who were in need of cataract surgery were motivated and provided free to-and- fro transport and brought to Dr.Sushila Nayar Hospital Utawali Melghat for operation. All services including surgical treatment, medicines, Intra Ocular Lenses and glasses were provided free of cost. Computerized data bank is maintained to keep data records pertaining to all patients screened and operated for follow-up. In the current year 541 cataract surgeries were performed. In all patients IOL implantation was done. Visual acuity of 10,666 persons (aged > 50 years) was tested by trained paramedical workers and 3,441 villagers who had visual acuity <6/60 were examined by eye specialists at their door steps. 1,426 patients were

referred to Dr Sushila Nayar Hospital Utawali Melghat and of these 562 patients were provided free transport facility.

So far 984 poor rural tribal patients from project area who were suffering from curable blindness have undergone cataract surgery. Out of which 880 patients were operated at Dr Sushila Nayar Hospital Utawali Melghat and 104 patients were operated at Kasturba Hospital Sevagram. All of them were successfully implanted with Intra Ocular Lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early postoperative visual rehabilitation of patients. Through this project benefits of modern cataract surgery have been made accessible to poor, rural tribal patients suffering from curable cataract blindness in Dharni Taluka of Amravati district.

Quarter / Year	No. of OPD Patients	No. of Patients Operated
Sep 2017– Mar 2018	983	38
Apr 2018 – Mar 2019	3322	301
Apr 2019 - Mar 2020	4552	541
Total	8857	880

Community Ophthalmology Services at DSNH Melghat

Year	No. Patient Screened	No. of Patient Referred	No. of Patient Provided Transport
Apr 18 - Mar 19	17,449	1383	362
Apr 19 - Mar 20	10,666	1426	562
Total	28,115	2,809	924

GMLF URBAN HEALTH CENTER WARDHA EYE OPD

During the year 3894 patients were seen in GMLF Urban Health Center Wardha Eye OPD and provided refractive and other eye care services.

Quarter / Year	No. of OPD Patients
Apr - Jun 2019	908
Jul - Sep 2019	1104
Oct - Dec 2019	999
Jan -Mar 2020	883
Total	3894

SCHOOL VISION SCREENING

In the current year school vision screening programme was conducted 26 Zilla Parishad primary schools in 2 Blocks of Wardha District. Eye examination of 1417 children was carried out. School children suffering from refractive error and other ocular disorders in need of glasses and treatment of eye disorders were referred to Kasturba Hospital Sevagram.

Sr.No.	School Name	No of Student Screened
1	ZPU Primary School Goji	67
2	ZPU Primary School Dhanora	55
3	ZPU Primary School KaranjiBhoge	65
4	ZPU Primary School Padegaon	84
5	ZPU Primary School Dhotrakasar	88
6	ZPU Primary School Sonegaon station	69
7	ZPU Primary School Sirasgaon dh	62
8	ZPU Primary School Wadadh	44
9	ZPU Primary School Neri Punarvasan	43
10	ZPU Primary School Kurzadi fort	55
11	ZPU Primary School Pujai	62
12	ZPU Primary School Bodad Malkapur	50
13	ZPU Primary School Karanjikaji	50
14	ZPU Primary School Mandwa	81
15	ZPU Primary School Belgaon	54
16	ZPU Primary School UmriMeghe	43
17	ZPU Primary School Satoda	51
18	ZPU Primary School Lonsawli	74
19	ZPU Primary School Karla	51
20	ZPU Primary School Sawli	43
21	ZPU Primary School Tigoan	46
22	ZPU Primary School Sindhi Meghe	5
23	ZPU Primary School Sindhi Meghe	15
24	ZPU Primary School Dahegaon Misikin	82
25	ZPU Primary School Anji b	30
26	ZPU Primary School Takali Darne	48
	Total	1417

SCREENING EYE CAMPS HELD FROM APRIL 2019 TO MARCH 2020

Sr. No.	Name of Camp Place/ Town	District	No. of Patients Screened
1	Civil Hospital Wardha	Wardha	621
2	Amrawati Screening Center	Amrawati	84
3	Wardhamaneri Screening Center	Wardha	124
4	Ghugus	Chandrapur	128
5	Shekapur	Wardha	21
6	Civil Hospital Chandrapur	Chandrapur	11
7	Aajansara	Wardha	15
8	Kothari	Chandrapur	112
9	Visapur	Chandrapur	51
10	Umari Poddar	Chandrapur	58
11	Kelzar	Chandrapur	99
12	Rajoli	Chandrapur	111
13	Ghosari	Chandrapur	58
14	Palasgaon	Chandrapur	33
15	Pombhurna	Chandrapur	32
16	Junasurla	Chandrapur	40
17	Bhejgaon	Chandrapur	59
18	Nandgaon	Chandrapur	48
19	Borda (Zularwar)	Chandrapur	44
20	Mool	Chandrapur	58
21	Durgapur	Chandrapur	36
22	Harda	Chandrapur	86
23	Vyahad (Khurd)	Chandrapur	39
24	Dharni	Amrawati	11
25	Korpana	Chandrapur	71
26	Durga Puja Utsav Samiti Wardha	Wardha	131
27	Gandhi Jayanti Camp KHS	Wardha	447
28	Ratnapur	Chandrapur	538
29	Hivra (Lahe)	Washim	34
30	Allipur	Wardha	31
31	Social Service Camp Mahakal	Wardha	20
32	Sai Mandir Gandchandur	Chandrapur	149

33	Chimur	Chandrapur	154
34	Gondpipari	Chandrapur	156
35	TalodiBalapur	Chandrapur	203
36	Gadchiroli	Gadchiroli	49
37	Ralegaon	Yavatmal	84
38	Chunala	Chandrapur	221
39	Madani	Wardha	26
40	Maheshwari Bhavan Wardha	Wardha	268
41	BopapurWani	Wardha	25
42	Gondawda	Chandrapur	25
43	Ramnagar	Wardha	25
44	Antargaon	Chandrapur	154
45	Urja Nagar	Chandrapur	37
46	Sawli (Mool)	Chandrapur	276
47	Karanji	Chandrapur	29
48	Virur Station	Chandrapur	82
49	Chamorshi	Chandrapur	209
50	Talodi Bhangaram	Chandrapur	314
51	Jiwati	Chandrapur	35
52	Nanza Ralegaon	Yavatmal	31
		Total	5803

Utawali Project, Melghat

Coordinator: Dr S Chhabra

Melghat is a tribal area in Dharni and Chikhaldara of Amravati district. Located 250 Kms north-west from Sevagram, this area attracted wide media coverage because of malnutrition-associated deaths in the last decade. Three-fourths of the population is tribal- inhabited by Korku Adivasis. Most people, poor, illiterate and struggling to make both ends meet, live in dark ages and have little or no access to health care facilities, education and communication channels. To access specialized neonatal care most people have to travel 160 Kms on a difficult and hilly terrain. Men, women and children trapped by the grimmest poverty and are further hit by inequality of health services. Children, in particular are the worst sufferers. Most of the sickness and deaths are due to malnutrition, pneumonia, malaria and diarrhoea.

Initially the institute planned a long term project in this area and posted an Associate Professor in Medicine, and an Ophthalmologist, who voluntarily opted to reach the unreached. A base hospital at Dharni -Trimurti Hospital and 36 villages of Melghat had been chosen for research work. These villages are difficult to access, lack proper transport facilities and are located in the midst of dense forest and hills about 50 Kms from Dharni. Health education on malnutrition, breast feeding, diarrhoea and sexually transmitted diseases has been started since the last 9 years. This area is known for the highest under-five child mortality (80 per 1000 live births) and the highest mortality in the age group (16-50 years) in Maharashtra.

Kasturba Health Society has been providing health facilities in this region through the Mahatma Gandhi Adivasi Hospital and Dr Sushila Nayar Netralaya since the last 17 years. KHS had been running an OPD and 6-bed hospital as part of its Tribal Health Research Project in Melghat. However in view of high maternal and infant mortality rates, it was decided to take this initiative forward and expand this endeavour with the help of the faculty and residents of MGIMS.

The Kasturba Health Society (KHS) started its OPD in the Dr Sushila Nayar Hospital (earlier called Mahatma Gandhi Adivasi Mother and Child Hospital) on 1 Jan 2012. A 30 bed hospital for women and children in the tribal area of Utawali, Dharni was also initiated with funding support from the Shri Brihad Bharatiya Samaj, a Mumbai-based nongovernmental organization. The Government of Maharashtra has recognized this as a referral unit.

A multispeciality hospital was commissioned on the site on 4 Feb 2016, and 7.5 acres of land was acquired for the purpose. A team of obstetrician-gynecologists, pediatricians, anesthetists, medical officers, interns, administrative officer and nurses work at Utawali hospital round the clock and manage emergencies, outpatients and inpatients. The team soon realized that more than ill-health, they had to battle the social circumstances. The tribal folk had their unique beliefs, superstitions and cultural practices. Coupled with these prejudices, poverty and illiteracy, it has been an uphill task to counsel patients and ensure compliance. It is a challenge, but the team has been running an operation theatre too in these resource-limited settings. The doctors working here have several heartening stories to share of how they managed critical patients using their ingenuity and expertise. The hospital is now equipped with essential infrastructure including blood storage facilities (whole blood and components), instruments for anesthesia, newborn resuscitation, multipara monitors, suction machines operation tables etc. have been procured. Earlier there were no facilities for conducting Caesarean

sections in the entire area. The very first Caesarean section in Melghat was conducted in Utawali hospital on 20 Jan 2012. The first hysterectomy was done to remove a large uncommon ovarian tumor on 15 Feb 2012. Caesarean sections, major and minor gynecological surgeries are now regularly being conducted in the hospital. An USG machine has been installed with the approval of competent authorities. Permission to perform female sterilization and induced abortion has been obtained. The area is prone to load shedding, and hence a new 7.5 KV generator has been installed in the hospital. A pipeline has been laid from Utawali village to the hospital to counter the water scarcity. Arrangements have been made to enable proper waste disposal and sanitation. A total of 100 villages receive community based maternal, neonatal care in Dharni block of Melghat.

In 2019-20, a total of 19767 patients were seen in the OPD. 2070 patients were admitted in the wards of the hospital. The numbers of patients admitted in each speciality are as follows: Medicine (82), Ob/Gyn (463), Pediatrics (327), Surgery (46) and Ophthalmology (1152). 106 babies were delivered, 39 by Caesarian section. A total of 762 surgeries were conducted (Gynecology-71, Obstetrics-55, Ophthalmology-559, Surgery-49, ENT/Orthopedics-28) of which, 609 were major surgeries. Medical officers examined 3421 patients in community clinics, while 1857 patients were seen at the prenatal clinics.

Three free diagnostic and therapeutic multispeciality health camps were organized at Dr SushilaNayar Hospital on 18 Sep 2019, 28-29 Feb 2020 and 20-21 Mar 2020 with funding from Kasturba Health Society. A total of 3012 patients availed the services of clinical specialists from MGIMS in these three camps. 110 patients were operated, 226 X rays were taken, 45 ECGs were performed free of cost to patients.

The departments from MGIMS which participated in these camps included Medicine, Psychiatry, Surgery, Obstetrics & Gynecology, Pediatrics, Ophthalmology, ENT, Pathology, Dental Surgery and Orthopedics.

The Dr Sushila Nayar Hospital has been empanelled under the Mahatma Jyotiba Phule Jan Aarogya Yojana (MJPJAY) and Ayushman Bharat Yojana (PM-JAY).

Eight community camps were organized with the help of local primary health centres and medical officers posted in villages. Total of 1857 patients were examined and treated in these camps.

Academic updates and CMEs were conducted on Post-partum hemorrhage, Exclusive breast feeding and neonatal care, Management of shock (16 Jul 2019), Management of eclampsia (10 Nov 2018), Gestational hypertension, Sickle cell anemia, Basic life support (13 Sep 2019), the awareness of Laksh, Daksh, Kayakalp, Infection Control and Waste Management programs of Government of India (7 Feb 2020), Eclampsia Management (14 Feb 2020).

A number of research projects are being conducted in Melghat. Some of these are:

Community based study of effects of biomass fuel on pregnancy outcome with special reference to hypertensive disorders, other complications, birth weight, still births, neonatal, infant mortality in tribal communities of Melghat region: Funded by ICMR

Maternal and perinatal health research collaboration, India (Maathri), improving outcomes in pregnant women with anemia: Funded by Oxford University.

Aakanksha Shishu Kalyan Kendra

Coordinator: Dr S Chhabra

Aakanksha Shishu Kalyan Kendra is a sequel of the journey started with a mission for safe motherhood and safe baby for one and all, even for a unwed girls with unwanted advanced pregnancy. In 1988, a thought came to try and help unwed girls, who used to report to our hospital with unwanted advanced pregnancy. At that time abortion was not possible according to country's existing abortion laws. The centre formally came into existence in 2002 for the welfare of unwed mothers and their babies. In 2004; the centre obtained the license for national adoption of surrendered babies to needy parents. In 2015, Indian placement agencies recognized the centre for national adoption. Now our center is recognized for international adoption also. During April 2019 to March 2020, fourteen babies were adopted and have become the joy in the life of needy couples from the country and also out of country. This year two babies were adopted by parents from Italy and Canada. The Honorable President of India Shri Ram Nath Kovind acknowledged the work of this centre on occasion of Golden Jubilee celebrations of MGIMS, Sevagram.

Community Activities

Department of Community Medicine

Women's Self-Help Groups

Self-Help Group (SHG) is a very effective tool not only for women's empowerment, but also for overall development of the community. The Department of Community Medicine fully appreciates the critical link between women's empowerment and health empowerment and considers the involvement of women's self-help groups (SHGs) to be the key to the success of any health programme. The Department has now achieved the formation of 3-4 SHGs pervillage in all the villages of its field practice area; viz. PHC Anji, Kharangana, Gaul, Talegaon and Waifad. With passage of time, the members of SHGs have learnt to manage their groups individually and have developed as member-owned and member-managed institutions. The Department provides assistance to SHGs to add a health action agenda to their primary financial function (finance plus) so that the women are able to determine health priorities and to play a pro-active role in health care delivery in their villages. A total of 203 Self-Help Groups were functioning on 31 Mar 2021 in the adopted villages of the Institute: Anji PHC area (20), Gaul PHC area (11), Kharangana (77), Talegaon PHC area (69), Wardha Urban Health Centre adopted area (26). All the SHGs are linked with banks and have updated member account books.

Kisan Vikas Manch

Kisan Vikas Manch (Farmers' club) has evolved as a way to involve men in the health activities at village level. The programme provides learning opportunities for members to improve their agricultural yield and in turn improve their economic status. The health action agenda is added to the primary purpose so as to empower them to actively participate in the health programme. A total of 5 Kisan Vikas Manch (KVM) were functioning on 31 Mar 2021 in the adopted villages of the Institute. In Anji PHC area, a federation of all the Kisan Vikas Manch from the villages had been formed in Dec 2008. This is being utilized as a platform to strengthen health agenda among the men

in the program. An E-Chaupal center has been

established at Anji for the federation of KVM. This centre will be utilized for training of KVM members. A resource centre for Kisan Vikas Manch has been developed at KRHTC, Anji.

Adolescent Girls' Groups (Kishori Panchayat)

The Department of Community Medicine has taken an initiative to form groups of non-school going adolescent girls in several villages in Anji, Gaul, Kharangana and Talegaon PHC areas. At the village level, an elected body of the adolescent girls has been formed, which is known as Kishori Panchayat. Adolescent-to-adolescent education program is undertaken in all the villages through these groups. These groups have been oriented towards the issues of adolescent health, maternal health, child survival, environmental health, family life education, RTI/ STD, HIV/ AIDS etc. In turn, these girls will train their peers and younger adolescents in their villages. The elected body also provides a mechanism for adolescent girls to participate in decision-making at village level. Apart from health issues, other village development related issues are also discussed with this group. The programme ultimately aims to produce leadership qualities in the adolescents and utilizes them for health action at village level. The Department has successfully formed Kishori Panchayats in almost all villages of its field practice area. There are a total of 90 Kishori Panchayats functional in the three PHC areas adopted by the department: Anji PHC area (24), Gaul PHC area (12), Kharangana (26), Talegaon PHC area (22) and UHC (06). For the members of the Kishori Panchayat, various training programmes on nutrition, pregnancy and newborn care, health and sanitation, menstrual hygiene, safe motherhood, first-aid etc. were taken up. Peer educators were identified from the members of Kishori Panchayat and they have been trained for HIV/AIDS awareness in a workshop setting. A number of Kishori Panchayat members have taken up

responsibility of imparting health education to pregnant and post-natal mothers. These

groups have become an excellent means to create health awareness among the adolescent girls. A resource centre for Kishori Panchayat was developed at the RHTC, Bhidi in 2008-09.

Village Health Worker Scheme

The Department has ensured one Village Health Worker per 1000 population in all the villages under its field practice area. Majority of them have been converted to ASHA (Accredited Social Health Activist) under the NRHM programme. They have been given continuing support on their training for treatment of minor illnesses and IMNCI training by the Department of Community Medicine.

Health Insurance

Health insurance has been one of the important activities in the programme villages. The VHNSC members have accelerated their activity in respect to insurance coverage in their village with the Kasturba Health Society and a total of Rs. 52, 92,030 has been collected for insurance coverage for the period Jan-Dec 2020. This includes full insurance coverage of 371 community based organizations and 55 villages (Fully insured).

Continuing Education Programme for Anganwadi Workers

Continuing education programme for the Anganwadi workers are being done in the three PHC areas adopted by the Department of Community Medicine. These continuing education programmes aimed at improving the skills of Anganwadi workers. During these training programmes, efforts are made to provide workers with training on health as well as other issues of Early Childhood Development.

Health and Nutrition Day at village level

The Department of Community Medicine promoted Bal Suraksha Diwas (Child Survival Day) on a monthly basis in all the villages of the three PHC areas under the Department. The Bal Suraksha Diwas is an expansion activity of the existing Immunization Day being observed in villages through the Primary Health Centres. Apart from immunization, the activities on

the Bal Suraksha Diwas include health and weight check-up of children of 0-3 age group, ANC check-up, PNC check-up and nutrition and health education. The Village Health Worker, members of SHGs and adolescent girls are being encouraged to participate actively during the Bal Suraksha Diwas. The Village Health Nutrition and Sanitation Committee have been entrusted with the responsibility of organizing the day and also ensuring that the beneficiaries access the services. The active participation of the Village Health Nutrition and Sanitation Committee members has led to increased turnouts of beneficiaries during the Health and Nutrition Day at village level and thus increased coverage with maternal and child health services.

Continuing Education Programme for the Health Workers

Continuing education programme has also been started for health workers from the three PHC areas (viz. Anji, Gaul and Talegaon). A total of 60 health workers from these PHC areas participate in the one-day continuing education programme every month, which is aimed to improve their skills in delivering Reproductive and Child Health Services in the community.

Family Life Education through Schools

Propounding the need for Family Life Education (FLE) for adolescent girls, the Department of Community Medicine has facilitated family life education in all the high schools and junior colleges of the three adopted PHC areas. Following this, the trained teachers have started imparting family life education in the respective schools and junior colleges. Due to COVID 19 pandemic virtual session on women empowerment and gender equity, Swachata, Shramdan, Prohibition and Yoga and Nature cure were taken.

World Health Day 2020

A postgraduate symposium titled "Year of the Nurse and Midwife" was organized on 7 Apr 2020 on the theme announced on World Health Day 2020. In collaboration with the National Service Scheme, Kasturba Nursing School and Kasturba Nursing College, a poster contest, a slogan contest and a role play contest were also organized.

Health Assurance Scheme

Key Features

- Creates health consciousness in community
- Aims at integrating development of the community in the village
- Makes people aware of powers of self-assertion and collective resistance. People contribute for their health and their village
- Gives more strength to Gram Sabha. Makes it accountable for village health. Forces it to take decisions for village development.
- Provides health care facilities at doorsteps and arranges for hospitalization of those who need it.
- Avoids charity. Creates awareness of human rights.
- Brings women out of cloud of darkness, silence and helplessness into the mainstream of development.

Scheme 2021

Health Assurance type	Cards	Members
Family	12308	53527
Village	47581	164654
Jawar	2526	11092
Village Institutional	33182	114678
Institutional	2091	3540
Total	97688	347491

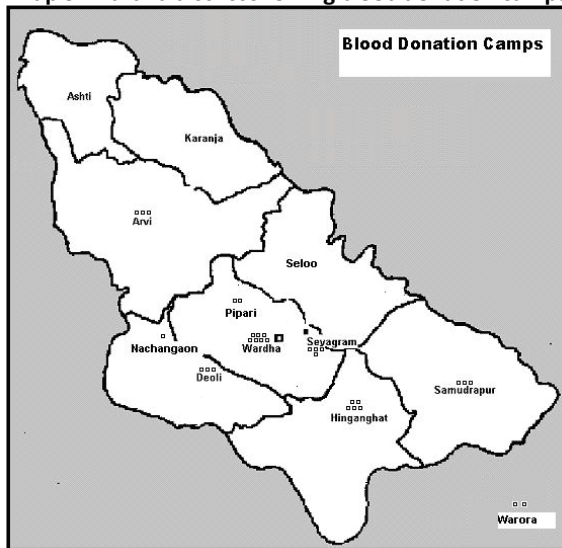
Patients seen at Rural and Urban Health Centres

Urban Health Centre, Wardha	3129
Rural clinics, Anji PHC area	12914
Rural clinics, Gaul PHC area	6707
Rural clinics, Talegaon PHC area	8837
Rural Clinic, Kharangana (Gode)	780
Rural Clinics, UHC	2984
Physiotherapy, UHC	90
Field visit patients	273
Total	35714

Blood Donation Camps

- Prahar Janshakti Paksh, Padegaon
- Yuvamitra Parivar Bahuuddeshiya Sanstha, Pulgaon
- Students of MGIMS, Sevagram at Blood Bank Jivhala Sevabhavi Sanstha, Wardha
- Tilak Shardsotsav Mandal & Subhash Mandal Hinganghat
- Prahar Janshakti Paksh, Samudrapur Branch
- Shree Navdurga Pooja Utsav Samiti, Kapda Line, Wardha
- Bank of India, Mandgaon Branch, Wardha
- Vasant Baba Bahuuddeshiya Sanstha, Wardha
- Maheshwari Navyuvak Mandal, Wardha
- Aamhi Bhartiya, Hinganghat
- Rashtrawadi Yuvak Congress & Panchayat Samiti, Wardha
- Sant Shri Pandurang Maharaj Sporting Club, Adegaon
- Shri. Sameer Deshmukh's Office, Seloo
- Apulkee Samajik Sanstha & Gandhi Nagar Sudampuri Mitra Pariwar, Wardha
- Wardha Professional Accountant Association
- Prahar Janshakti Paksh, Bhosa, Samudrapur
- Bahujan Samaj Party, Wardha
- State Bank of India, Waigaon Nipani Branch, Wardha
- Aamhi Bhartiya Samajik Sanghatana, Hinganghat
- Yuva Mitra Pariwar Bahuuddeshiya Sanstha, Pulgaon
- Waghadi Foundation, Samudrapur
- Shri Jai Bhawani Mata Bahuuddeshiya Samajik Sanstha, Hinganghat
- Apulkee Samajik Sanstha, Wardha
- Patanjali Yog Samiti, Hinganghat
- Prahar Janshakti Paksh, Taroda Branch
- Bhartiya Janta Yuva Morcha, Hinganghat
- National Voluntary Blood Donation Day at Blood Centre, Sevagram
- Prahar Janshakti Paksh, at Blood Centre, Sevagram
- Madhusoodan Harne Mitra Pariwar, Shegaon (Kund)
- Nag Mandir Durga Utsav Samiti, Warud
- Yuva Mitra Pariwar Bahuuddeshiya Sanstha, Pulgaon
- Shivshahi Pariwar, Wardha
- RS Bidkar Arts, Commerce & Science College, Hinganghat
- Aai TuljaBhavani, Mahalaxmi Charitable Trust, Borgaon (Meghe)
- Gujarati Seva Mandal, Wardha
- Prahar Janshakti Paksh, Wardha

Map of Wardha district showing blood donation camps



- Bahujan Kranti Sanghatna, Sevagram
- Panchsheel Krida Mandal, Burkoni
- 20th Dr. Sushila Nayar Memorial Blood Donation Camp at Blood Centre, MGIMS & KHS, Sevagram.
- Shri. Saibaba Mandir Trust, Aanji (Mothi)
- Equitas Small Finance Bank, Wardha
- Friends Cultural Group, Sindi (Meghe)
- Prahar Vidhyarthi Sanghatna, Mandgaon
- Jai Pavansut Hanuman Mandir Devsthan Trust, Sindi (Meghe)
- Shri. Sant Paikaji Maharaj Devsthan, Sastabad (Sa)
- Bal Yuva Dhyan Prarthna Mandal, Kinhi (Kharda),
- Maheshwari Navyuvak Mandal, Wardha
- Grampanchayat Office, Madni (Dindoda)
- Shivjayanti Utsav Samiti, Karanji (Bhoge)
- Prahar Janshakti Paksh, MGIMS, Sevagram
- Yuvasangharsh Sanghtana, Seloo
- Shivray Sporting Club, Mirapur
- Prahar Janshakti Paksh at Blood Centre, Sevagram
- Samvedna, International Blood and Plasma Donation Campaign organised by National Integrated Forum of Artists and Activists (NIFAA) at Blood Centre, MGIMS, Sevagram, District—Wardha
- Prahar Janshakti Paksh, Hamdapur

Diagnostic Camps

This year, our peripheral outreach services were hampered because of lockdowns, restrictions of population movements and protocols on Covid appropriate behaviour. The departments of Medicine, Paediatrics, Orthopedics, ENT, Psychiatry, Dermatology, Community Medicine, radiotherapy and Pathology did not conduct peripheral diagnostic camps.

Adopted Villages	
Rotha	2016 Batch
Pavnoor	2017 Batch
Mandwa	2018 Batch
Mahakal	2019 Batch

The following are the number of patients seen by different departments during diagnostic camps:

Department	No. of Patients
Obstetrics and Gynecology	142
Surgery	11
Ophthalmology	1547
Dentistry	68
Total	1768

Community Ophthalmology

The Department of Ophthalmology, Kasturba Hospital, MGIMS, Sevagram, has been providing preventive, promotive, curative and rehabilitative eye care. Primary to tertiary level eye care which are currently available to residents in metropolises are provided to poor people living in rural areas and urban slums at their door step. Community based comprehensive and specialty eye care services are provided to people living in and around Wardha district.

Cataract Blindness Control in Wardha District Project

Under this project, daily screening eye camps have been conducted in all the villages of 8 blocks of Wardha district covering a population aged above 50 years. Screening for blindness and operable cataract is conducted door-to-door. Blind register is prepared at the village level. This year 48,976 villagers have been screened by doctors at their door steps in villages. Individuals aged more than 50 years with visual acuity less than 6/60 due to cataract in either eye who were in need of cataract surgery were motivated, provided free to-and-fro transport and brought to Kasturba Hospital Sevagram for operation. All services-including surgical treatment, medicines, intra-ocular lenses (IOL) and glasses- were provided free of cost. Computerized data bank is maintained to keep records pertaining to all patients screened and operated for follow-up. In the current year, 1066 cataract surgeries were performed. In 1064 patients, IOL implantation was done and in 4 patients conventional cataract surgery was performed. Visual acuity of 4976 persons (aged > 50 years) was tested by trained paramedical workers and 2103 villagers who had visual acuity <6/60 was examined by eye specialists at their door steps. 1092 patients were referred to Kasturba Hospital and of these 1044 patients were provided free transport facility.

So far 78536 poor rural patients from the project area who were suffering from curable blindness have undergone cataract surgery at Kasturba Hospital and 77,587 (98.8%) of these were successfully implanted with intra ocular lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early post-operative visual rehabilitation of patients. Through this project, benefits of modern cataract surgery have been made accessible to poor, rural patients suffering from curable cataract blindness in Wardha district.

This project has made a huge contribution to control of cataract blindness in Wardha District. So far 10,83,354 villagers aged above 50 years have been screened at their door steps in all villages of Wardha District. From the project area 78,536 poor rural patients who were suffering from curable blindness had their sight restored by modern technique of small incision cataract surgery at Kasturba Hospital and of these 77,587 (98.8%) were successfully implanted with intra ocular lens.

Dr Sushila Nayar Eye Bank

Dr Sushila Nayar Eye Bank is functional in the Department of Ophthalmology, Kasturba Hospital. It promotes eye donation activity and provides facilities for corneal transplantation to patients suffering from corneal blindness. The eye bank is registered with Government of Maharashtra and affiliated to Eye Bank Association of India.

During the year, 8 eyes were processed in the eye bank. Of these, 2 eyes were collected from donors in Wardha district and 6 eyes were brought from Govt. Hospital Chandrapur. Of 8 donated eyes, none had cornea suitable for transplantation and were used for training and research. Members of two voluntary organizations were trained in grief counseling and motivation for eye donation.

Dr Sushila Nayar Hospital, Utawali, Melghat Amravati (Lions Eye Centre Melghat)

Lion Clubs International Foundation under the project grant SF 1802/ 3234 –H1 of Rs. 40 lakhs has provided necessary diagnostic, surgical equipment and vehicle for establishing Lions Eye Centre Melghat at Dr. Sushila Nayar Hospital Utawali. Community ophthalmology services were started at Dr SN Hospital Utawali from September 2017 for which 1 senior resident and 1 Junior Resident from Department of Ophthalmology is being deputed on rotation basis. During the year 3991 patients have been provided eye care services at the centre and 261 Cataract surgeries with IOL implantation have been performed. In the current year Optical Dispensing Unit has started functioning at the centre and manufactured spectacles for 148 needy patients and supplied the same at subsidised rate to the needy patients.

Under National Programme for Control of Blindness, KHS have entered in to an MoU with District Blindness Control Society Amravati for providing free cataract screening and surgical services for cataract patients from 152 villages in Dharni Taluka. After inspection by district health authorities Eye OT was started at Dr SN Hospital Utawali in March 2018.

Under this project daily screening eye camps have been conducted in all the 152 villages of Dharni Taluka of Amravati District. Screening for blindness and operable cataract is conducted door to door. Blind register is prepared at village level. In the current year 10,666 villagers aged > 50 years have been screened. Individuals with visual acuity < 6/60 due to cataract in either eye who were in need of cataract surgery were motivated and provided free to-and- fro transport and brought to Dr. Sushila Nayar Hospital Utawali Melghat for operation. All services including surgical treatment, medicines, Intra Ocular Lenses and glasses were provided free of cost. Computerized data bank is maintained to keep data records pertaining to all patients screened and operated for follow-up. In the current year 261 cataract surgeries were performed. In all patients IOL implantation was done. Visual acuity of 2190 persons (aged > 50 years) was tested by trained paramedical workers and 1400 villagers who had visual acuity <6/60 were examined by eye specialists at their

door steps. 287 patients were referred to Dr Sushila Nayar Hospital Utawali Melghat and of these 261 patients were provided free transport facility.

So far 1245 poor rural tribal patients from project area who were suffering from curable blindness have undergone cataract surgery. Out of which 1141 patients were operated at Dr Sushila Nayar Hospital Utawali Melghat and 104 patients were operated at Kasturba Hospital Sevagram. All of them were successfully implanted with Intra Ocular Lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early postoperative visual rehabilitation of patients. Through this project benefits of modern cataract surgery have been made accessible to poor, rural tribal patients suffering from curable cataract blindness in Dharni Taluka of Amravati district.

Quarter/Year	No. of OPD Patients	No. of Patients Operated	No. of Glasses Supplied
April - June 2020	744	119	40
July - Sept 2020	803	14	54
Oct - Dec 2020	1015	43	23
Jan - Mar 2021	1429	85	31
Total	3991	261	148

Year	No. of OPD Patients	No. of Patient Operated
Sept 2017- March 2018	983	38
Apr 2018 - March 2019	3322	301
Apr 2019 - March 2020	4552	541
Apr 2020 - March 2021	3991	261
Total	12848	1141

Community Ophthalmology Services at DSNH Melghat

Year	No. of OPD Patients	No. of Patient Operated
Sept 2017- March 2018	983	38
Apr 2018 - March 2019	3322	301
Apr 2019 - March 2020	4552	541
Apr 2020 - March 2021	3991	261
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SCREENING EYE CAMPS HELD FROM APRIL 2020 TO MARCH 2021

Date	Name of Camp Place/ Town	District	No. of Patients Screened	No. of Patients Collected
2020 - 2021	Civil Hospital Wardha	Wardha	43	43
2020 - 2021	Wardhamaneri	Wardha	33	9
2020 - 2021	2nd Oct Gandhi Jayanti Eye Camp	Wardha	71	40
19/10/2020	Dhamangaon Rly	Amrawati	280	23
27/12/2020	Gondpipari Camp	Chandrapur	177	66
14/02/2021	Wasera	Chandrapur	647	196
21/02/2021	Chamorshi	Gadchiroli	267	91
08/03/2021	Ghugus	Chandrapur	3	3
12/03/2021	Mahakal Camp	Wardha	26	3
		Total	1547	474

Utawali Project, Melghat

Coordinator: Dr S Chhabra

Melghat is a tribal area in Dharni and Chikhaldara of Amravati district. Located 250 Kms north-west from Sevagram, this area attracted wide media coverage because of malnutrition-associated deaths in the last decade. Three-fourths of the population is tribal- inhabited by Korku Adivasis. Most people, poor, illiterate and struggling to make both ends meet, live in dark ages and have little or no access to health care facilities, education and communication channels. To access specialized neonatal care most people have to travel 160 Kms on a difficult and hilly terrain. Men, women and children trapped by the grimmest poverty and are further hit by inequality of health services. Children, in particular are the worst sufferers. Most of the sickness and deaths are due to malnutrition, pneumonia, malaria and diarrhoea.

Initially the institute planned a long term project in this area and posted an Associate Professor in Medicine, and an Ophthalmologist, who voluntarily opted to reach the unreached. A base hospital at Dharni -Trimurti Hospital and 36 villages of Melghat had been chosen for research work. These villages are difficult to access, lack proper transport facilities and are located in the midst of dense forest and hills about 50 Kms from Dharni. Health education on malnutrition, breast feeding, diarrhoea and sexually transmitted diseases has been started since the last 9 years. This area is known for the highest under-five child mortality (80 per 1000 live births) and the highest mortality in the age group (16-50 years) in Maharashtra.

Kasturba Health Society has been providing health facilities in this region through the Mahatma Gandhi Adivasi Hospital and Dr Sushila Nayar Netralaya since the last 17 years. KHS had been running an OPD and 6-bed hospital as part of its Tribal Health Research Project in Melghat. However in view of high maternal and infant mortality rates, it was decided to take this initiative forward and expand this endeavour with the help of the faculty and residents of MGIMS.

The Kasturba Health Society (KHS) started its OPD in the Dr Sushila Nayar Hospital (earlier called Mahatma Gandhi Adivasi Mother and Child Hospital) on 1 Jan 2012. A 30 bed hospital for women and children in the tribal area of Utawali, Dharni was also initiated with funding support from the Shri Brihad Bharatiya Samaj, a Mumbai- based nongovernmental organization. The Government of Maharashtra has recognized this as a referral unit.

A multispeciality hospital was commissioned on the site on 4 Feb 2016, and 7.5 acres of land was acquired for the purpose. A team of obstetrician-gynecologists, pediatricians, anesthetists, medical officers, interns, administrative officer and nurses work at Utawali hospital round the clock and manage emergencies, outpatients and inpatients. The team soon realized that more than ill-health, they had to battle the social circumstances. The tribal folk had their unique beliefs, superstitions and cultural practices. Coupled with these prejudices, poverty and illiteracy, it has been an uphill task to counsel patients and ensure compliance. It is a challenge, but the team has been running an operation theatre too in these resource-limited settings. The doctors working here have several heartening stories to share of how they managed critical patients using their ingenuity and expertise. The hospital is now equipped with essential infrastructure including blood storage facilities (whole blood and components), instruments for anesthesia, newborn resuscitation, multipara monitors, suction machines operation tables etc. have been procured. Earlier there were no facilities for conducting Caesarean sections in the entire area.

The very first Caesarean section in Melghat was conducted in Utawali hospital on 20 Jan 2012. The first hysterectomy was done to remove a large uncommon ovarian tumor on 15 Feb 2012. Caesarean sections, major and minor gynecological surgeries are now regularly being conducted in the hospital. An USG machine has been installed with the approval of competent authorities. Permission to perform female sterilization and induced abortion has been obtained. The area is prone to load shedding, and hence a new 7.5 KV generator has been installed in the hospital. A pipeline has been laid from Utawali village to the hospital to counter the water scarcity. Arrangements have been made to enable proper waste disposal and sanitation. A total of 100 villages receive community based maternal, neonatal care in Dharni block of Melghat.

In 2020-21, a total of 12330 patients were seen in the OPD. 782 patients were admitted in the wards of the hospital. The numbers of patients admitted in each speciality are as follows: Medicine (10), Ob/Gyn (310), Pediatrics (180), Surgery (3) and Ophthalmology (279). 170 babies were delivered, 85 by Caesarian section. A total of 434 surgeries were conducted (Gynecology-62, Obstetrics-99, Ophthalmology-270, Surgery-3 of which, 370 were major surgeries. Medical officers examined 1599 patients in community clinics, while 281 patients were seen at the prenatal clinics.

The Dr Sushila Nayar Hospital has been empanelled under the Mahatma Jyotiba Phule Jan Aarogya Yojana (MJPJAY) and Ayushman Bharat Yojana (PM-JAY).

Academic updates and CMEs were conducted on Post-partum hemorrhage, Exclusive breast feeding and neonatal care, Management of shock (19 Jun 2020), Gestational hypertension, Sickle cell anemia, Basic life support (18 Sep 2020), the awareness of Laksh, Daksh, Kayakalp, Infection Control and Waste Management programs of Government of India (7 Jan 2021), Eclampsia Management (26 Feb 2021). A session on awareness of fire safety with drill was conducted on (9 Feb 2021)

A number of research projects are being conducted in Melghat. Some of these are:

Maternal and perinatal health research collaboration, India (Maathri), improving outcomes in pregnant women with anemia: Funded by Oxford University

Preconception and Periconception Awareness for Safe Pregnancy and Safe Birth

Aakanksha Shishu Kalyan Kendra

Coordinator: Dr S Chhabra

Aakanksha Shishu Kalyan Kendra is a sequel of the journey started with a mission for safe motherhood and safe baby for one and all, even for a unwed girls with unwanted advanced pregnancy. In 1988, a thought came to try and help unwed girls, who used to report to our hospital with unwanted advanced pregnancy. At that time abortion was not possible according to country's existing abortion laws. The centre formally came into existence in 2002 for the welfare of unwed mothers and their babies. In 2004; the centre obtained the license for national adoption of surrendered babies to needy parents. In 2015, Indian placement agencies recognized the centre for national adoption. Now our center is recognized for international adoption also. During April 2020 to March 2021, thirteen babies were adopted and have become the joy in the life of needy couples, two of them were by parents from out of country. The Honorable President of India Shri Ram Nath Kovind acknowledged the work of this centre on occasion of Golden Jubilee celebrations of MGIMS, Sevagram.

Community Activities

Department of Community Medicine

Women's Self-Help Groups

Self-Help Group (SHG) is a very effective tool not only for women's empowerment, but also for overall development of the community. The Department of Community Medicine fully appreciates the critical link between women's empowerment and health empowerment and considers the involvement of women's self-help groups (SHGs) to be the key to the success of any health programme. The Department has now achieved the formation of 3-4 SHGs pervillage in all the villages of its field practice area; viz. PHC Anji, Kharangana, Gaul, Talegaon and Waifad. With passage of time, the members of SHGs have learnt to manage their groups individually and have developed as member-owned and member-managed institutions. The Department provides assistance to SHGs to add a health action agenda to their primary financial function (finance plus) so that the women are able to determine health priorities and to play a pro-active role in health care delivery in their villages. A total of 199 Self-Help Groups were functioning on 31 Mar 2022 in the adopted villages of the Institute: Anji PHC area (20), Gaul PHC area (11), Kharangana (77), Talegaon PHC area (66), Wardha Urban Health Centre adopted area (25). All the SHGs are linked with banks and have updated member account books.

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Panchayat members have taken up responsibility of imparting health education to pregnant and post-natal mothers. These groups have become an excellent means to create health awareness among the adolescent girls. A resource centre for Kishori Panchayat was developed at the RHTC, Bhidi in 2008-09.

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Continuing education programme for the Anganwadi workers are being done in the three PHC areas adopted by the Department of Community Medicine. These continuing education programmes aimed at improving the skills of Anganwadi workers. During these training programmes, efforts are made to provide workers with training on health as well as other issues of Early Childhood Development.

Health and Nutrition Day at village level

The Department of Community Medicine promoted Bal Suraksha Diwas (Child Survival Day) on a monthly basis in all the villages of the three PHC areas under the Department. The Bal Suraksha Diwas is an expansion activity of the existing Immunization Day being observed in villages through the Primary Health Centres. Apart from

immunization, the activities on the Bal Suraksha Diwas include health and weight check-up of children of 0-3 age group, ANC check-up, PNC check-up and nutrition and health education. The Village Health Worker, members of SHGs and adolescent girls are being encouraged to participate actively during the Bal Suraksha Diwas. The Village Health Nutrition and Sanitation Committee have been entrusted with the responsibility of organizing the day and also ensuring that the beneficiaries access the services. The active participation of the Village Health Nutrition and Sanitation Committee members has led to increased turnouts of beneficiaries during the Health and Nutrition Day at village level and thus increased coverage with maternal and child health services.

Continuing Education Programme for the Health Workers

Continuing education programme has also been started for health workers from the three PHC areas (viz. Anji, Gaul and Talegaon). A total of 60 health workers from these PHC areas participate in the one-day continuing education programme every month, which is aimed to improve their skills in delivering Reproductive and Child Health Services in the community.

Family Life Education through Schools

Propounding the need for Family Life Education (FLE) for adolescent girls, the Department of Community Medicine has facilitated family life education in all the high schools and junior colleges of the three adopted PHC areas. Following this, the trained teachers have started imparting family life education in the respective schools and junior colleges. Due to COVID-19 pandemic virtual session on women empowerment and gender equity, Swachhata, Shramdan, Prohibition and Yoga and Nature cure were taken.

World Health Day 2021

A postgraduate symposium titled "Universal Health Coverage: Everyone, Everywhere" was organized on 7 Apr 2021 on the theme announced on World Health Day 2021. In collaboration with the National Service Scheme, Kasturba Nursing School and Kasturba Nursing College, a poster contest, a slogan contest and a role play contest were also organized.

Health Insurance Scheme

Key Features

- Creates health consciousness in community
- Aims at integrating development of the community in the village
- Makes people aware of powers of self-assertion and collective resistance. People contribute for their health and their village
- Gives more strength to Gram Sabha. Makes it accountable for village health. Forces it to take decisions for village development.
- Provides health care facilities at doorsteps and arranges for hospitalization of those who need it.
- Avoids charity. Creates awareness of human rights. Brings women out of cloud of darkness, silence and helplessness into the mainstream of development.

Scheme 2022

Health Assurance	Cards	Members
General	12504	53806
Bachat Gat	40153	137114
Jawar	2553	11154
Village	52314	178283
Institutional	1200	2452
Total	108724	382809

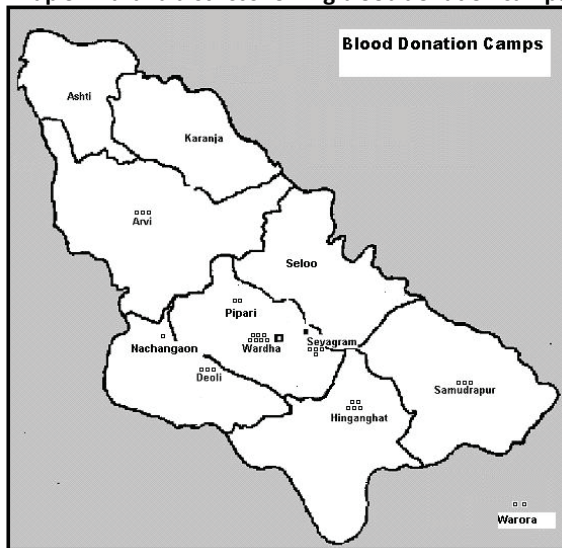
Patients seen at Rural and Urban Health Centres

Urban Health Centre, Wardha	3129
Urban Health Centre, Wardha	3422
Rural clinics, Anji PHC area	12253
Rural clinics, Gaul PHC area	5370
Rural clinics, Talegaon PHC area	7920
Rural Clinic, Kharangana (Gode)	733
Rural Clinics, UHC	2761
Field visit patients	824
Total	33283

Blood Donation Camps

- Shri Shivpratishtan Hindusthan, Hinganghat, Wardha
- Yuva Mitra Parivar Bahuuddeshiya Sanstha, Pulgaon, Wardha
- Boudha Mahasamiti, Juniwasti, Sevagram, Wardha
- Bharatiya Janata Party, Hinganghat, Wardha
- State Bank of India, Nimbha Branch, Samudrapur, Wardha
- Prahar Janshakti Paksh, Ganesh Nagar, Borgaon (Meghe) Wardha + Blood Centre, Sevagram
- Mr Shantilal Kanwarlalji Gandhi, Samudrapur
- Prahar Janshakti Pakshat Sant Gajanan Maharaj Temple, Weekly Market, Samudrapur, Wardha
- Bahujan Samaj Party, Wardha at Office of the Bahujan Samaj Party, Jhansi Rani Square, Wardha
- Sant Nirankari Mandal, Hinganghat, Wardha at
- Sant Kanwarlal Bhavan, Master Colony, Hinganghat, Wardha
- Shivsena Sub-Head, Wardha at Ram Temple, Near Police Station, Deoli, Wardha
- Wardha Chemist & Druggist Association, Wardha at Maheshwari Bhavan, In front of Police Station, Wardha
- ShriJai Bhavani Mata Bahuuddeshiya Samajik Sanstha, Hinganghat, Wardha Congress Committee, Wardha
- Muslim Youth, Station phail, Sawangi (Meghe) Road, Wardha
- Sameer Deshmukh Yuva Manch and Shikshak Mitra Parivar, Wardha
- Muslim Youth, Station Phail, Sawangi (Meghe) Road, Wardha
- Sameer Deshmukh Yuva Manch and Shikshak Mitra Parivar, Wardha
- Rashtravadi Congress Party, Taroda, Wardha
- Prahar Janshakti Paksh, Hinganghat, Wardha
- Grampanchayat (Bandar), Tah -Chimur, Dist - Chandrapur
- Kasturba Health Society, Blood Centre, Department of Pathology, MGIMS, Sevagram
- Shivsena, Samudrapur, Wardha
- Bal Yuva Gurudev Seva Mandal, Kinhi (Kharda), Wardha
- Maheshwari Navyuvak Mandal, Wardha
- Amolbhau Bhoge Mitra Pariwar, Karanji (Bhoge), Wardha
- Yuva sangharsh Sanghtana, Seloo, Wardha
- Shivray Sporting Club, Mirapur, Wardha
- Hardayal Government Industrial Training Institute, Pulgaon
- Gram Suraksha Dal (Darubandi), Pardi, Tah-Samudrapur, Wardha
- Kasturba Nursing College, Sevagram, Wardha
- Uttam Value Steels Limited, Bhugaon, Wardha
- Prahar Janshakti Paksh and Murlidhar Maharaj Mitra Parivar, Hamdapur, Tahsil-Seloo, Wardha
- National Social Service, Shri Saibaba Lok Prabodhan Arts College, Wadner, Tahsil-Hinganghat, Wardha

Map of Wardha district showing blood donation camps



Diagnostic Camps

This year the institute organized several screening and diagnostic camps. The Departments of Ophthalmology, Obstetrics and Gynecology, and Dermatology participated in these camps.

Adopted Villages	
Mandva	2018 Batch
Mahakal	2019 Batch
Bhankheda	2020 Batch

The following are the number of patients seen by different departments during diagnostic camps:

Department	No. of Patients
Dermatology	101
Obs/Gyn	13
Ophthalmology	10114
Total	10228

Community Ophthalmology

The Department of Ophthalmology, Kasturba Hospital, MGIMS, Sevagram, has been providing preventive, promotive, curative and rehabilitative eye care. Primary to tertiary level eye care which are currently available to residents in metropolises are provided to poor people living in rural areas and urban slums at their door step. Community based comprehensive and specialty eye care services are provided to people living in and around Wardha district.

Cataract Blindness Control in Wardha District Project

Under this project daily screening eye camps have been conducted door to door in all the villages of 8 blocks of Wardha district covering population aged > 50 years. Screening for blindness and operable cataract is conducted door to door. Blind register is prepared at village level. This year 13901 villagers have been screened at their door steps in villages. Individuals aged > 50 years with visual acuity < 6/60 due to cataract in either eye who were in need of cataract surgery were motivated and provided free to-and-fro transport and brought to Kasturba Hospital Sewagram for operation. All services including surgical treatment, medicines, Intra Ocular Lenses and glasses were provided free of cost. Computerized data bank is maintained to keep data records pertaining to all patients screened and operated for follow-up.

In the current year 3836 cataract surgeries were performed. In 3830 patients IOL implantation was done and in 6 patients conventional cataract surgery was performed. Visual acuity of 13901 persons (aged > 50 years) was tested by trained paramedical workers and 4632 villagers who had visual acuity < 6/60 were examined by Eye specialist at their door steps. 4016 patients were referred to Kasturba Hospital and of these 3940 patients were provided free transport facility.

So far 82,372 poor rural patients from project area who were suffering from curable blindness have undergone cataract surgery at Kasturba Hospital and 81,417 (98.84

%) of these were successfully implanted with Intra Ocular Lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early postoperative visual rehabilitation of patients. Through this project benefits of modern cataract surgery have been made accessible to poor, rural patients suffering from curable cataract blindness in Wardha district.

CBCWD project has made huge contribution in control of cataract blindness in Wardha District. So far 10,97,255 villagers aged above 50 years have been screened at their door steps in all the villages of Wardha District. From the project area 82,372 poor rural patients who were suffering from curable blindness had their sight restore by modern technique of Phacoemulsification /small incision cataract surgery at Kasturba Hospital and of these 81,417 (98.84 %) were successfully implanted with Intra Ocular Lens.

DrSushila Nayar Eye Bank

Dr. Sushila Nayar Eye Bank is functional in Department of Ophthalmology Kasturba Hospital which promotes eye donation activity and provides facilities for corneal transplantation to patients suffering from corneal blindness. The eye bank is registered with Government of Maharashtra and affiliated to Eye Bank Association of India.

During the year 16 eyes were processed in eye bank. Out of these, 8 eyes were collected from donor in Wardha district and 8 eyes were brought from Govt. Hospital Chandrapur.

Dr. Sushila Nayar Hospital, Utawali, Melghat Amravati (Lions Eye Centre Melghat)

Community ophthalmology services were started at Dr. S N Hospital Utawali from September 2017 for which 1 Senior Resident and 1 Junior Resident from department of Ophthalmology is being deputed on rotation basis. Lion Clubs International Foundation under the project grant SF

1802/ 3234 –H1 of Rs. 40 Lacs has provided necessary diagnostic, surgical equipment and Vehicle for establishing Lions Eye Centre Melghat at Dr. SushilaNayar HospitalUtawali.

During the year 4686 patient have been provided Eye care services at the center and 276 Cataract surgeries with IOL implantation have been performed. In the current year Optical Dispensing Unit has started functioning at the centre and manufactured spectacles for 123 needy patients and supplied the same at subsidised rate to the needy patients.

Quarter/Year	No. of OPD Patients	No. of Patients Operated	No. of Glasses Supplied
April - June 2021	1119	35	07
July - Sept 2021	1061	70	35
Oct - Dec 2021	1056	130	55
Jan – Mar 2022	1450	41	26
Total	4686	276	123

Under National Programme for Control of Blindness, KHS have entered in to an MoU with District Blindness Control Society Amrawati for providing free cataract screening and surgical services for cataract patients from 152 villages in Dharni Taluka. After inspection by district health authorities, Eye OT was started at Dr. S N Hospital Utawali in March 2018.

Under this project screening eye camps are being conducted in all the 152 villages of Dharni Taluka of Amrawati District. Screening for blindness and operable cataract is conducted door to door. Blind register is prepared at village level. In the current year 1,804 villagers aged > 50 years have been screened. Individuals with visual acuity < 6/60 due to cataract in either eye who were in need of cataract surgery were motivated and provided free to-and-fro transport and brought to Dr. SushilaNayar Hospital UtawaliMelghat for operation. All services including surgical treatment, medicines, Intra Ocular Lenses and glasses were provided free of cost. Computerized data bank is maintained to keep data records pertaining to all patients screened and operated for follow-up.

In the current year 276 cataract surgeries were performed. In all patients IOL implantation was done.

Visual acuity of 1804 persons (aged > 50 years) was tested by trained paramedical workers and 1,156 villagers who had visual acuity <6/60 were examined by Eye specialist at their door steps. 301 patients were referred to Dr. SushilaNayar Hospital UtawaliMelghat and of these 281 patients were provided free transport facility.

So far 1,521 poor rural tribal patients from project area who were suffering from curable blindness have undergone cataract surgery. Out of which 1,417 patients were operated at Dr. SushilaNayar Hospital UtawaliMelghat and 104 patients were operated at Kasturba Hospital Sevagram. All of them were successfully implanted with Intra Ocular Lens and their sight has been restored. Use of modern technique of small incision cataract surgery has resulted in early postoperative visual rehabilitation of patients. Through this project benefits of modern cataract surgery have been made accessible to poor, rural tribal patients suffering from curable cataract blindness in Dharni Taluka of Amrawati district.

Year	No. of OPD Patients	No. of Patient Operated
Sept 2017- March 2018	983	38
Apr 2018 - March 2019	3322	301
Apr 2019 - March 2020	4552	541
Apr 2020 - March 2021	3991	261
Apr 2021 - March 2022	4686	276
Total	17534	1417

Community Ophthalmology Services at DSNH Melghat

Year	No. of Patient Screened	No. of Patient Referred	No. of Patients Provided Transport
2018 - 2019	17,449	1383	362
2019 - 2020	10,666	1426	562
2020 - 2021	2,190	287	261
2021 - 2022	1,804	301	281
Total	32,109	3,397	1,466

Screening eye camps held from April 2021- March 2022

S N	Date	Name of Camp Place/ Town	District	Screening	No. of Patients Operated
1	21/06/2021	Civil Hospital	Wardha	61	61
2	07/07/2021	Rural Hospital Arvi	Wardha	12	9
3	13/07/2021	NakodaGhuggus	Chandrapur	35	14
4	31/07/2021	Bibi (Nandafata)	Chandrapur	45	31
5	07/08/2021	Ghuggus	Chandrapur	124	55
6	14/08/2021	Tukum	Chandrapur	111	28
7	24/08/2021	Ratnapur	Chandrapur	119	65
8	13/09/2021	Mohadi	Chandrapur	137	24
9	02/10/2021	2nd Oct Gandhi Jayanti Eye Camp	Wardha	704	478
10	08/10/2021	Lions Club Nalwadi	Wardha	35	17
11	16/10/2021	Virul Station	Chandrapur	79	29
12	30/10/2021	Nandafata	Chandrapur	275	94
13	14/11/2021	Gunjewahi	Chandrapur	210	106
14	16/11/2021	Gondia	Gondia	25	15
15	20/11/2021	Pombhurna	Chandrapur	345	255
16	27/11/2021	Gadchiroli	Gadchiroli	366	118
17	08/12/2021	Petgaon	Chandrapur	390	130
18	12/12/2021	Chunala	Chandrapur	590	149
19	18/12/2021	Chimur	Chandrapur	410	193
20	26/12/2021	BhangaramTalodi	Chandrapur	430	210
21	02/01/2022	MaheshwariBhavan	Wardha	640	196
22	08/01/2022	Wardhamaneri	Wardha	320	106
23	09/01/2022	Gadchandur	Chandrapur	360	97
24	23/01/2022	TalegaonDashasar	Amrawati	175	48
25	05/02/2022	Navargaon	Chandrapur	615	241
26	13/02/2022	Gondpipari	Chandrapur	380	172
27	20/02/2022	Sawali	Chandrapur	526	26
28	26/02/2022	Antargaon	Chandrapur	460	104
29	06/03/2022	Londholi	Chandrapur	380	193
30	10/03/2022	Mool	Chandrapur	240	66
31	13/03/2022	Tadali	Chandrapur	60	11
32	15/03/2022	Ballarpur	Chandrapur	390	84
33	20/03/2022	Chamorshi	Chandrapur	505	153
34	27/03/2022	Ghuggus	Chandrapur	560	65
		Total		10114	3643

Utawali Project, Melghat

Coordinator: Dr S Chhabra

Melghat is a tribal area in Dharni and Chikhaldara of Amravati district. Located 250 Km north-west from Sevagram, this area attracted wide media coverage because of malnutrition-associated deaths in the last decade. Three- fourths of the population is tribal- inhabited by Korku Adivasis. Most people, poor, illiterate and struggling to make both ends meet, live in dark ages and have little or no access to health care facilities, education and communication channels. To access specialized neonatal care most people have to travel 160 Km on a difficult and hilly terrain. Men, women and children trapped by the grimmest poverty and are further hit by inequality of health services. Children, in particular are the worst sufferers. Most of the sickness and deaths are due to malnutrition, pneumonia, malaria and diarrhea.

Initially the institute planned a long term project in this area and posted an Associate Professor in Medicine, and an Ophthalmologist, who voluntarily opted to reach the unreached. A base hospital at Dharni -Trimurti Hospital and 36 villages of Melghat had been chosen for research work. These villages are difficult to access, lack proper transport facilities and are located in the midst of dense forest and hills about 50 Km from Dharni. Health education on malnutrition, breast feeding, diarrhea and sexually transmitted diseases has been started since the last 9 years. This area is known for the highest under-five child mortality (80 per 1000 live births) and the highest mortality in the age group (16-50 years) in Maharashtra.

Kasturba Health Society has been providing health facilities in this region through the Mahatma Gandhi Adivasi Hospital and Dr Sushila Nayar Netralaya since the last 17 years. KHS had been running an OPD and 6-bed hospital as part of its Tribal Health Research Project in Melghat. However in view of high maternal and infant mortality rates, it was decided to take this initiative forward and expand this endeavor with the help of the faculty and residents of MGIMS.

The Kasturba Health Society (KHS) started its OPD in the Dr Sushila Nayar Hospital (earlier called Mahatma Gandhi Adivasi Mother and Child Hospital) on 1 Jan 2012. A 30 bed hospital for women and children in the tribal area of Utawali, Dharni was also initiated with funding support from the Shri Brihad Bharatiya Samaj, a Mumbai- based nongovernmental organization. The Government of Maharashtra has recognized this as a referral unit.

A multispeciality hospital was commissioned on the site on 4 Feb 2016, and 7.5 acres of land was acquired for the purpose. A team of obstetrician-gynecologists, pediatricians, anesthetists, medical officers, interns, administrative officer and nurses work at Utawali hospital round the clock and manage emergencies, outpatients and inpatients. The team soon realized that more than ill-health, they had to battle the social circumstances. The tribal folk had their unique beliefs, superstitions and cultural practices. Coupled with these prejudices, poverty and illiteracy, it has been an uphill task to counsel patients and ensure compliance. It is a challenge, but the team has been running an operation theatre too in these resource-limited settings. The doctors working here have several heartening stories to share of how they managed critical patients using their ingenuity and expertise. The hospital is now equipped with essential infrastructure including blood storage facilities (whole blood and components), instruments for anesthesia, newborn resuscitation, multipara monitors, suction machines operation tables etc. have been procured. Earlier there were no facilities for conducting Caesarean sections in the entire area.

The very first Caesarean section in Melghat was conducted in Utawali hospital on 20 Jan 2012. The first hysterectomy was done to remove a large uncommon ovarian tumor on 15 Feb 2012. Caesarean sections, major and minor gynecological surgeries are now regularly being conducted in the hospital. An USG machine has been installed with the approval of competent authorities. Permission to perform female sterilization and induced abortion has been obtained. The area is prone to load shedding, and hence a new 7.5 KV generator has been installed in the hospital. A pipeline has been laid from Utawali village to the hospital to counter the water scarcity. Arrangements have been made to enable proper waste disposal and sanitation. A total of 100 villages receive community based maternal, neonatal care in Dharni block of Melghat.

In 2021-22, a total of 11926 patients were seen in the OPD. 640 patients were admitted in the wards of the hospital. The numbers of patients admitted in each speciality are as follows: Medicine (9), Ob/Gyn (197), Pediatrics (120) and Ophthalmology (314). 112 babies were delivered, 60 by Caesarian section. A total of 417 surgeries were conducted (Gynecology-21, Obstetrics-84, Ophthalmology-312) of which, 386 were major surgeries. Medical officers examined 2940 patients in community clinics, while 173 patients were seen at the prenatal clinics.

The Dr Sushila Nayar Hospital has been empanelled under the Mahatma Jyotiba Phule Jan Aarogya Yojana (MJPJAY) and Ayushman Bharat Yojana (PM-JAY).

Twelve community camps were organized with the help of local primary health centers and medical officers posted in villages. Total of 175 patients were examined and treated in these camps.

Academic updates and CMEs were conducted on how to handle OBGY emergency cases especially Post-partum hemorrhage, Exclusive breast feeding and neonatal care, a update on awareness of Laksh, Daksh, Kayakalp, Infection Control as well as Waste Management programs of Government of India, Awareness of fire safety with drill.

A number of research projects are being conducted in Melghat. Some of these are:

Maternal and perinatal Health Research collaboration, India (MaatHRI) in collaboration with Oxford University UK

Awareness of hypertensive disorders of pregnancy amongst rural tribal women of hilly forestry region in central India

Awareness about planned small families in women of communities with extreme poverty in remote villages

In search of wellness for adolescent girls who suffer due to invisible, visible violence in rural tribal communities with extreme poverty, change during Covid-19 pandemic

Wellness of rural tribal women at home and work places of a hilly forestry region with extreme poverty

Aakanksha Shishu Kalyan Kendra

Coordinator: Dr S Chhabra

Aakanksha Shishu Kalyan Kendra is a sequel of journey started with a mission for safe motherhood and safe baby for one and all, even for a unwed girls with unwanted advanced pregnancy. In 1988, a thought came to try and help unwed girls, who used to report to our hospital with unwanted advanced pregnancy. At that time abortion was not possible according to country's existing abortion laws. The centre formally came into existence in 2002 for the welfare of unwed mothers and their babies. In 2004; the centre obtained the license for national adoption of surrendered babies to needy parents. In 2015, Indian placement agencies recognized the centre for national adoption. Now our center is recognized for international adoption also. During April 2021to March 202, thirteen babies were adopted and have become the joy in the life of needy couples; one of them were by parents from out of country. The Honorable President of India Shri Ram Nath Kovind acknowledged the work of this centre on occasion of Golden Jubilee celebrations of MGIMS, Sevagram.