

# Community Activities

## Department of Community Medicine

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### 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.

### 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 2022 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 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. 69,15,913 has been collected for insurance coverage for the period Jan-Dec 2021. This includes full insurance coverage of 385 community based organizations and 25 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, 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

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## 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
<b>Total</b>	<b>108724</b>	<b>382809</b>

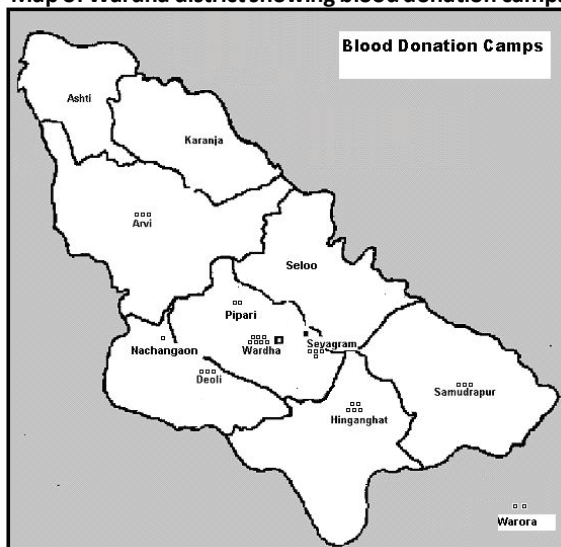
## Patients seen at Rural and Urban Health Centres

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

## 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

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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
<b>Total</b>	<b>10228</b>

# Community Ophthalmology

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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
<b>Total</b>	<b>4686</b>	<b>276</b>	<b>123</b>

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
<b>Total</b>	<b>17534</b>	<b>1417</b>

#### 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
<b>Total</b>	<b>32,109</b>	<b>3,397</b>	<b>1,466</b>

**Screening eye camps held from April 2021- March 2022**

<b>S N</b>	<b>Date</b>	<b>Name of Camp Place/ Town</b>	<b>District</b>	<b>Screening</b>	<b>No. of Patients Operated</b>
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
		<b>Total</b>		<b>10114</b>	<b>3643</b>



# Utawali Project, Melghat

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**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**

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**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.