National Service Scheme, Unnat Bharat Abhiyan, Optional Holiday, Matra Bhasha Diwas & Language classes

## MGMIHS NSS ACTIVITIES

### महाराष्ट्र शासन उच्च व तंत्र शिक्षण विभाग, मंत्रालय.

एलफिन्स्टन तंत्र विद्यालय परिसर, 3 महापालिका मार्ग, धोबी तलाव, मुंबई-४०० ००१. ई-मेल- nssmantralaya@gmail.com दूरध्वनी क्र. ०२२-२२६७९५६५.

क्रमांक: संकीर्ण-२०१८/साशि-७

दिनांक: १२.१०.२०१८.

प्रति,

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एमजीएम इन्स्टिट्यूट ऑफ हेल्थ सायन्सेस (अभिमत विद्यापीठ), नवी मुंबई

> विषय : स्वयंनिर्वाहीत २०० विद्यार्थ्यांचे राष्ट्रीय सेवा योजना एकक सुरु करण्याबाबत प्रस्ताव संदर्भ: आपले पत्र दि. २७.०८.२०१८

उपरोक्त विषयांकीत संदर्भाधीन पत्र या कार्यासनास प्राप्त झाले आहे.

(डॉ. अतुल हं.साळुंके) राज्य संपर्क अधिकारी/विशेष कार्य अधिकारी.



Dr. Rajesh B. Goel Registrar MGM Institute - Lealth Sefences (Deemed University us 3 tol 100.0 Navi Mumbui- 410 200



MGM INSTITUTE OF HEALTH SCIENCES (Deened University with artUOC Act, 1996) Grade 'A' Accredited by NAAC Sector-01, Kamothe, Navi Mumbai - 410 209 Tel 022-27432471, 022-27432994, Fax 022 - 27431094 E-mail : registrar@regrouphs.com | Website : www.mgroups.com

### Glimpses of Activities under MGMIHS NSS Unit

Installation of MGMIHS NSS unit is done in the first week of Sept 2019 with one Programme coordinator and 8 programme officers from the constituent colleges under MGMIHS. MGMIHS NSS unit is installed with the presence of Mr Sudhir Puranik , Director, NSS, University of Mumbai. MGMIHS has been allotted a NSS unit with 500 NSS students Volunteers by Higher education and Technical Department, Government of Maharashtra.

MGMIHS NSS Unit has allocated 300 Students Volunteers to MGM Navi Mumbai Campus & 200 Student Volunteers to Aurangabad Campus.

### **Glimpses of Activities Conducted by MGMIHS NSS Unit:**

### 1. Water Harvesting & importance of water & Environment:

a) Exhibition & Puppet show to create awareness on judicious use of water and No plastic use

Place of Activity: MGM Medical College & Hospital Navi Mumbai

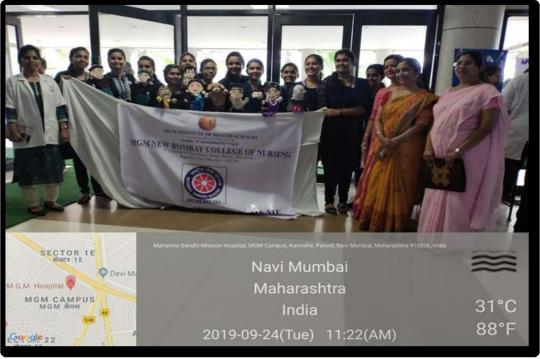
No of Volunteers: 75

Beneficiaries: 200 patients & Relatives in hospital

Glimpses of Activities:

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Puppet Show on Judicious use of water at MGM Hospital, Navi Mumbai

Dr. Rojesh R. Gaol Registrar MG-M Landin Land Sciences Berriel University on 2.47 (1) Navi Maning. 409 (19)



Exhibition on No plastic use by NSS Volunteers at MGM Hospital Navi Mumbai



**Plastic Monster in Exhibition** 

- b) On occasion of NSS Day Celebration at MGM Aurangabad Campus Rally to save Water and Save Environment By Medical, SBS and Physiotherapy college NSS Student Volunteers :
  - Place of Activity: MGM Aurangabad Campus
  - No of Volunteers: 200 NSS Volunteers
  - Beneficiaries: Aurangabad Community





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#### 2. Tree Plantation:

A tree Plantation was organised by MGM Medical College on a hill at Phanaswadi, Pale (Budruk), Taluka- Panvel under the guidance of Dean Dr.G.S Narshetty. The coordinator and in-charge of the team was Dr.Pradeep Sawardekar, Professor in Department of Community Medicine. It was conducted on Sunday, 21<sup>st</sup> June 2019.

Place of Activity: Phanaswadi, Pale (Budruk), Taluka- PanvelNo of Volunteers: 42 NSS VolunteersBeneficiaries: 200 saplings are planted at Phanaswadi Hills





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**3.** Environment Cleanliness :

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# IEC activity on Environmental hygiene and plastic free environment

The activity was planned on 6<sup>th</sup> October at Chaul village, Taluka: Ravdanda, disrtrict: Raigad. The volunteers gathered in the college campus at sharp 7gm and saluted the statue of Mahatma Gandhi.





Dr. Rojesh B., Gasi Registrar MGAN Jacificator, "Inolffi Selences Derried Criteridge in 2017 (1) (1) Mart Montals 408 (1) IEC activity By NSS volunteers MGM MC Aurangabad NSS unit to patients on No Plastic use & its consequences





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#### 4. Fit India Movement

Rally on 2<sup>nd</sup> October 2019 Gandhi Jayanti Initiative of FIT INDIA along with Swachhata Hi Seva

- On the occasion of the 150<sup>th</sup> Birth anniversary of Mahatma Gandhi, FIT INDIA plogging run was organized as a tribute to the Father of the Nation along with keeping in mind the initiative in "Swachhata Hi Seva" in collaboration with Panvel Mahanagarpalika
- Objective: To promote physical activity and fitness and help in getting rid of plastic garbage in the nearby areas.
- 54 NSS volunteers from all constituent colleges have participated in above rally .
- ► All NSS units got appreciation letter from Fit India.



Dr. Rajesh E. Gool

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### 5. Health Related Activities :

- a) Involvement of NSS volunteers in Pulse polio Programme :
  - Place of Activity: Urban Health Post, Kalamboli, Navi Mumbai on 15-9-19
  - No of Volunteers: 70 NSS Volunteers
  - Beneficiaries: 2000 under 5 Children





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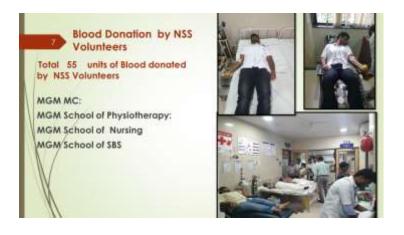
#### b) Blood Donation Camp by NSS Volunteers :

On occasion of NSS Day on 24<sup>th</sup> Sept, Blood Donation Camp was organised by MGMIHS NSS unit at Kamothe, Navi Mumbai

Place of Activity: MGM Medical College and Hospital, Navi Mumbai

No of Volunteers: 200 NSS Volunteers participated in this activity

Beneficiaries: 55 NSS Volunteers Donated Blood



#### C) Following important Day Celebration Days By NSS unit

- Mental Health week Celebration (6<sup>th</sup> -12<sup>th</sup> October 2019)
- Global hand washing days celebration at MGM school Nerul, Navi Mumbai on 15<sup>th</sup> October 19( Nursing, Navi Mumbai)
- Students Reading Day (Nursing, Navi Mumbai)
- Global hand washing days celebration on 15<sup>th</sup> October 19 at IT school Aurangabad ( MGM MC, Aurangabad)
- Poshan Ahar week celebration (SBS, Navi Mumbai)
- National Unity Day Celebration at MGM Aurangabad
- World AIDS Day celebration at MGM Hospital, Navi Mumbai (MGM MC, Navi Mumbai)

Dr. Rojesh K. Gool Rogistrar MIGM Initialis - theolff Schurth Iberiel Observation (2010) Next Montae-406 108

Student Mental Health awareness Programme on 18-10-19 (13 NSS Volunteers) on occasion of Mental Health week (6<sup>th</sup> -12<sup>th</sup> October 2019







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# Global hand washing days celebration on 15<sup>th</sup> October 19





Special Camps:

<sup>19</sup>NSS volunteers participated in screening camp for risk factors of HT on occasion of World Heart Day (MGM School of Physiotherapy Aurangabad)



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### c) Others

### Celebration of 150<sup>th</sup> anniversary of Mahatma Gandhiji on 2<sup>nd</sup> October 2019

Following programs were arranged

- Bhajan Sandhya (MC), Role play and Skit (Medical, Physiotherapy & Nursing NSS student)
- Essay writing competition on life of Mahatma Gandhi
- Poster competition and exhibition on life events of Mahatma Gandhi
- IEC activity on Environmental hygiene and plastic-free environment





Dr. Rojesh K. Gool Registrar ML-M Initialis ... (boolf) Schweits (berred Urberdy (b. 2017)). Net Montae 445 118

### Walkathon for Awareness for Health :

MGM New Bombay Hospital, Vashi had organised the 7<sup>th</sup> annual walkathon on 19/01/2019(SUNDAY),

on **"LET'S WALK TOGETHER FOR A HEALTHY LIFESTYLE".** All **the depts. of MGM Medical college** and **NSS Unit** had actively participated in this walkthon. The main co-ordinator for the walkathon was Dr.Pradeep N. Sawardekar , Professor , Dept. of Community Medicine. All NSS volunteers had Participated in this Walkthon . Before the Walkathon started, there was Zumba dance and exercises taught by the trainers. All participants took part in dancing and physical training enthusiastically. The walkathon started sharp at 7.30 am and covered a distance of 5 kms.

Almost 500 participants had participated in this walkathon from MGM Medical College and Hospital.

The participants were Dean Sir, Head of various departments including Teaching faculties, Interns, Students, Administrative staff, Support staff and others. The walkathon was a huge success. Designer T-shirts and refreshments were provided to all the participants.

#### **Glimpses of Walkthon:**



# 7<sup>th</sup> Annual Walkathon "Let's Walk Together for a Healthy Lifestyle!" 19/01/2019, at Vashi

Dr. Rojesh K. Gool Rojektar MGM Institutes, Joseff Scheeres Obered Deterly in 2017 (0) (56) Set Monta-40 (2)



7<sup>th</sup> Annual Walkathon "Let's Walk Together for a Healthy Lifestyle!" 19/01/2019, at Vashi

Dr. Rojesh B., Gaol Rogertar MGAM facilitatis ... (north Schurens internet Criterilit in 2014). And Mart Montane 446 114 The NSS unit and department of community medicine had participated in the walk-a thon held on 30/01/2020 (THUSDAY) on the theme "HEALTH, SAFETY & ENVIRONMENT" organized by Taloja Manufacturers Association (TMA).

### Pre-walkathon preparation:

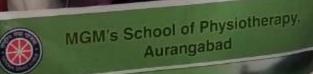
We had sent invitations to Medical Superintendents ,all HODs, Faculties , PG students , Nonteaching staff, Interns and students of 1<sup>st</sup> & 2<sup>nd</sup> MBBS requesting them to participate in the walkathon along with their family and friends to make this event a grand success.

### Walkathon Day:

The rally started with registration of the participants. The organizers had distributed caps to everyone taking part in the rally. Everyone before the commencement of the rally sang the national athem. The theme was "Health, safety & environment" The rally started around 10pm from IGPL company and covered a distance of around 5km. All the participants were very enthusiastic. They displayed and cited slogans on the theme "Health, Safety & environmemt".

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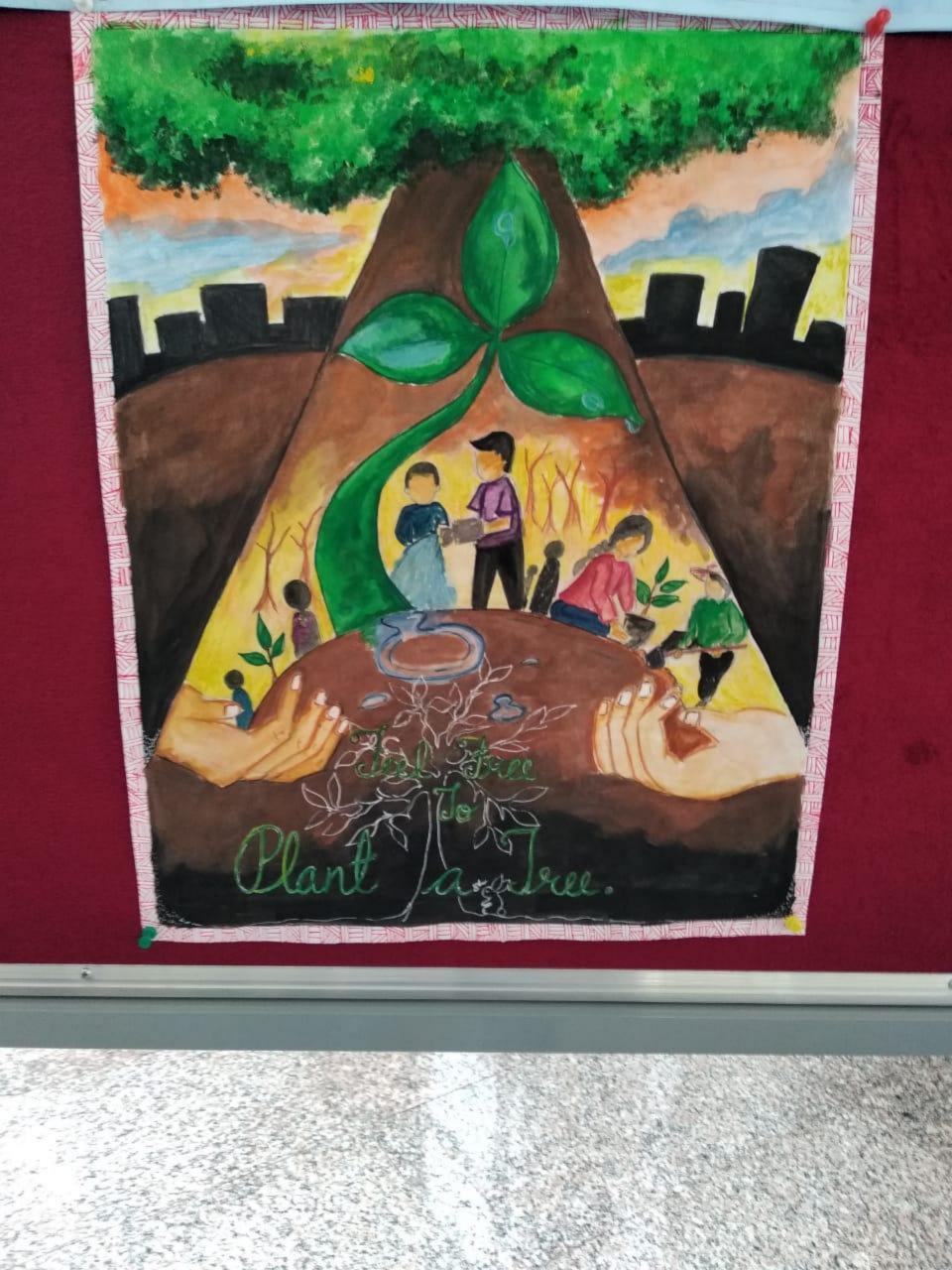
NATIONAL SERVICE SCHEME DAY राष्ट्रीय सेवा योजना दिवा SAVE WATER, SAVE TREES SAVE WATER, SAVE TREES

MOES THE AS IT NEVER CAMER & FEE

MGM MEDICAL COLLEGE



# SAVE TREES, SAVE WATER



## MGMIHS

## UNNAT BHARAT ABHIYAN



### उन्नत भारत अभियान

राष्ट्रीय समन्वय संस्थान भारतीय प्रौद्योगिकी संस्थान दिल्ली <sup>हौज़ खास, नई दिल्ली-99009६</sup>



#### UNNAT BHARAT ABHIYAN NATIONAL COORDINATING INSTITUTE INDIAN INSTITUTE OF TECHNOLOGY DELHI Hauz Khas, New Delhi - 110016 Website : http://unnat.iitd.ac.in

Prof. Virendra K. Vijay National Coordinator, UBA Professor CRDT, IITD

Tel. :+91-11-2659 1121/1157 (O) Fax :+91-11-2659 1121 Email : unnatbharatabhiyaniitd@gmail.com vkvijay@rdat.iitd.ac.in

Dear Sir/Madam,

Congratulations to all the Participating Institutions (PIs) selected under Unnat Bharat Abhiyan, a flagship program of Ministry of Human Resource Development (MHRD) Government of India through a challenge mode application. The Mission of Unnat Bharat Abhiyan is to enable participating higher educational institutions to work with the people of rural India in identifying development challenges and evolving appropriate solutions for accelerating sustainable growth. It also aims to create a virtuous cycle between society and an inclusive academic system by providing knowledge and practices for emerging professions and to upgrade the capabilities of both the public and the private sectors in responding to the development needs of rural India.

As per the programme, educational institutions is primarily to develop linkage with selective rural clusters (preferably of five villages), to get involved in the planning process and to promote the requisite S&T interventions to improvise and expedite the developmental efforts in those clusters. The approach is a departure from the grant oriented method and would see the participation and commitment of faculty and students in this endeavour.

We shall be processing release of Rs. 10000/- per village under the UBA program. The funds are mainly meant for assistance for awareness, Gram Panchayat Development Plan (GPDP) study, need assessment, and contingency expenditure. There are provision of Rs 1.0 lakh for technological intervention/ solution and Rs 0.50/- lakh for customization of a technological solution under the program. Which you can avail of afterwards by submitting proposals with ratification of the Gramsabha. A two-way channel between PIs and National Coordinating Institute (NCI) as well as Subject Expert Groups (SEGs) for project proposal submission and evaluation has been developed and functional on UBA portal. You can use your login credential for uploading proposals on UBA website 'FINANCIAL AIDS'. The login credentials are same as your registration login credentials.

You are also requested to keep IIT Delhi, the National Coordinating Institute updated about your activities so that the same can be uploaded on the website of UBA.

Regards and best wishes for your institution for contributing to India's development.

With regards

Your Sincerely

Prof. Virendra K Vijay National Coordinator, Unnat Bharat Abhiyan **Government of India** 

# **Unnat Bharat Abhiyan:**

## (2018-2019)

### BY

# MGM Medical College & Hospital, Aurangabad [MS], India



### Introduction:

Unnat Bharat Abhiyan (UBA) is a flagship program of Ministry of Human Resource Development (MHRD) Govt. of India. UBA aims to bring a transformational change in rural development by active participation of higher academic institutions with local communities, and reorientation of curricula and R&D design of knowledge Institutions.

The Mission of Unnat Bharat Abhiyan is to enable participating higher educational institutions to work with the people of rural India in identifying development challenges and evolving appropriate solutions for accelerating sustainable growth. It also aims to create a virtuous cycle between society and an inclusive academic system by providing knowledge and practices for emerging professions and to upgrade the capabilities of both the public and the private sectors in responding to the development needs of rural India.

IIT Delhi has been designated to function to lead and coordinating organization for UBA activities in the country.

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### **Objectives of Project :**

- Holistic development of the villages adopted by preparing an Integrated Development Plan for the sustainable development of the village.
- To improve socio-economic conditions, create livelihood opportunities and increase food security & well-being of the poorest of the poor.
- To increase productivity by cropping intensity and change in cropping pattern leading to higher production and productivity.
- To empower the women through active participation in decision making process, increase income and access to resources
- To liaison with district administration and panchayati raj institutions to help them to prioritize the fund allocation to various developmental activities.

# Villages adopted by MGM Medical College & Hospital for Unnat Bharat Abhiyan 2018-2019.

1. Sindon

2. Bhindon

3. Shastramuli

4. Pardari Tanda

5. Shivgad Tanda

Note: All adopted above villages are from Tahasil & Dist Aurangabad [MS], India. All villages are approximately 15-20 km from MGM Medical college & hospital.

### Plan of Action: [For Adopted villages]

- 1. Identification of the key persons for knowledge input.
- 2. Social Mobilization through hamlet meeting and village meeting.
- 3. To conduct primary survey (Village level survey, Household Survey, Rapid Rural Survey, Participatory Rural Appraisal) and collection of secondary information required for preparation of the plan followed by analysis of data.
- Analysis of the primary and secondary data will be presented to the Gram Panchayat and the Gram Sabha
- 5. Finding out the issues and potential of the village by considering the feedback from the villagers by conducting series of meeting with the villagers.
- 6. Prepare an integrated village development plan with a focus on enhanced
- 7. Identifying key expert who will be involved in providing the technical support in implementation of this plan and preparation of cost estimates.
- 8. Implementation of the plans in each component, and then provide support in monitoring and evaluation.

### **Tentative Timeline of Project:**

A tentative timeline for its implementation could be as follows.

Item of work	Time from the approval
Awareness generation	December 2018
Social mobilization	December 2018
Baseline Survey	January 2019
Situation analysis	February 2019
Village development plan	March 2019
Approvals and sanctions	May 2019
Implementation in the field	June 2019
Progress Review	Once every month

The Village is the cell of the national body and the cell-life must be Healthy and developed for the national body to be health and developed.

....Sri Aurobindo

## Thanking You.....



UNNAT BHARAT ABHIYAN Mahatma Gandhi Mission Institute of Health Sciences, Navi Mumbai

VILLAGE DEVELOPMENT PLAN VILLAGE NAME: DHAMANI MALDUNGE PANCHAYAT TEHSIL/TALUKA- PANVEL DIST- RAIGAD STATE:MAHARASHTRA



### **INTRODUCTION:**

Conceptualized by a group of dedicated faculty members of Centre for Rural Development and Technology, IIT Delhi, Unnat Bharat Abhiyan (UBA) is a flagship program of Ministry of Human Resource Development (MHRD) Govt. of India. UBA aims to bring a transformational change in rural development by active participation of higher academic institutions with local communities, and reorientation of curricula and R&D design of knowledge Institutions. IIT Delhi has been designated to function to lead and coordinating organization for UBA activities in the country.

The Mission of Unnat Bharat Abhiyan is to enable participating higher educational institutions to work with the people of rural India in identifying development challenges and evolving appropriate solutions for accelerating sustainable growth. It also aims to create a virtuous cycle between society and an inclusive academic system by providing knowledge and practices for emerging professions and to upgrade the capabilities of both the public and the private sectors in responding to the development needs of rural India.

Under the UBA program MGMIHS, Navi Mumbai has adopted a cluster of 5 villages under Maldunge Panchayat-

1)Dhamani

2)Dhodani

3)Dehrang

4)Tawarwadi

5)Waghachi wadi

A village development plan (VDP) is a plan outlining the desired developments according to the inhabitants – for the quality of life within the village and in the immediate surroundings. A VDP Identifies issues affecting the community – social, environment and economic. It's a statement about how a community sees itself developing over the next few years and what actions are needed to realize that vision.

### 1. Objectives

Based on the preliminary interactions with the villagers and the district/block administration, the objectives of the work to be carried out by the MGM team in this village was defined as follows:

- To improve accessibility to healthcare facilities and improve the overall health status of the local population.
- To improve socio-economic conditions, create livelihood opportunities and increase food security & well-being of the poorest of the poor,
- To ensure effective participation of the villagers for the holistic development of the village Dhamani by preparing an Integrated Development Plan for the sustainable development of the village using eco-friendly sustainable technologies and local resources, creating sufficient employment opportunities in the process, harnessing multifarious Govt. Schemes,
- To empower the women through active participation in decision making process, increase income and access to resources,
- To liaison with district administration, various NGOs, CSR and panchayati raj institutions to help them to prioritize the fund allocation to various developmental activities and provide necessary inputs on technologies to be implemented in the field.

### Methodology

In order to meet these objectives an overall integrated approach is required along with the quality input from various experts from different fields of knowledge. The steps involved in the same can be enumerated as follows:

- (a) Identification of the areas in which MGM can provide technical inputs along with the key experts who will be part of the team.
- (b) To conduct primary survey (Village level survey, Household Survey, Participatory Rural Appraisal) and collection of secondary information required for preparation of the plan followed by analysis of data.
- c) The present scenario as derived by analysis of the primary and secondary data will now be presented to the Gram Panchayat and the Gram Sabha.

- d) A participatory mechanism will be adapted for finding out the issues and potential of the village by considering the feedback from the villagers by conducting series of meeting with the villagers and solving the problem related to health issues.
- (g) After implementation of the plans in each component, the MGM team will also provide support in monitoring and evaluation of the same by guiding the technical personnel who can be hired by the Panchayat. MGM team will also help these technical nodal personnel in preparing the monitoring and evaluation report.
- (h) Subsequently, a consolidated report will be prepared of all the experiences of the MGM team related to the development work in the village Dhamani followed by preparation of guidelines for participation of any technical institute in the development of a village.

VILLAGE	NO. OF HOUSEHOLDS	POPULATION
1.DHAMANI	74	549
Haushachiwadi	28	223
2.DHODHANI	230	1227
Pimpalwadi	18	63
Chinchwadi	40	136
3.WAGHACHIWADI	111	520
4. TAWARWADI	120	618
Satichiwadi	36	187
Kombaltekdi	47	202
Kondichiwadi	48	227
Maldunge	15	55
• Tadpati	24	79
5. DEHRANG	65	335
Bapdevwadi	25	150
TOTAL	881	4571

• Population and Number of households of Adopted villages under Maldunge Panchayat

		DEHRANG	DHAMNI	MALDUNGE	DODHANI
1	Village area	1758.42	615.13	5337.45	1622.02
2	Land available for agriculture	459.47	514.1	1566.55	711.57
3	Forest area	482.6	55.72	3175.05	671.87
4	House area	3.55	1.37	17.52	7.02
5	Area under water bodies	15.22	10.37	58.01	25.12
6	Common land area	0.25	0.25	50	0.5
7	Average per capita land	1 acre	Approx 0.70 Acre	Approx 1.10 Acre	Approx 0.5 Acre
8	Waste land	104.52	88.12	220.04	107.57
9	Water level	450	450	450	450
10	Public forest	-	-	-	-
11	Private forest	482.6	55.72	3185.05	671.87
12	Types of trees in the forest	Teak wood,Tmari nd, Peepal			

#### (i). Village Name: Dhamani

Maldunge panchayat is adopted by MGM institute of Health Sciences, Navi Mumbai under Unnat Bharat Abhiyan (UBA) and Dhamani is one of the revenue villages of this Panchayat. In order to achieve the goals and vision of Unnat Bharat Abhiyan it is needed to prepare a Village Development Plan (VDP) so that the objective of UBA can be implemented in the Dhamani village in systematic way and in mission mode.

Dhamani is one of the revenue villages of Maldunge, post Waje ,tehsil Khalapur ,taluka Panvel, district Raigad, Maharashtra State.It is situated 15km away from sub-district headquarter Panvel and 70km away from district headquarter Alibaug.Thane railway station is major railway station close to Dhamani about 29 km. Dhamani consists of Choti Dhamani, Mothi Dhamani, Houshachi wadi hamlets.

#### (ii) Social Mobilization through hamlet meeting and Village meeting

At first, a hamlet and village meeting were held for discussion of UBA objective and plan. All villager, irrespective of gender and caste participated and provided their valuable inputs. After this reconnaissance survey, village level and house hold survey were conducted for collection of basic information and problems of the village. While conducting household survey patch visit were done at different locations of the village. In this village nature has given a lot, specially forest and river resources, but most of the families of this village are landless.Some villagers own land upto 10 gunte(1/4<sup>th</sup> acre). They earn their meagre livelihood as unskilled labour work. The farmers grow rice crops.

The ground water level ranges in between 400 feet. The villagers drink water un-purified or unboiled.

Almost 70% household have toilet constructed under Swachh Bharat Mission but these are not in use due to improper sewage drainage and also due to water shortage. In this village many families have received LPG Gas under Ujjawal Yojna but most of the families use wood for domestic fuel until. Women of this village do not have much livelihood opportunities, so they are involved in domestic work. Some of them help their male partner in farming. Choti dhamani has electric supply through hooks on main wire but no meter as they have not paid the electricity bills.

About Anganwadis: There is problem of leakage during rainy season. There are 43 students from 0-6 years. There are no toys and books for children. The meal is prepared at the Anganwadi sevikas home and she brings boiled and cooled water from her own house for the children to drink.

About Primary School: School has a student count of 64. Of which 33 are girls and 31 are boys. The student count has reduced over the year as many students are either going to private school run by a trust which is just behind the public school or a few are going to Adivasi ashram school and few to Schools in panvel, Kamothe. There is one teacher in the school. The infrastructure of the school is good. There is a separate water supply tank for School. There are 4 computers provided but are not in use due to hardware issues.

#### (iii)Household Survey:

In household survey form basic information about a family like how many no. of persons are in family, their age, education, health, livelihood, agriculture related information and many other issues which is related to their day to day life like, problems faced by the villagers in their village and No of Govt. scheme reach in the village and finally prioritize these problems were collected. This becomes the basic evidence as well as the information to prepare village development plan according to their needs and requirement.

#### (iv) Problem identification/ Need analysis:

Based on the House hold survey and hamlet meeting and PRA the following problems were identified as priority issue faced by the villagers:

a)Proper pukka roads

b)Increasing number of borewell points

c)No separate place for washing clothes and utensils

d)open drainage

e)Mosquito menace

f)No availability of doctors at Dhamani subcentre

g)Water for irrigation

h)Unemployment

i)Transport for medical emergencies

j)Anganwadi:

- Shortage of anganwadi workers
- Shortage of toys
- Shortage of book

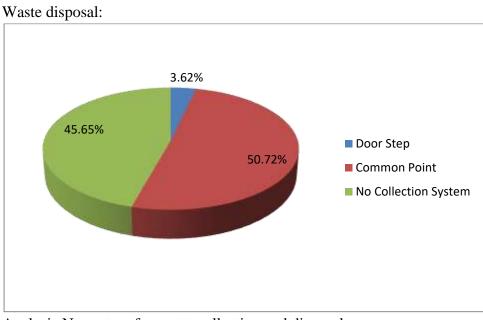
k)Required public toilet with proper drainage system l)Problems of school:

• Computer hardware issues

• No proper toilets

m) No proper Sewerage

- n) No self-help groups
- o) No proper street lamps
- p) No skill labour
- q) Women empowerment
- r)Alcoholism



Analysis:No system for waste collection and disposal

Problems in houshachi wadi:

- Chlorination of water not done
- Unequal Water points distribution

Problems in choti dhamani:

- No place for washing
- Open drainage
- Open defecation
- No anganwadi
- Indoor air pollution

#### (vi) Participatory Rural Appraisal (PRA)

Participatory Rural Appraisal is an exercise which is conducted to know the various information about the village with the help of villagers where villagers share the various information about the village with the outsiders. The role of an information seeker is to facilitate the villagers. Various kind of information can be generated through PRA tools regarding all the aspects of the village.

It is a participatory method to gather/ collect information by involvement of Rural/ local communities for decision making and implementation of the development project, "for the rural community, by the rural community and with the rural community".

It is a process to involve the community in planning and decision making. Community develop their own skills needed to address issues, analyze options and carry out activities. Participatory decision making reflects respect for human dignity and creating the opportunity for individuals to fulfil their responsibility to exercise the right.

"An approach and methods for learning about rural life and conditions from, with and by rural people". (Chambers 1994)

*Participatory* – Means that people are involved in the process – a "bottom-up" approach that requires good communication skills and attitude of project staff.

*Rural* – The techniques can be used in any situation, urban or rural, with both literate and illiterate people.

*Appraisal* – The finding out of information about problems, needs, and potential in a village. It is the first stage in any project.

PRA is a growing combination of approaches and methods that enable rural people to share, enhance and analyse their knowledge of life and conditions, to plan and act and to monitor and evaluate. The role of the outsider is that of a catalyst, a facilitator of processes within a community which is prepared to alter their situation. The aim of PRA is to help strengthen the capacity of villagers to plan, make decisions, and to take action towards improving their own situation. The basic idea of PRA is to rather quickly collect, analyse and evaluate information on rural conditions and local knowledge. This information is generated in close co-operation with the local population in rural areas. Therefore, the research methods had to be adjusted to local conditions, i.e. they had to meet the communication needs of illiterate people or people who are not used to communicating in scientific terms.



Diagrammatic presentation of a typical PRA process PRA exercise at Dhamani

We conducted various PRA exercises and on the basis of that we formulated a village development plan.

#### a: Resource mapping

At the end of the household survey, we organized a meeting with the villagers to discuss major issues related to Dhamani village. We conducted the PRA exercise in open space near anganwadi. The present, anganwadi sevika, young youth and number of villagers participated in this mapping exercise. A young lad drew a rough sketch of village map on ground with the help of stick and ash. Each and every detail has been drawn on A0 size chart paper first with the pencil and then with the different color sketches for easy visual identification of all abovementioned information. Please refer Fig (1) and below mentioned relation of colored lines with the elements of the collected information. We marked the important landmarks such as 1 Anganwadi, 2 Samajmandir(community hall), 1 subcentre, 2 schools(1 public 1 pvt). There is a private Public distribution system for 12 villages which is open for a week once a month. There the villagers get a basic ration of rice, sugar, cooking oil, kerosene, tur dal. There is a gobar gas plant which is not working.



Map drawn by the villagers with chalk, stick and ash.

Demographic profile of village:

According to Census 2011, Dhamani's population is 778.

Out of this, 399 are males whereas the females count 379 here.

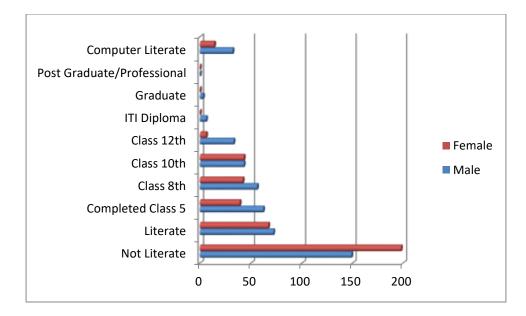
This village has 125 kids in the age bracket of 0-6 years.

Out of this 59 are boys and 66 are girls.

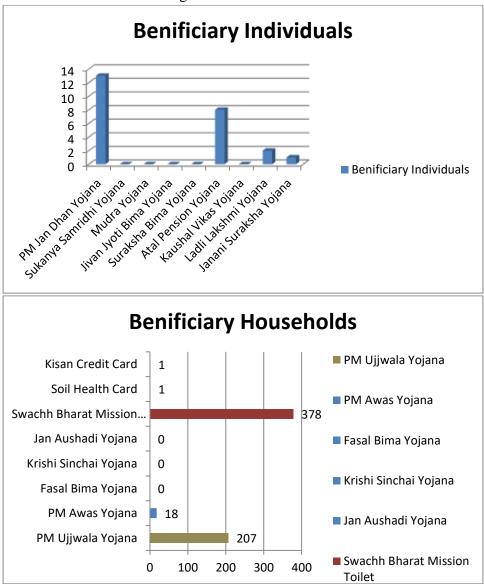
Literacy rate in Dhamani village is 42%.

327 out of total 778 population is literate here. In males the literacy rate is 50% as 200 males out of total 399 are literate whereas female literacy rate is 33% as 127 out of total 379 females are educated in this Village. The Negative side is that illiteracy rate of Dhamani village is shockingly high -- 57%. Here 451 out of total 778 individuals are illiterate. Male illiteracy rate here is 49% as 199 males out of total 399 are uneducated. Among the females the illiteracy rate is 66% and 252 out of total 379 females are illiterate in this village.

Census Parameter	Census Data
Total Population	764
Total No of Houses	278
Female Population %	48.3 % ( 605)
Total Literacy rate %	75.3 % (944)
Female Literacy rate	34.2 % ( 428)
Scheduled Tribes Population %	17.2 % ( 216)
Scheduled Caste Population %	7.0 % ( 88)
Working Population %	39.7 %
Child(0 -6) Population by 2011	152
Girl Child(0 -6) Population % by 2011	55.9 % (85)



Government scheme coverage:

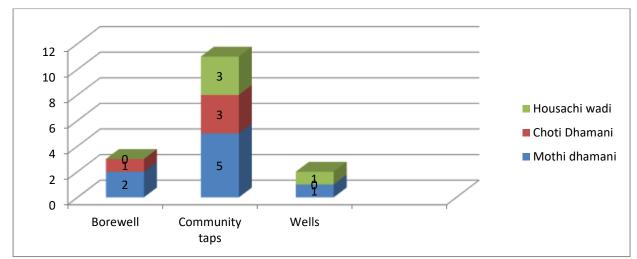


Health profile:

Health is a very important component of human development. For healthy and productive life community the villagers should have access to basic health facilities. Unfortunately at Maldunge village there is a sub centre with no availability of doctor except an ANM. The PHC is located is situated near at Nere about 12 away from the village. It has been observed that there are moderately and severely malnourished under 5 children. Villagers have to go Nere PHC for even basic treatment.

	Mothi dhamani	Choti Dhamani	Housachi wadi
Borewell	02	01	00
Community taps	05	03	03
Wells	01	00	01

#### e: Drinking water facility



Graph showing different sources of water in Dhamani

Analysis: Dhamani has borewell ,community taps, wells.

• Literacy status:

Literacy Status:

Students in primary school: 33 girls;31 boys; total-64

Students in anganwadi: 26 girls; 17 boys; total:43

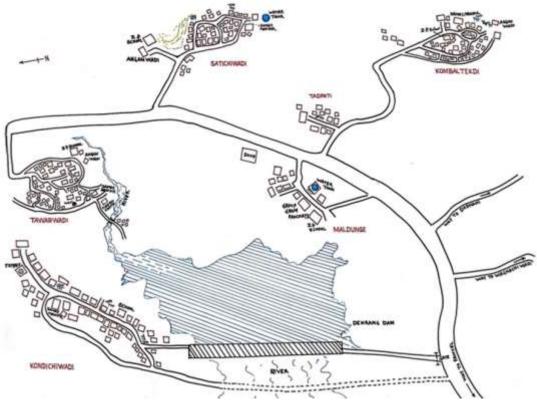
#### Action Plan -1

After analysing the identified problem MGM prepared action plan for Dhamani Village

- Facilitate to solve water problems with d
- Conduct monthly speciality health check up camps, strengthen referral services provided by MGM.
- Awareness campaign for health issues and immunization
- Youth resource development and utilization
- Creating self help groups for women or activating those who are dormant
- Skill development in youth and women not working outside village
- Making arrangement for proper waste disposal
- Providing smokeless chulhas taking help of NGO, CSR, govt authorities
- Constructing proper infrastructure of Anganwadis
- Constructing a mini Anganwadi in Choti dhamani taking help of district government.

Water supply problem			
	Volunteer Labor, resources contribution	Technical Support, grants through govt or donor	Year 1-2
Conduct speciality nealth check up camps and strengthen referral services	Volunteer from village, ASHA workers, Anganwadi sevikas resources contribution	MGM medical college and hospital	Year 1-2
Construction of Village Road	Volunteer Labor, resources contribution	Incorporating in Annual Development Plan of district	Year 1-2
Provision of toys and books to Anganwadis		Approaching govt authorities, NGOs like inner wheel, lions club, being human, funds through company social responsibility	Year 2-3
	ealth check up camps nd strengthen referral ervices onstruction of fillage Road	ealth check up camps nd strengthen referral ervices contribution onstruction of 'illage Road Volunteer Labor, resources contribution	onduct speciality ealth check up camps and strengthen referral ervicesVolunteer from village, ASHA workers, Anganwadi sevikas resources contributionMGM medical college and hospitalonstruction of Tillage RoadVolunteer Labor, resources contributionIncorporating in Annual Development Plan of districtrovision of toys and pooks to AnganwadisApproaching govt authorities, NGOs like inner wheel, lions club, being human, funds through company

#### TAWARWADI



#### 1. Basic Information

Tawarwadi
Maldunge
Panvel
Raigardh
Maharashtra
Maval
100 km
5339.45
1566.55
3175.05
19.42
58.01
0.5
220.04
450

#### 2. Village Infrastructure and Basic Amenities

Village Infrastructure/Basic Amenities	Located in village	Nos.	Distance Km, if
/Services	(Y/N)		located outside
Primary Schools(Govt.)	Y	1	0
Primary Schools(Private)	Ν	-	-
Middle Schools(Govt.)	Ν	1	12 km
Middle Schools(Private)	Ν	-	12 km
Secondary Schools(Govt.)	Ν	-	12 km
Secondary Schools(Private)	Ν	-	15 km
ITI Diploma Institutes(Govt.)	Ν	-	22 km
ITI Diploma Institutes(Private)	Ν	-	22 km
Colleges(Govt.)	Ν	-	22 km
Colleges(Private)	Ν	-	22 km
Banks/ATM	Ν	4	15 km
Primary Health Centres	Ν	1	15 km
Civil Hospital	Ν	-	10 km
SHG's	Ν	-	-
NGOs	Ν	-	-
Post Office	Ν	-	17 km (Vaje)
Gas Agencies	Ν	-	22 km (Panvel)
Training Centres and Specify which	Ν	-	-
Electricity Office	Ν	2	22 km (Panvel)
Anganwadi Kendra	Y	-	-
Petrol Pumps in village	Ν	-	22 km (New Panvel)
Kisan Sewa Kendra	Ν	-	-
Krishi Mandi	Ν	-	22 km (Panvel)
Fare Price Shop	Ν	-	22 km
Milk Cooperative/Collection Centre	Ν	-	-
Railway Station	Ν	-	22 km (Panvel)
Bus Stop	Y	1	
Veterinary Care Centre	Ν	-	15 km (Nere)
Sports Facility/Grounds	Ν	-	25 km
Number of common sanitation complexes	Ν	-	-

#### 3. Village Connectivity(Roads)

Distance of the Village from the nearest	22 km
Highway/Major Dist. Road(in Km)	
Is the villageconnected to the above by a pucca road?	YES
If yes, details of the Approach Road/Connecting Road	
I. Length of the Road(in Km)	i. 22 km
II. Year of construction	ii. 2018
III. Scheme under which constructed	iii. Govt
IV. Present Status(complete/incomplete)	iv. complete
Length of internal roads(inside village/hamlets)	Kachha (1 Km), Pakka (5 Km),
	Total (6 km)
What is the mode of transport available?	Bus, Shared Auto, Jeep
Frequency of the available mode of transport	Frequent

#### 4. Land, Forest & Horticultural Profile

Type of Forest(Reserved/Protected/Open)	Reserved	
Community Forest(Acre)		
Government Forest(Acre)		
Main Forest Trees and Shrub Species		
Energy Plantation(if Yes, which species and area(top 3) -NO	Species	Area(Acre)

#### 5. Common Village Electricity Requirements

Sr	Community Place	Electrical	Working
No.		Appliances	Duration/day(in hours)
1.	Panchayat Office		
2.	Dispensary	No	-
3.	Community Halls	No	-
4.	Street Lighting	No	-
5.	Dharamashala	No	-
6.	Social Organisations (Youth/ Mahila Clubs)	No	-
7.	Training cum Production Centres	No	-
8.	Others	No	-

#### 5. Administrative Profile of the Gram Panchayat

This wadi comes under Maldunge Grampanchayat. There were self help groups like mahila bachat Gat which are now not active. Tawarawadi consists of Maldunge where grampanchayat is located.

All villagers possess their Adhar card and ration card except women from Tadpati who came after marriage they do not have their name changed on adhar card also they are not included in the ration card of the house where they are now married into.

#### 7. Infrastructure & Civic Facilities

- a. Roads & Public Transport –There are pukka roads made right till the top of the hill. Public transport like bus comes at the foot of the hill. Almost all houses have their personal vehicle like motorcycle, bicycle, moped
- b. PDS centres –There is just one PDS centre in Maldunge which provides ration to all these 5 villages
- c. Electricity –Its there 24 hours except on Tuesdays when there is load shedding
- d. Sanitation –Toilets are made outside every house by Indian Red cross association, inner wheel club. No toilets in Kombaltekdi. They wash clothes, utensils under the community tap, no proper washing area, No proper waste disposal area. People in tawarwadi drink water after filtering.
- e. Sports, Recreation & other community facilities –There are community halls in every wadi except in Satichiwadi where the community hall is in dilapidated condition due to storm and animal fights. They have made a new one recently. People celebrate all the festivals in the community hall.
- f. Post offices- Located at waje

g. Telecom facilities –Mobile phones are there in every house especially with young population.

h. schools -there is a public school with 28 students in Tawarwadi school. The school is in good condition, with 2 teachers. The school is Kombaltekdi even has RO water purifier.

i. There is one Anganwadi in every wadi all are active except the one in tawarwadi due to lack of anganwadi worker.

#### Situation analysis:

Using the data from secondary sources the baseline survey and information gathered from PRA, the present status of different development areas may be analysed and presented.

1. Status, Issues and Challenges relates to Infrastructure

a. Roads – There is lack of proper roads in satichiwadi. Rest of wadis have proper pukka roads.

b. Energy –Electricity is available 24 hours .Except on Tuesdays when there is load shedding.

c. Irrigation & Water Harvesting –There are no irrigation facilities available as people in this village grow only rice crops for which they completely rely on 3 months of monsoon.

d. Telecom and IT –Only mobile phones. Also there is television in almost every house.

2. Status, Issues and Challenges relates to Human Development

a. Poverty –All belong to lower socioeconomic strata. Most being Below poverty line.

b. Education –The elders in village are illiterate. Also the women are educated upto 4<sup>th</sup> std minimum.The new generation is taking education. There is no secondary/higher education opportunities for which they have to travel to panvel. There is no Anganwadi worker in tawarwadi hence that Anganwadi is closed.

c. Health – There is monthly visit of Mobile hospitals which provide basic healthcare facility. ANM conducts immunization sessions every month. For medical emergencies they have to travel for half an hour to Nere PHC or Panvel. There are cases of Tuberculosis which are on treatmement.

d. Nutrition –Few children were malnourished

3. Status, Issues and Challenges relates to Social Development

a. Specific Groups -the major population living in these areas are Thakar

vii. Persons with Disabilities

b. General Issues-

i. Violence & Crime

ii. Social evils –Alcoholism is a major social evil. Women are also alcoholic. Smoking is also a problem.

- 4. Status, Issues and Challenges relates to Governance
- a. Participation -people participate actively in decision of development of village
- b. Service Delivery, including responsiveness
- c. Transparency and Accountability, including grievance redress
- d. Corruption
- e. Capacity

5. Status, Issues and Challenges relates to Economic Development

a. Agriculture- Mostly rice.

d. Services-Few of them sell local fish caught in deharang dam

e. Employment –There is a major problem of employment .In seasons other than rainy season when people are not farming they are mostly unemployed otherwise. Few work at farmhouses built around the village. A few work as daily wage workers in panvel, Nere . Youth mostly who are educated work outside in places like Panvel. Those who don't take further education are unemployed.There are no employment opportunities in and around village as there are no factories or companies. Hence people have to travel far to search for employment.

6. Status, Issues and Challenges relates to Ecology & Environment

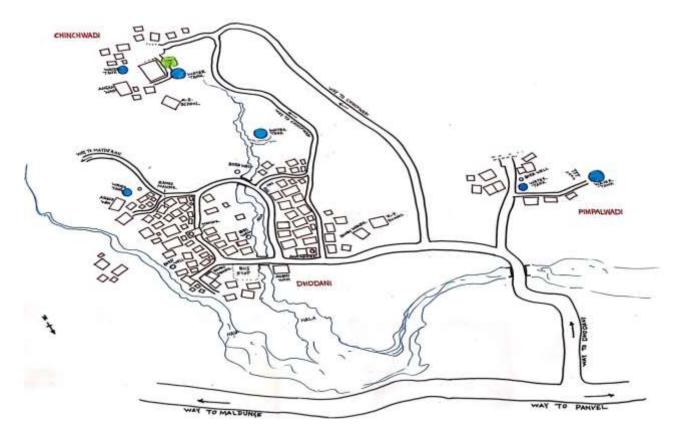
a. Natural Resources i. Degradation ii. Depletion

b. Bio-diversity

7. Status, Issues and Challenges related to Civic and other Amenities

- a. Housing –Most houses are mixed, few of them are pukka houses who are slight well to do, few who are extremely poor have kutcha houses.
- b. Drinking water
- c. Sanitation No toilets in Kombaltekdi. Septic tanks have been made for every toilet however there are no proper outlet systems, also villagers cease to use these during water shortage in months of April-May. Drainage and proper sewage disposal is a problem.
- d. Streetlights -there are solar streetlights which are not working.

Village Dhodani Constitutes Chinchwadi and Pimpalwadi Resource mapping:



6. Basic Information	Village ID:
Name of the Village	Dhodani
Gram Panchayat	Maldunge
Number of Wards	1
Number of Hamlets	4+1
Block	Panvel
District	Raigardh
State	Maharashtra
Lok sabha /Constituency	Maval
Distance from District HQ	100 km
Area of Village(Acres)	1622.02
Arable land agriculture area(Acres)	711.57
Forest Area(Acre)	671.87
Housing/Abadi Area(Acres)	7.02
Area Under Water bodies(Acres)	25.12
Common Lands Area(Acres)	0.30
Average per capita Land Holding(Acres	s) 0.50
Waste Land(Acres)	450

#### 7. Village Infrastructure and Basic Amenities

Village	Infrastructure/	Basic	Located in village	Nos.	Distance Km, if
Amenities/	Service		(Y/N)		located outside
Primary Sc	hools(Govt.)		Y	3	-
Primary Sc	hools(Private)		Ν	-	10 km
Middle Sch	nools(Govt.)		Ν	-	15 km
Middle Sch	nools(Private)		Ν	-	10 km
Secondary	Schools(Govt.)		Ν	-	10 km
Secondary	Schools(Private)		Ν	-	15 km

		1	
ITI Diploma Institutes(Govt.)	N	-	20 km
ITI Diploma Institutes(Private)	Ν	-	20 km
Colleges(Govt.)	Ν	-	20 km
Colleges(Private)	Ν	-	20 km
Banks/ATM	Ν	4	15 km
Primary Health Centres (Nere)	Ν	1	15 km
Civil Hospital	Ν	-	100 km
SHG's	Ν	-	-
NGOs	N	-	15 km
Post Office	N	-	12 km (Vaje)
Gas Agencies	N	-	20 km (Panvel)
Training Centres and Specify which	Ν	-	-
Electricity Office	Ν	-	20 km (Panvel)
Anganwadi Kendra	Y	5	-
Petrol Pumps in village	Ν	-	20 km (Panvel)
Kisan Sewa Kendra	N	-	-
Krishi Mandi	N	-	22 km(New Panvel)
Fare Price Shop	Ν	-	20 km
Milk Cooperative/Collection Centre	N	-	-
Railway Station	N	-	22 km
Bus Stop	Y	2	-
Veterinary Care Centre	N	-	15 km (Nere)
Sports Facility/Grounds	N	-	25 km
Number of common sanitation complexes	N	-	-

#### 8. Village Connectivity(Roads)

(1.0000)	(mage connectivity (Rouds)				
Distance of the Village from the nearest	20 km				
Highway/Major Dist. Road(in Km)					
Is the villageconnected to the above by a	Yes				
pucca road?					
If yes, details of the Approach					
Road/Connecting Road					
V. Length of the Road(in Km)	v. 20 km				
VI. Year of construction	vi. 2018				
VII. Scheme under which constructed	vii. Govt.				
VIII. Present Status(complete/incomplete)	viii. complete				
Length of internal roads(inside	Kachha (2 Km), Pakka (0.5 Km), Total				
village/hamlets)	(2.5 km)				
What is the mode of transport available?	Bus, Shared Jeep				
Frequent of the available mode of transport	Frequent				

#### 9. Land, Forest & Horticultural Profile

Type of Forest(Reserved/Protected/Open)	Reserved		
Community Forest(Acre)			
Government Forest(Acre)	671.87		
Main Forest Trees and Shrub Species	Teak, Sagwav, Tamarind, Peepal		
Energy Plantation(if Yes, which species and area(top 3))	Species Area(Acre)		
No			

#### **10. Common Village Electricity Requirements**

Sr	Community Place	Electrical	Working
No.		Appliances	Duration/day(in
			hours)
1.	Panchayat Office	-	-
2.	Dispensary	-	-
3.	Community Halls	-	-
4.	Street Lighting	-	-
5.	Dharamashala	-	-
6.	Social Organisations(Youth/Mahila Clubs)	-	-
7.	Training cum Production Centres	-	-
8.	Others	-	-

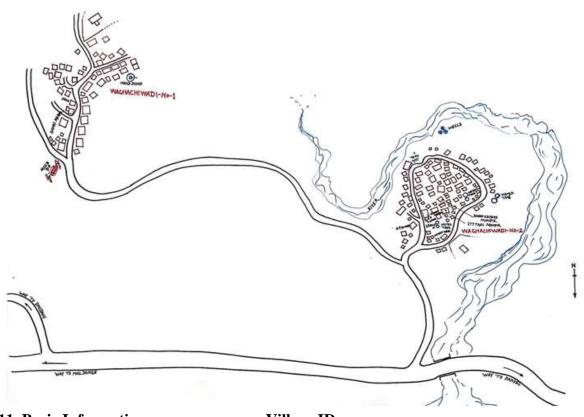
Challenges faced by the people

- Lack of water supply
- Sanitation problems.
- Mosquito menace.
- Unemployment.
- Waste disposal problems.
- Pimpalwadi-robbing of cattle.
- Chinchwadi-No Electricity.
- Lack of identification card for women and children.
- Anganwadi problems-Old constructions with leaking walls, lack of toys and books.
- Lack of health facilities (specially for emergency services they have to travel to Nere PHC which is 8km away)
- Difficulty in crossing the river especially during monsoons for cremation.

#### **Suggested solutions:**

1.

#### Village Waghachiwadi



11. Basic Information	Village ID:
Name of the Village	Waghachiwadi
Gram Panchayat	Maldunge
Number of Wards	
Number of Hamlets	
Block	Panvel
District	Raigardh
State	Maharashtra
Lok sabha /Constituency	Maval
Distance from District HQ	100 km
Area of Village(Acres)	1622.02
Arable land agriculture area(Acres)	711.57
Forest Area(Acre)	671.87
Housing/Abadi Area(Acres)	4
Area Under Water bodies(Acres)	25.17
Common Lands Area(Acres)	0.20
Average per capita Land Holding(Acres	) 0.50
Waste Land(Acres)	107.57

Village Infrastructure/Basic Amenities/Services	Located in village (Y/N)	Nos.	Distance Km, if located outside
Primary Schools(Govt.)	Y	1	
Primary Schools(Private)	N	-	15 km
Middle Schools(Govt.)	N	_	15 km
Middle Schools(Private)	N	-	12 km
Secondary Schools(Govt.)	N	-	12 km
Secondary Schools(Private)	N	-	15 km
ITI Diploma Institutes(Govt.)	Ν	-	20 km
ITI Diploma Institutes(Private)	Ν	-	20 km
Colleges(Govt.)	Ν	-	20 km
Colleges(Private)	Ν	-	20 km
Banks/ATM	N	-	15 km
Primary Health Centres	N	-	15 km
Civil Hospital	N	-	100 km
SHG's	Ν	-	-
NGOs	Ν	-	-
Post Office	Ν	-	10 km
Gas Agencies	Ν	-	20 km
Training Centres and Specify which	Ν	-	-
Electricity Office	Ν	-	20 km
Anganwadi Kendra	Y	1	-
Petrol Pumps in village	Ν	-	20 km
Kisan Sewa Kendra	Ν	-	-
Krishi Mandi	Ν	-	22 km
Fare Price Shop	Ν	-	20 km
Milk Cooperative/Collection Centre	Ν	-	-
Railway Station	Ν	-	22 km
Bus Stop	Y	1	-
Veterinary Care Centre	Ν	-	15 km
Sports Facility/Grounds	Ν	-	25 km
Number of common sanitation complexes	Ν	-	-

#### 12. Village Infrastructure and Basic Amenities

#### 13. Village Connectivity(Roads)

Distance of the Village from the nearest	20 km
Highway/Major Dist. Road(in Km)	
Is the villageconnected to the above by a	Yes
pucca road?	
If yes, details of the Approach	
Road/Connecting Road	
IX. Length of the Road(in Km)	ix. 100 km
X. Year of construction	x. 2018
XI. Scheme under which constructed	xi. Govt.
XII. Present Status(complete/incomplete)	xii. complete
Length of internal roads(inside	Kachha (0.5Km), Pakka (1 Km), Total
village/hamlets)	(1.5 km)
What is the mode of transport available?	Bus, Shared Jeep
Frequent of the available mode of transport	Frequent

#### 14. Land, Forest & Horticultural Profile

Type of Forest(Reserved/Protected/Open)	Reserved	
Community Forest(Acre)	-	
Government Forest(Acre)	671.87	
Main Forest Trees and Shrub Species		
Energy Plantation(if Yes, which species and area(top 3))	Species	Area(Acre)
No		

#### **15. Common Village Electricity Requirements**

Sr	Community Place	Electrical	Working
No.		Appliances	Duration/day(in
			hours)
1.	Panchayat Office		
2.	Dispensary	-	-
3.	Community Halls		
4.	Street Lighting	-	-
5.	Dharamashala	-	-
6.	Social Organisations(Youth/Mahila	-	-
	Clubs)		
7.	Training cum Production Centres		
8.	Others		

Priority areas identified -

- Lack of water supply (need to travel far for collecting water).
- Malnutrition.
- Sanitation problems.
- Unemployment.
- Lack of identification card for women and children.

#### Suggested solutions:



16. Basic Information	Village ID:
Name of the Village	Dehrang
Gram Panchayat	Maldunge
Number of Wards	
Number of Hamlets	
Block	Panvel
District	Raigardh
State	Maharashtra
Lok sabha /Constituency	Maval
Distance from District HQ	100 km
Area of Village(Acres)	1758.42
Arable land agriculture area(Acres)	459.47
Forest Area(Acre)	482.6
Housing/Abadi Area(Acres)	3.55
Area Under Water bodies(Acres)	15.22
Common Lands Area(Acres)	0.25
Average per capita Land Holding(Acres)	1
Waste Land(Acres)	104.52

#### **17. Village Infrastructure and Basic Amenities**

Village Infrastructure/Basic Amenities	Located in	Nos.	Distance Km, if
/Services	village		located outside
	(Y/N)		
Primary Schools(Govt.)	Y	1	N/A
Primary Schools(Private)	Ν	-	10 km
Middle Schools(Govt.)	Ν	-	10km
Middle Schools(Private)	Ν	-	2 km

Secondary Schools(Govt.)	N	-	10 km
Secondary Schools(Private)	Ν	-	10 km
ITI Diploma Institutes(Govt.)	Ν	-	17 km
ITI Diploma Institutes(Private)	Ν	-	17 km
Colleges(Govt.)	N	-	17 km
Colleges(Private)	N	-	17 km
Banks/ATM	Ν	4	9 km
Primary Health Centres	Ν	1	9 km
Civil Hospital	Ν	-	90 km
SHG's	Ν	-	-
NGOs	Ν	-	9 km
Post Office	Ν	-	7 km (Vaje)
Gas Agencies	Ν	-	17 km (Panvel)
Training Centres and Specify which	Ν	-	-
Electricity Office	Ν	-	17 km (Panvel)
Anganwadi Kendra	Y	2	-
Petrol Pumps in village	Ν	-	18 km (Panvel)
Kisan Sewa Kendra	Ν	-	-
Krishi Mandi	Ν	-	21 km (Panvel)
Fare Price Shop	Ν	-	17 km
Milk Cooperative/Collection Centre	Ν	-	-
Railway Station	Ν	-	20 km(Panvel)
Bus Shop	Y	-	-
Veterinary Care Centre	Ν	-	9 km (Nere)
Sports Facility/Grounds	Ν	-	20 km
Number of common sanitation complexes	Y	-	-

#### **18. Village Connectivity(Roads)**

ioi vinage connectivity(itotads)		
Distance of the Village from the nearest	16 km	
Highway/Major Dist. Road(in Km)		
Is the villageconnected to the above by a pucca road?	Yes	
If yes, details of the Approach Road/Connecting Road		
XIII. Length of the Road(in Km)		
XIV. Year of construction	xiii. 16 km	
XV. Scheme under which constructed	xiv. 2018	
XVI. Present Status(complete/incomplete)	xv. Govt.	
	xvi. complete	
Length of internal roads(inside village/hamlets)	Kachha (0.5Km), Pakka (2 Km), Total	
	(2.5 km)	
What is the mode of transport available?	Bus, Shared Jeep	
Frequent of the available mode of transport	Frequent	

#### 19. Land, Forest & Horticultural Profile

Type of Forest(Reserved/Protected/Open)	Reserved	
Community Forest(Acre)	-	
Government Forest(Acre)	482.6	
Main Forest Trees and Shrub Species	Teak, Sawar, Sagwan	, Tamarind, Peepal
Energy Plantation(if Yes, which species and area(top	Species	Area(Acre)
3))		

#### **20.** Common Village Electricity Requirements

Sr	Community Place	Electrical	Working
No.		Appliances	Duration/day(in hours)
1.	Panchayat Office		
2.	Dispensary	No	-
3.	Community Halls	Yes	-
4.	Street Lighting		
5.	Dharamashala	No	-
6.	Social Organisations(Youth/Mahila Clubs)	No	-
7.	Training cum Production Centres	No	-
8.	Others		

Priority areas identified -

- Underdeveloped Anganwadi.
- Lack of basic health facility.
- Unemployment.
- Lack of skill developments.
- No Self help groups.
- Bapdevwadi No primary schools.
- Lack of water supply (need to travel far for collecting water).
- Lack of identification card for women and children.
- Indoor air pollution due to use of chulhas.

#### Suggested solutions:

#### Comprehensive Action plan/Strategies:

Sr No	Activities	Community Action	External Action	Time period
1	Water problem	<ul> <li>Community tree plantation with the help of village volunteers</li> <li>Training the villagers about different water harvesting techniques</li> </ul>	<ul> <li>Implementing Jalyukta Shivar Abhiyan. Under which following things to be done:</li> <li>Broadening and deepening river base</li> <li>Removing silt from lakes, ponds, farm ponds and canals which prevents water percolation</li> <li>Building check dams, canals, small ponds and wells(individual and community both)</li> <li>Mass tree plantation Involvement of NGOs and CSR.</li> </ul>	5 years
2	Sanitation/Waste disposal	<ul> <li>Community mobilization and awareness through Cleanliness drive with the help of village .volunteers, Gram Panchayat.</li> <li>Underground drainage system.</li> </ul>	Involvement of Health Inspector from MGM college. Involvement of NGOs and CSR.	3 years

3	Livelihood generation	<ul> <li>Activating and strengthening self help groups.</li> <li>Motivating them for individual skill development.</li> <li>Utilization of internal resources.</li> </ul>	<ul> <li>Linkages with Maharashtra State rural livelihood Mission.</li> <li>Linkages with other govt authorities such as agriculture department,Panchayat samiti, Zilla parishad.</li> <li>Co ordinating with IITs and CSR, NGOs.</li> </ul>	5 years
4	Education	<ul> <li>Maintaining and Strengthening schools ,anganwadi.</li> <li>Creating awareness regarding importance of higher education, technical education especially in girls.</li> </ul>	<ul> <li>Linkages with education department (ZP), co-ordinate with ICDS for creating more Anganwadis /Mini anganwadis where they are lacking and activating non functioning anganwadis.</li> <li>Linking villagers with pradhan mantri gramin saksharta abhiyaan.</li> <li>Co ordinating with CSR activities.</li> </ul>	5 years
5	Health	<ul> <li>Awareness generation regarding seeking treatment for diseases esp non communicable diseases.</li> <li>Motivating for frequent health checkups esp vulnerable groups like Children,women, senior citizens.</li> </ul>	<ul> <li>Conducting multidiagnostic camps, speciality camps, providing both medical and para medical services.</li> <li>Strengthening referral services.</li> <li>Co-ordinating provision of health services along with PHC for better health of the village.</li> <li>Co ordinating with CSR.</li> </ul>	5 years

• Corporate social responsibility:

Every company has a sense of responsibility towards community and environment in which it lives. They work in various areas, tribal, rural and urban community. They work in sectors like health, education, water, women and child development, livelihood. They can contribute in the following way:-

- 1. Water: Co-ordinating and linkages with Companies working in water sector-eg; Swadesh Foundation, Pani foundation.
- 2. Sanitation: Co-ordinating with foundations like Ramky Foundation
- 3. Livelihood generation:
- 4. Education: co-ordinating for infrastructure and development of Schools and anganwadis.
- 5. Health:Co-ordination and linkages with Pharma and other companies for medicines and health equipments.

Dr. Rajesh B. Goel Registrar MGM Institute to Health Sciences (Dermed University and 3 of 1967 Actor - 1) Navi Mambal-416 209



MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956)

Grade 'A' Accredited by NAAC

#### **MGM NEW BOMBAY COLLEGE OF NURSING**

5th Floor, MGM Educational Campus, Plot No. 1& 2, Sector-1 Kamothe, Navi Mumbai - 410 209.

#### **Report of Activity**

#### Date : 6/09/2018 to 21/09/ 18 Duration: 15 days : Unnat Bharat Abhiyan Survey Name of the activity Organizing Institute : MGM New Bombay College of Nursing, Kamothe. Collaborating Agency : Ministry of Human Resource and Development Name Of The Scheme : Unnat Bharat Abhiyan No Of Teachers Participated :01 No Of Students Participated :10

#### **Brief of the Activity**

: Under the UBA program MGMIHS; Navi Mumbai has adopted a cluster of 5 villages under Maldunge Panchayat-

- 1) Dhamani
- 2) Dhodani
- 3) Dehrang
- 4) Tawarwadi
- 5) Waghachi wadi

Conducted primary survey (Village level survey, Household Survey, Participatory Rural Appraisal) and collected secondary information required for preparation of the plan followed by analysis of data. Common problem identified were

- Underdeveloped Anganwadi.
- Lack of basic health facility. •
- Unemployment.
- Lack of skill developments. .
- No Self help groups.
- Bapdevwadi No primary schools.
- Lack of water supply (need to travel far for collecting water).
- Lack of identification card for women and children.
- Indoor air pollution due to use of chulhas.

#### Annexures:

- 1. List of students participated : Yes
- 2. List of Teachers Participated : Yes
- 3. Photos : Yes

Signature of Organizer Date:

Signature of Director



#### MGM INSTITUTE OF HEALTH SCIENCES (Deemed University u/s 3 of UGC Act, 1956) Grade 'A' Accredited by NAAC

#### MGM NEW BOMBAY COLLEGE OF NURSING

5<sup>th</sup> Floor, MGM Educational Campus, Plot No. 1& 2, Sector-1 Kamothe, Navi Mumbai – 410 209.

#### List of Volunteer's for Unnat Bharat Abhiyaan Survey 2018

Sr. No.	Name of the Volunteer's
1.	Ms. Vandana Kumbhar – Team Leader
2.	Ms. Minakshi Musale - Student
3.	Ms. Swapnali More – Student
4.	Ms. Mansi Shinde- Student
5.	Ms. Siddhi Patil - Student
6.	Ms. Pooja Jamdade - Student
7.	Ms. Ankita Hagavane - Student
8.	Ms. Shreya Patil – Student
9.	Ms. Shraddha Rane – Student
10.	Ms. Komal Khatre – Student
11.	Mr. Omkar Mane - Student

### Unnat Bharat Abhiyan Survey photos



0

# Village Development Plan

JANUARY 2019

Unnat Bharat Abhiyan Villages of Maldunge Group Gram Panchayat in Raigad District of Maharashtra – Adopted by MGM Institute of Health Sciences, Navi Mumbai



Tel 022-27432471 Fax 022-27431094

Address: Sector 01, Kamothe, Navi Mumbai, Maharashtra 410209 WEB: www.mgmuhs.com E-Mail registrar@mgmuhs.com

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## **INTRODUCTION**

#### The Unnat Bharat Abhiyan

Conceptualized by a group of dedicated faculty members of Centre for Rural Development and Technology, IIT Delhi, Unnat Bharat Abhiyan (UBA) is a flagship program of Ministry of Human Resource Development (MHRD) Govt. of India. UBA aims to bring a transformational change in rural development by active participation of higher academic institutions with local communities, and reorientation of curricula and R&D design of knowledge Institutions. IIT Delhi has been designated to function to lead and coordinating organization for UBA activities in the country.

The Mission of Unnat Bharat Abhiyan is to enable participating higher educational institutions to work with the people of rural India in identifying development challenges and evolving appropriate solutions for accelerating sustainable growth. It also aims to create a virtuous cycle between society and an inclusive academic system by providing knowledge and practices for emerging professions and to upgrade the capabilities of both the public and the private sectors in responding to the development needs of rural India.

#### **MGMIHS** Participation

Mahatma Gandhi Mission Institute of Health Sciences, Navi Mumbai has adopted a cluster of 5 villages including its satellite habitats encompassing entire Maldunge Gram Panchayat of Panvel Tehsil of Raigad District of Maharashtra. The villages are viz. 1. Dhamani, 2. Dhodani, 3. Dehrang, 4. Tawar wadi and 5. Waghachi wadi, each one having multiple satellite clusters.

This village development plan (VDP) is outlining the desired developments according to the inhabitants – for the quality of life within the village and in the immediate surroundings. The VDP identifies issues affecting the community – social, environment and economic. It's a statement about how a community sees itself developing over the next few years and what actions are needed to realize that vision.

#### **OBJECTIVES**

Based on the preliminary interactions with the villagers and the district/ block administration, the objectives of the work to be carried out by the MGM team in this village was defined as follows:

- 1. To improve accessibility to healthcare facilities and improve the overall health status of the local population.
- 2. To improve socio-economic conditions, create livelihood opportunities and increase food security & well-being of the poorest of the poor.
- 3. To ensure effective participation of the villagers for the holistic development of the villages by preparing an Integrated Development Plan for the sustainable development of the village using eco-friendly sustainable technologies and local resources, creating sufficient employment opportunities in the process, harnessing multifarious Government Schemes.
- 4. To empower the women through active participation in decision making process, increase income and access to resources.
- 5. To liaison with district administration, various NGOs, CSR and panchayat raj institutions to help them to prioritize the fund allocation to various developmental activities relevant to objectives and provide necessary inputs on technologies to be implemented in the field.

#### **METHODOLOGY**

In order to meet the objectives an overall integrated approach is required along with the quality input from various experts from different fields of knowledge. The steps involved in the same can be enumerated as follows:

(a) Identification of the areas in which MGM can provide technical inputs along with the key experts who will be part of the team.

(b) To conduct primary survey (Village level survey, Household Survey, Participatory Rural Appraisal) and collection of secondary information required for preparation of the plan followed by analysis of data.

(c) The present scenario as derived by analysis of the primary and secondary data to be presented to the Gram Panchayat and the Gram Sabha.

(d) Participatory mechanism will be adapted for finding out the issues and potential of the village by considering the feedback from the villagers by conducting series of meeting with the villagers and solving the problem related to health issues.

(e) After implementation of the plans in each component, the MGM team will also provide support in monitoring and evaluation of the same by guiding the technical personnel who can be hired by the Panchayat. MGM team will also help these technical nodal personnel in preparing the monitoring and evaluation report.

(f) Subsequently, a consolidated report will be prepared of all the experiences of the MGM team related to the development work in the villages followed by preparation of guidelines for participation of any technical institute in the development of a village.

At a Glance - Gram	Panchayat: Maldunge

VILLAGE	HOUSEHOLDS	POPULATION
1. DHAMANI	144	549
Mothi Dhamani	74	
Lahan Dhamani	42	
• Haushachiwadi	28	
2. DHODHANI	288	1227
• Dhodhani	230	
• Pimpalwadi	18	
Chinchwadi	40	
3. DEHRANG	90	335
• Dehrang	65	
• Bapdevwadi	25	
4. TAWARWADI	290	618
• Tawarwadi	120	
• Satichiwadi	36	
• Kombaltekdi	47	
• Kondichiwadi	48	
• Maldunge	15	
• Tadpati	24	
5.WAGHACHIWADI	111	520
TOTAL	923	4571

# .....At a Glance – Gram Panchayat: Maldunge

<u>SN</u>	TYPES OF AREA	<u>1. DHAMNI</u>	2. DODHANI & 5. WAGHACHI WADI	<u>3. DEHRANG</u>	<u>4. TAWAR</u> <u>WADI &amp;</u> <u>MALDUNGE</u>
1	Village area	615.13	1622.02	1758.42	5337.45
2	Land available for agriculture	514.1	711.57	459.47	1566.55
3	Forest area	55.72	671.87	482.6	3175.05
4	House area	1.37	7.02	3.55	17.52
5	Area under water bodies	10.37	25.12	15.22	58.01
6	Common land area	0.25	0.5	0.25	50
7	Average per capita land (Approx.)	0.70 acre	0.5 acre	1 acre	1.10 acre
8	Waste land	88.12	107.57	104.52	220.04
9	Water level	450	450	450	450
10	Forest	55.72	671.87	482.6	3185.05
Туре	es of trees in the forest: Tea		d		

# Dhamani

Dhamani is one of the revenue villages of Maldunge. It is situated 15 kms away from sub-district headquarter Panvel and 70 kms away from district headquarter Alibag. Thane a major railway station close to Dhamani is about 29 kms. Dhamani consists of Choti Dhamani, Mothi Dhamani & Houshachi wadi hamlets.

#### Social Mobilization through Hamlet meeting and Village meeting

At first, a hamlet and village meeting were held for discussion of UBA objective and plan. All village, irrespective of gender and caste participated and provided their valuable inputs. After this reconnaissance survey, village level and house hold survey were conducted for collection of basic information and problems of the village. While conducting household survey patch visit were done at different locations of the village. In this village nature has given a lot, specially forest and river resources, but most of the families of this village are landless. Some villagers own land up to 10 *gunta* (1/4<sup>th</sup> acre). They earn their meager livelihood as unskilled labor work. The farmers grow rice crops.

The ground water level ranges in between 400 feet. The villagers drink water un-purified or un-boiled. Almost 70% household have toilets constructed under Swachh Bharat Mission but these are not in use due to improper sewage drainage and also due to water shortage. In this village many families have received LPG Gas under Pradhan Mantri Ujjwala Yojana. But most of the families use wood for domestic fuel until now. Women of this village do not have much livelihood opportunities, so they are involved in domestic work. Some of them help their male partner in farming. Choti Dhamani had no electric meters as they have not paid the electricity bills.

About Anganwadis: There is problem of leakage during rainy season. There are 43 students from 0-6 years. There are no toys and books for children. The

meal is prepared at the Anganwadi Sevikas home and she brings boiled and cooled water from her own house for the children to drink.

About Primary School: School has a student count of 64. Of which 33 are girls and 31 are boys. The student count has reduced over the year as many students are either going to private school run by a trust which is just behind the public school or a few are going to Adivasi ashram school and few to Schools in Panvel, Kamothe. There is one teacher in the school. The infrastructure of the school is good. There is a separate water supply tank for School. There are 4 computers provided but are not in use due to hardware issues.

#### Household Survey:

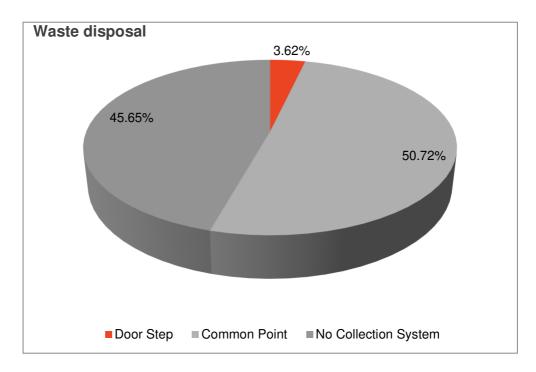
In household survey form basic information about a family like how many no. of persons are in family, their age, education, health, livelihood, agriculture related information and many other issues which is related to their day to day life like, problems faced by the villagers in their village and No of Govt. scheme reach in the village and finally prioritize these problems were collected. This becomes the basic evidence as well as the information to prepare village development plan according to their needs and requirement.

#### Problem Identification/ Need Analysis:

Based on the Household survey and hamlet meeting and PRA the following problems were identified as priority issue faced by the villagers:

- A. Proper pukka roads
- B. Increasing number of borewell points
- C. No separate place for washing clothes and utensils
- D. Open drainage
- E. Mosquito menace
- F. No availability of doctors at Dhamani sub-centre
- G. Water for irrigation
- H. Unemployment

- I. Transport for medical emergencies
- J. Anganwadi:
  - Shortage of Aanganwadi workers
  - Shortage of toys
  - Shortage of books
- K. Required public toilet with proper drainage system
- L. Problems of school:
  - Computer hardware issues
  - No proper toilets
- M. No proper Sewerage
- N. No self-help groups
- O. No proper street lamps
- P. No skill labor
- Q. Women empowerment
- R. Alcoholism



No system for waste collection and disposal

Issues in Houshachi Wadi:

- Chlorination of water not done
- Unequal Water points distribution

Issues in Choti Dhamani:

- No place for washing
- Open drainage
- Open defecation
- No Anganwadi
- Indoor air pollution

#### Participatory Rural Appraisal (PRA)



## A typical PRA process

PRA exercise at Dhamani



Map drawn by the villagers with chalk, stick and ash

We conducted various PRA exercises and on the basis of that we formulated a Village Development Plan.

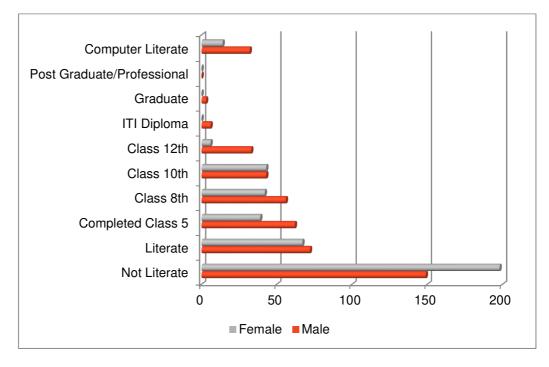
## Resource Mapping

At the end of the household survey, we organized a meeting with the villagers to discuss major issues related to Dhamani village. We conducted the PRA exercise in open space near Anganwadi. The present , Anganwadi sevika, young youth and number of villagers participated in this mapping exercise. A young lad drew a rough sketch of village map on ground with the help of stick and ash. Each and every detail has been drawn on chart paper first with the pencil and then with the different color sketches for easy visual identification of all above mentioned information. We marked the important landmarks such as 1 Anganwadi, 2 Samaj Mandir, 1 Sub-centre, 2 schools (1 Public, 1 Private). There is a Public distribution system for 12 villages which is open for a week once a month. There the villagers get a basic ration of rice, sugar, cooking oil, kerosene, tur dal. There is a Gobar gas plant which is not working.

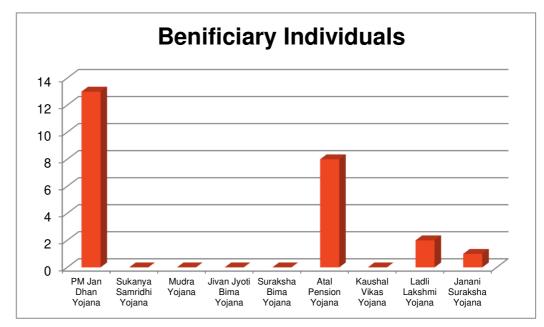
#### Demographic profile of village

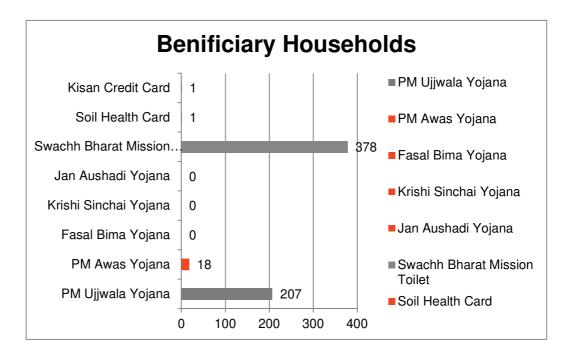
- According to Census 2011, Dhamani's population is 778.
- Out of this, 399 are males whereas the females count 379.
- This village has 125 kids in the age bracket of 0-6 years.
- Out of this 59 are boys and 66 are girls.
- Literacy rate in Dhamani village is 42%.
- 327 out of total 778 population is literate here. In males the literacy rate is 50% as 200 males out of total 399 are literate whereas female literacy rate is 33% as 127 out of total 379 females are educated in this Village.
- The Negative side is that illiteracy rate of Dhamani village is shockingly high -- 57%. Here 451 out of total 778 individuals are illiterate. Male illiteracy rate here is 49% as 199 males out of total 399 are uneducated. Among the females the illiteracy rate is 66% and 252 out of total 379 females are illiterate in this village.

Census Parameter	Census Data
Total Population	764
Total No of Houses	278
Female Population %	48.3 % ( 605)
Total Literacy rate %	75.3 % ( 944)
Female Literacy rate	34.2 % ( 428)
Scheduled Tribes Population %	17.2 % ( 216)
Scheduled Caste Population %	7.0 % ( 88)
Working Population %	39.7 %
Child (0 - 6) Population by 2011	152
Girl Child(0 - 6) Population % by 2011	55.9 % ( 85)
EDUCATIONAL STATUS	DHAMANI



#### Government scheme coverage:





## Health profile:

Health is a very important component of human development. For healthy and productive life community the villagers should have access to basic health facilities. At Maldunge Village there is a sub centre with availability of ANM.

The PHC is located at Nere about 12 kms away from the village. It has been observed that there are moderately and severely malnourished under-5 children. Sometimes villagers have to visit Nere PHC for even basic treatments.

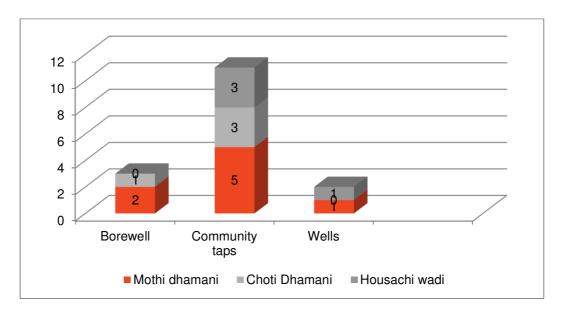
#### Literacy status:

Students in primary school: 33 girls; 31 boys; total- 64

Students in Anganwadi: 26 girls; 17 boys; total: 43

## **Drinking water facility**

Source	<u>Moti</u> Dhamani	<u>Choti</u> Dhamani	<u>Housachi</u> <u>Wadi</u>
Borewell	02	01	00
Community taps	05	03	03
Wells	01	00	01



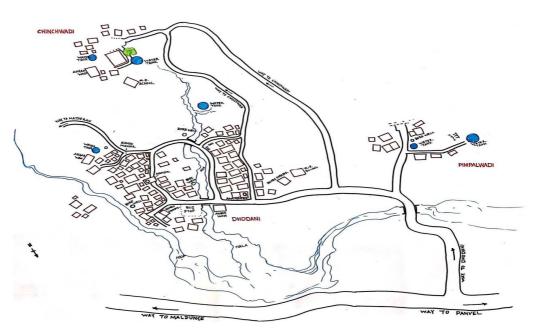
# Graph showing different sources of water in Dhamani

Dhamani has borewell ,community taps and wells.

# Dhodani

Constitutes Chinchwadi and Pimpalwadi

#### **Resource mapping:**



# Village Infrastructure and Basic Amenities

<u>Village</u> <u>Infrastructure/Basic</u> <u>Amenities/Services</u>	<u>Located in</u> <u>village</u> <u>(Y/N)</u>	<u>Nos.</u>	<u>Distance Km, if</u> <u>located outside</u>
Primary Schools(Govt.)	Y	3	-
Secondary Schools(Govt.)	Ν	-	10 km
Secondary Schools(Private)	N	-	15 km
Colleges(Govt.)	Ν	-	20 km
Banks/ATM	Ν	4	15 km
Post Office	Ν	-	12 km ( Vaje )

# Dhodani

Gas Agencies	N	-	20 km (Panvel)
Anganwadi Kendra	Y	5	-
Krishi Mandi	N	-	22 km (New Panvel)
Bus Stop	Y	2	-
Veterinary Care Centre	N	-	15 km (Nere)

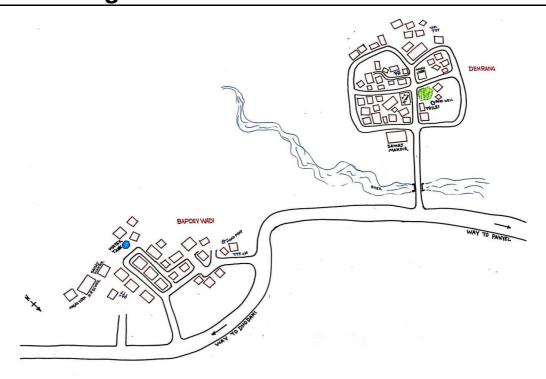
## Village Connectivity(Roads)

Connecting Road of the Village from the nearest Highway/ Major District Road	20 km	
Length of internal roads (inside village / hamlets)	Kachha (2 Km), Pakka (0.5 Km), Total (2.5 km)	
What is the mode of transport available?	Bus, Shared Jeep	
Frequency of available mode of transport	Frequent	

#### Challenges faced by the people

- Lack of water supply
- Sanitation problems.
- Mosquito menace.
- Unemployment.
- Waste disposal problems.
- Pimpal Wadi-robbing of cattle.
- Chinch Wadi-No Electricity.
- Lack of identification card for women and children.
- Anganwadi problems-Old constructions with leaking walls, lack of toys and books.
- Lack of emergency health facilities
- Difficulty in crossing the river especially during monsoons for cremation.

# Deharang



# Village Infrastructure and Basic Amenities

Village Infrastructure/Basic Amenities/Services	Located in village (Y/N)	Nos.	Distance Km, if located outside
Primary Schools(Govt.)	Y	1	N/A
Secondary Schools(Govt.)	N	-	10 km
Colleges(Govt.)	N	-	17 km
Banks/ATM	N	4	9 km
Post Office	N	-	7 km (Vaje)
Gas Agencies	N	-	17 km (Panvel)

Anganwadi Kendra	

Anganwadi Kendra	Y	2	-
Railway Station	Ν	-	20 km (Panvel)
Bus Shop	Y	-	-
Veterinary Care Centre	Ν	-	9 km (Nere)
Common sanitation complex	Y	-	-

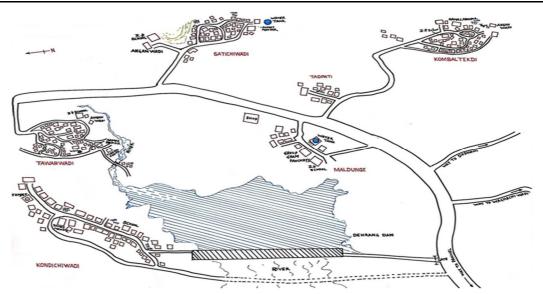
## Village Connectivity(Roads)

Connecting Road of the Village from the nearest Highway/ Major Dist. Road	16 km
Length of internal roads (inside village / hamlets)	Kachha (0.5 Km) Pakka (2 Km) Total (2.5 km)
What is the mode of transport available?	Bus, Shared Jeep
Frequent of the available mode of transport	Frequent

#### Priority areas identified -

- Underdeveloped Anganwadi.
- Lack of basic health facility.
- Unemployment.
- Lack of skill developments.
- No self-help groups.
- Bapdevwadi No primary schools.
- Lack of water supply (need to travel far for collecting water).
- Lack of identification card for women and children.
- Indoor air pollution due to use of chullha.

# Tawar Wadi



# Village Infrastructure and Basic Amenities

Village Infrastructure/Basic Amenities/Services	Located in village (Y/N)	Nos.	Distance Km, if located outside
Primary Schools (Govt.)	Y	1	0
Secondary Schools (Govt.)	N	-	12 km
Colleges(Govt.)	N	-	22 km
Banks/ATM	N		15 km
Post Office	N	-	17 km (Vaje)
Gas Agencies	N	-	22 km (Panvel)
Anganwadi Kendra	Y	-	-
Bus Stop	Y	1	
Number of common sanitation complexes	Ν	-	-

<u>village Connectivity (Roads)</u>			
Connecting Distance of the Village from the nearest Highway /Major Dist. Road(in Km)	22 km		
Length of internal roads (inside village /hamlets)	Kachha (1 Km), Pakka (5 Km), Total (6 km)		
What is the mode of transport available?	Bus, Shared Auto, Jeep		
Frequency of the available mode of transport	Frequent		

## Villago Connoctivity (Poode)

# Gram Panchayat

Tawarawadi consists of Maldunge where Gram Panchayat is located.

There were self- help groups like mahila bachat gat which are now not active. All villagers possess their Adhar card and ration card except women from Tadpati who came after marriage they do not have their name changed on adhar card also they are not included in the ration card of the house where they are now married into.

## **Infrastructure & Civic Facilities**

a. Roads & Public Transport – There are pukka roads made right till the top of the hill. Public transport like bus comes at the foot of the hill. Almost all houses have their personal vehicle like motorcycle, bicycle, and moped.

b. PDS centers - There is just one PDS centre in Maldunge which provides ration to all these 5 villages

c. Electricity – Supply is for 24 hours except Tuesdays due to load shedding

d. Sanitation -Toilets are made outside every house by Indian Red cross association, inner wheel club. No toilets in Kombal tekadi. They wash clothes, utensils under the community tap, no proper washing area, No proper waste disposal area. People in Tawarwadi drink water after filtering.

e. Sports, Recreation & other community facilities –There are community halls in every Wadis except in Satichiwadi where the community hall is in dilapidated condition due to storm and animal fights. They have made a new one recently. People celebrate all the festivals in the community hall.

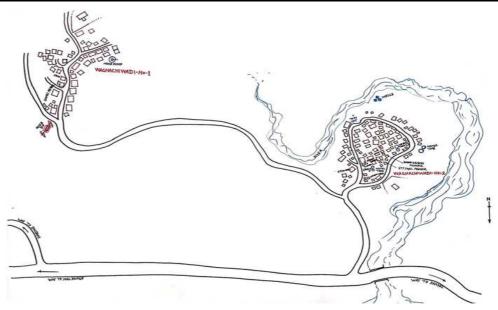
f. Post offices - Located at Waje

g. Telecom facilities –Mobile phones are there in every house especially with young population.

h. Schools -there is a public school with 28 students in Tawarwadi school. The school is in good condition, with 2 teachers. The school is Kombaltekdi even has RO water purifier.

i. There is one Anganwadi in every Wadi all are active except the one in Tawarwadi due to lack of Anganwadi worker.

# Waghachi Wadi



# Village Infrastructure and Basic Amenities

Village Infrastructure/Basic Amenities/Services	Located in village (Y/N)	Nos.	Distance Km, if located outside
Primary Schools (Govt.)	Y	1	-
Secondary Schools (Govt.)	Ν	-	12 km
Colleges(Govt.)	Ν	-	20 km
Banks/ATM	Ν	-	15 km
Anganwadi Kendra	Y	1	-
Bus Stop	Y	1	-
Veterinary Care Centre	Ν	-	15 km

# Village Connectivity (Roads)

Distance of the Village from the nearest Highway/Major Dist. Road (in Km)	20 km
Length of internal roads(inside village/hamlets)	Kachha (0.5Km), Pakka (1 Km), Total (1.5 km)
What is the mode of transport available?	Bus, Shared Jeep
Frequent of the available mode of transport	Frequent

Priority areas identified –

- Lack of water supply (need to travel far for collecting water)
- Malnutrition.
- Sanitation problems.
- Unemployment.
- Lack of identification card for women and children.

# **Situational Analysis**

Using the data from secondary sources, the baseline survey and information gathered from PRA, the present status of different development areas may be analyzed and presented.

#### 1. Status, Issues and Challenges relates to Infrastructure

a. Roads –There is lack of proper roads in Hausachi wadi, Pimpal wadi, Satichi Wadi, Kombal tekdi, Kondichi wadi.

b. Energy – Electricity is available 24 hours. Except on Tuesdays when there is load shedding.

c. Irrigation & Water Harvesting –There are no irrigation facilities available as people in this village grow only rice crops for which they completely rely on 3 months of monsoon.

d. Telecom and IT – Only mobile phones. But no good mobile network coverage. Also there is television in almost every house.

#### 2. Status, Issues and Challenges relates to Human Development

a. Poverty – All belong to lower socioeconomic strata. Most being Below Poverty line.

b. Education –The elders in village are illiterate. Also, the women are educated up to 4<sup>th</sup> std minimum. The new generation is taking education. There is no secondary/higher education opportunities for which they have to travel to Panvel. There is no Anganwadi worker in Tawarwadi hence that Anganwadi is closed.

c. Health – There is monthly visit of Mobile hospitals which provide basic healthcare facility. ANM conducts immunization sessions every month. For medical emergencies they have to travel for half an hour to Nere PHC or Panvel. There are cases of Tuberculosis which are on treatment.

d. Nutrition - Few children were malnourished

#### 3. Status, Issues and Challenges relates to Social Development

a. Specific Groups - the major population living in these areas are Thakar

b. General Issues-

i. Violence & Crime

ii. Social evils – Alcoholism is a major social evil. 2 % Women are also alcoholic. > 20% tobacco Consumption

#### 4. Status, Issues and Challenges relates to Governance

- a. Participation People participate actively in decision of development
- b. Service Delivery Responsiveness
- c. Transparency and Accountability, including grievance redress
- d. Difficulties in receiving benefits of schemes
- e. Capacity

#### 5. Status, Issues and Challenges relates to Economic Development

- a. Agriculture Mostly rice.
- b. Services Few of them sell local fish caught in Deharang dam

c. Employment –There is a major problem of employment. In seasons other than rainy season when people are not farming they are mostly unemployed otherwise.

Few work at farmhouses built around the village. A few work as daily wage workers in panvel, Nere . Youth mostly who are educated work outside in places like Panvel. Those who don't take further education are unemployed.

There are no employment opportunities in and around village as there are no factories or companies. Hence people have to travel far to search for employment.

#### 6. Status, Issues and Challenges relates to Ecology & Environment

- a. Natural Resources- i. Degradation ii. Depletion
- b. Bio-diversity

#### 7. Status, Issues and Challenges related to Civic and other Amenities

a. Housing –Most houses are mixed, few of them are pukka houses who are slight well to do, few who are extremely poor have kutcha houses.b. Drinking water

c. Sanitation No toilets in Kombaltekdi. Septic tanks have been made for every toilet however there are no proper outlet systems, also villagers cease to use these during water shortage in months of April-May. Drainage and proper sewage disposal is a problem.

d. Streetlights -there are solar streetlights which are not working.

Issue	Community Action	External Action	Time period
1. Water Supply Shortage	Improvement in access to water sources Strengthening existing water supply system Training the villagers about different water harvesting techniques Community tree plantation with the help of village volunteers.	Implementing Jal Yukta Shivar Abhiyan. Under which following things to be done: Broadening and deepening river base. Removing silt from lakes, ponds, farm ponds and canals which prevents water percolation. Building check dams, canals, small ponds and wells (individual and community) Mass tree plantation	5 YR
2. Sanitation /Waste Disposal	Community mobilization and awareness through Cleanliness drive with the help of village volunteers, Gram Panchayat. Awareness regarding schemes for building household and public toilets by using shallow water seal trap low water consumption toilet and its utilization.	Involvement of NGOs and CSR. Involvement of Health Inspector from MGM college. Involvement of NGOs and CSR. Involvement of NGOs and CSR.	
3. Livelihood Generation	Activating and strengthening self - help groups for implementing individual skill development.	Linkages with State Rural livelihood Mission and other govt authorities such as agriculture, Panchayat Samiti, Zilla Parishad. Co ordinating with IIT and Industry CSR, NGOs.	5 YR

# Comprehensive Action plan / Strategies

## Pg. 28

# **Comprehensive Action plan / Strategies**

	Maintaining and	Linkages with local education	
4. Education	Strengthening Schools, Anganwadi.	authorities.	
	Creating awareness regarding importance of higher education, technical education especially in girls.	Co-ordination with ICDS for creating more Anganwadis /Mini Anganwadis and activating non- functioning Anganwadis as per requirement.	5 YR
	Awareness generation regarding education schemes and Ashram schools for SC/ST/BPL.	Linking villagers with Pradhan Mantri Gramin Saksharta Abhiyaan.	
		Co ordinating with CSR activities.	
5. Health	Awareness generation regarding treatment seeking especially for Non-Communicable Diseases.	Conducting multi-diagnostic camps, Specialty camps, providing both medical and para medical services.	
	Motivating for frequent	Strengthening referral services.	5 YR
	health checkups esp. vulnerable groups like Children, Women, Senior citizens.	Co-ordinating provision of health services along with PHC for better health of the village.	0 110
	Health Care Delivery through Field Camps	Co ordinating with CSR.	

• Corporate social responsibility:

Every company has a sense of responsibility towards community and environment in which it lives. They work in various areas, tribal, rural and urban community. They work in sectors like health, education, water, women and child development, livelihood etc.

Their cooperation will be sought for the contribution in the following way:-

- 1. Water: Co-ordinating and linkages with Companies working in water sector eg. Swadesh Foundation, Pani foundation.
- 2. Sanitation: Co-ordinating with Ramky Foundation
- 3. Livelihood generation: Neighboring Industries
- 4. Education: co-ordinating for infrastructure and development of Schools and anganwadis.
- 5. Health: Co-ordination and linkages with Pharma and other companies

Way forward.....

At the end of 1 Year

- 1. To improve water supply / access by 20%
- 2. To ensure 60 % streets of village to be Garbage free
- 3. To achieve 50% of wet waste disposal by composting
- 4. To decrease tobacco consumption by 20%
- 5. To reduce mosquito borne diseases by 50%
- 6. To reduce Open Defecation Practice in all 5 villages
- 7. To increase practice of Safe Drinking Water in all 5 villages
- 8. To conduct 2 sessions of Skill Development for young population
- 9. To reduce indoor air pollution by 20 %
- 10. To improve use of ORS in Diarrhea by 100%
- 11. To achieve plantation of 100 trees in each village
- 12. To improve the immunization coverage by 80%
- 13. To promote 100% Breast Feeding to the newborn
- 14. To detect and treat 100% cases of Leprosy
- 15. To detect and treat 100% cases of Tuberculosis

# MGMIHS

# **OPTIONAL HOLIDAYS**



MGM INSTITUTE OF HEALTH SCIENCES

(Deemed to be University u/s 3of UGC Act, 1956)

# HOLIDAY LIST FOR THE YEAR 2020

		Date	Day
Sr.No.	Holiday	19 <sup>th</sup> February, 2020	Wednesday
1.	Chhatrapati Shivaji Maharaj Jayanti	10 <sup>th</sup> March, 2020	Tuesday
2.	Holi	25 <sup>th</sup> March, 2020	Wednesday
3.	Gudi Padwa	14 <sup>th</sup> April, 2020	Tuesday
4.	Dr. Babasaheb Ambedkar Jayanti	1 <sup>st</sup> May, 2020	Friday
5.	Maharashtra Day	15 <sup>th</sup> August, 2020	Saturday
6.	Independence Day	22 <sup>nd</sup> August, 2020	Saturday
7.	Ganesh Chaturthi	2 <sup>nd</sup> October, 2020	Friday
8.	Mahatma Gandhi Jayanti	14 <sup>th</sup> November, 2020	Saturday
9.	Diwali (Laxmi Pujan)	25 <sup>th</sup> December, 2020	Friday
10.	Christmas	25" December, 2020	1 + ready

The following Holidays fall on Sunday:

		Date	Day	
Sr.No.	Holiday		Sunday	
1	Republic Day	26 <sup>th</sup> January, 2020	GIROLOGICA CONTRACTOR	
1.	Ramzan Id (Id-UI-Fitr)	24 <sup>th</sup> May, 2020	Sunday	
2	and the second se	25th October, 2020	Sunday	
3.	Dussehra	15 <sup>th</sup> November, 2020	Sunday	
4.	Diwali (Balipratipada)	15 November, 2020	1	

Republic Day, Independence Day and Mahatma Gandhi Jayanti will be observed as Non Instructional Days,

#### **Optional Holidays**

In addition to above List of Holidays, employees can also avail additional 02 (Two) optional Holidays in a calendar year to suit their individual religious, cultural requirements and festivities from the list of optional holidays prepared by respective constituent units of MGMIHS. This list must also include local Collector declared holidays.

Note: OPD will not remain closed on two consecutive days.

# Vacation schedule for teaching staff & student (UG):

Summer vacation

: From 1st May, 2020 to 10th June, 2020 (for teaching staff) From 1" May, 2020 to 20th May, 2020 (for UG students only)

Winter Vacation

: From 21<sup>st</sup> October, 2020 to 20<sup>th</sup> November, 2020 (for teaching staff) From 06th November, 2020 to 20th November, 2020 (for UG students only)

\*\* Teaching faculty can avail 20 days of summer vacation & 15 days of winter vacation as per the duty roster prepared by Head of Department/Institute.

WIB AED M.C. IN WARELAND 31/12/19 DATE SIGN :

B. Goel MGM Institute of Health Sciences Registrar (Deemed University of 3 of DEC Act, 1986) Navi Mumbril 410 209

# **MGMIHS**

# MATRA BHASHA DIWAS & LANGUAGE CLASSES



Mahatma Gandhi Mission's

#### MEDICALCOLLEGE

Sector- 01, Kamothe, Navi Mumbai - 410 209. Ph: 0227433404, 27437991, 27437992, Fax: (022) 27431094 E-mail: <u>mgmmcnb@gmail.com</u>, Web: <u>www.mgmmcnm.edu.in</u>

Sr. No		Activity Conducted (In detail)	Date	Venue	Beneficiari es/ Participan ts/ Any Other
2	February 2018, "Marati	ollegiate Health Talk (Marathi) – Aarogya Sandesh Competition on 27 <sup>th</sup> <b>ni Rajbhasha Din"</b> - organized by Department of Community Medicine,	27/02/ 2018	Univer sity	Total 300
	MGM Medical College, K			Audit	
	Activity	Aarogya Sandesh		orium,	
	Nature of Activity	Inter-Collegiate Competition of Health Talk in Marathi by Undergraduate Students of Medical and Paramedical Streams		3 <sup>rd</sup>	
	Date of Activity	27 <sup>th</sup> February 2018 – 2 PM to 5 PM		Floor,	
	Venue	nue University Auditorium, 3 <sup>rd</sup> Floor, College Building		Colleg	
	Date of First Announcement	20 <sup>th</sup> February 2018		e Buildi	
	Organizing Chair- person	Dr. Prasad Waingankar, Professor & Acting HOD, Department of Community Medicine		ng	
	Mentor & Program Conduction	Dr. Madhavi Mankar, Associate Professor, Community Medicine			
	Organizing Secretary	Dr. Rishikesh Wadke, Assistant Professor, Community Medicine			
	Objectives	<ol> <li>Encouraging students to develop their soft skills especially communication skills (affective domain)</li> <li>To provide platform to students to express themselves confidently in Local language / mother tongue / Marathi</li> <li>To develop the subject (community medicine) skills of the students and</li> </ol>			



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	1	
	improve their cognitive development	
	4. To develop positive attitude towards community interaction	
	5. To establish inter-disciplinary linkages and horizontal integration	
	between Community Medicine, Community Dentistry, Community	
	Physiotherapy and Community Nursing	
	6. To celebrate Marathi Rajbhasha Din	
	MGM Medical College	
Participating	MGM Dental College	
Institutions	MGM School of Physiotherapy	
	MGM Nursing College	
Dualinainan ( Davinsi	At Institutional level conducted by 26 <sup>th</sup> February to identify the finalists to	
Preliminary Round	participate in Final round.	
	Total 21 participants participated in final round, from Medical (7), Dental	
Participants	(5), Nursing (5) and Physiotherapy (4). List of Participants and Topics	
·	enclosed.	
	1. Dr Ravindra Inamdar (Professor and HOD Dept of Physiology)	
	2. Dr. Jayashree Ghanekar (Professor and HOD Dept of Medicine)	
Expert Judges	3. Dr. Siddharth Dubhashi (Academic Director, Professor and HOD Dept of	
	Surgery)	
	1. Dr. Pradeep Sawardekar (Professor, Dept of Community Medicine)	
Expert Audience Panel	2. Mrs Rupali Gujar (Medical Social Worker, MGM Hospital, Kamothe)	
	Faculties and Students of Medical, Dental, Nursing and Physiotherapy	1
Audience	Colleges.	
	1. Dr. Rajesh Goel, Registrar, MGMIHS	╡
Presence of	2. Dr. G. S. Narshetty, Dean MGM Medical College	
Dignitaries	3. Dr. Sabita Ram, Dean, MGM Dental College	
	Result Details enclosed. Winner will be given prizes and certificates on 7 <sup>th</sup>	-
Winners	April – World Health Day.	
		l



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Photos:

Judges & Winners of Competition



## Participants in Action







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Audience and Judges enjoying the programme





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Compering by Dr. Madhavi Mankar





Judges – Dr. Siddharth Dubhashi & Dr Jayashree Ghanekar encouraging the students



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Organizing Team – Community Medicine





#### Event Name: LANGUAGE AND COMMUNICATION SKILLS DEVELOPMENT



Location: MGM School of Biomedical Sciences, MGMIHS, Kamothe

Sr. No.	Event Tile & Venue Details	Program Coordinators (Team members name)	Total No. of Participants
1	MGMSBS, Navi Mumbai	Dr Mini Mol P.	Bsc 1 <sup>st</sup> yr 18-19 batch- 127

#### Kindly attach photographs



#### Short event report:

As in todays competitive world, communication skills play a vital role for successful future and shaping the career of a student we have incorporated English (Soft skill development ,Team work,Personality Development,Spoken English,Time Management,Decisionmaking,Etiquettes &Manners) skills in our curriculum

Mr Srinivas Iyer, PG diploma in Public Relations and Personal Management. He has imparted personality development ,spoken English and improved on writing skills for Bsc 1<sup>st</sup> yr student Every week 3hs were dedicated to communication and skill development classes,there were debate sessions and quiz sessions for students.

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#### Short event report:

Students of MGM SBS, MGMIHS Kamothe

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Mr. Bhaskar Vishwanath Naik, M.A in English from Mumbai University with10 yrs of teaching experience in English conducted English communication training for teachers, bank officers, students etc. every week 3hrs of skills was delivered to the students by the faculty.

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Dr. Rajesh B. Goel Registrar MGM Institute v - Health Sciences (Deemed University u/s 3 of VGC - science) Navi Mumbui- 410 209