

**The Gandhigram Institute of
Rural Health and Family Welfare Trust**
Gandhigram, Dindigul District, Tamilnadu.

ANNUAL REPORT 2016-17



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1. AN OVERVIEW

The Gandhigram Institute of Rural Health and Family Welfare Trust (GIRH & FWT) was established in the year 1964, with the financial support of Ford Foundation, Government of India and Government of Tamil Nadu, after a **Pilot Health Project** conducted by Dr. T. S. Soundram (founder of the Institute) during 1959 to 1964.

The experiments and achievements of the pilot health project provided the base for promoting further research and training in National Health and Family Welfare programs. Using a community approach, all programs of the Institute are integrated to form a strong net work for health promotion in the country.

The programs of the Institute can be broadly classified into **three areas viz., (1) Training, (2) Research and (3) Service.**

The Institute functions through Government programs such as:

Central Training Institute (CTI) for training of Regional level and District level and Primary Health care functions. In the field of training, the Institute has been adopting innovative training methodologies in in-service and professional training programs. Along with fulfilling the training needs of southern states, it extends its training support to other states also through its programs on Peer Education, Participatory Learning and Action Approaches.

Regional Health Teachers' Training Institute (RHTTI) for training of nursing personnel and its allied health functionaries in Community Health Nursing.

Population Research Centre (PRC) focuses its attention on various population issues like health outcomes and its relationship with health delivery system, implementation of various national health programs, etc by doing empirical research. The research findings of the Institute have served fruitful suggestions for program planners of Government of India. The

Institute reports all its research findings regularly to the Central and State Government apart from publishing interesting findings as Research Bulletins.

The Institute has made an impact on:

- Reduction of population growth in the country
- Improvement of Maternal and Child Health and Family Welfare
- Prevention of AIDS
- Promotion of RCH concepts
- Promotion of sanitary practices
- Control of NCD among the rural population

2. OBJECTIVES

The main objective of the Institute is to advance and accelerate Health, Reproductive and Child Health and Family Welfare programs at the State and National level by:

Conducting research studies in the field of Rural Health, RCH and Family Welfare activities;

Organizing training programs for Health, RCH and Family Welfare Program personnel within the State and personnel from other States; and

Developing improved Health, RCH and Family Welfare practices.

3. HIGHLIGHTS OF THE YEAR

3.1. FROM THE DIRECTOR'S DESK

Being one among the premier public health training and research institutions in the country, the Gandhigram Institute of Rural Health and Family Welfare Trust (GIRH & FWT) has crossed many milestones in serving rural population in health, education and services.



Our institute consists of **two major wings** viz., **Training and Research**. Training wing comprises **(i) Central Training Institute (CTI)**, which includes Central Unit (CU), Department of Health Promotion & Education (DHPE), Health & Family Welfare Training Centre (HFWTC) and Administrative Unit (AU); **(ii) Regional Health Teachers' Training Institute (RHTTI)**. Research wing consists of **Population Research Centre (PRC)**. These wings conduct various long term and short term training programs and research studies assigned by Central and State Governments regularly. Apart from this, our institute conducted adhoc training programs funded by national and international agencies viz., NACO, NRHM/NHM, IIPS, WHO, Population Council, UNFPA, USAID, UNICEF, TANSACS, TNHSP, etc.

During the year 2016-2017, the Health and Family Welfare Training Centre of the Institute engaged in various short-term training programs funded by NRHM. A total of **1016** personnel were trained in **62** batches.

Also we have three batches of DMLT students (41 in no.) who are undergoing their course under our DME, Tamil Nadu. For the Academic year 2016 -17. We have 15 students enrolled for DHPE under the Tamilnadu Dr. MGR Medical University.

In RHTTI in the year 2016- 17 we have completed the training of IV Batch of Health Visitors course by April 2016 and started the V batch with 30

candidates. They completed the course by March 2017. Short term training courses were imparted for the nursing students (both UG and PG) from nursing colleges of Tamil Nadu, Kerala, Puducherry and Karnataka. A total of 709 nursing students had carried the message and the vision of our Gandhigram.

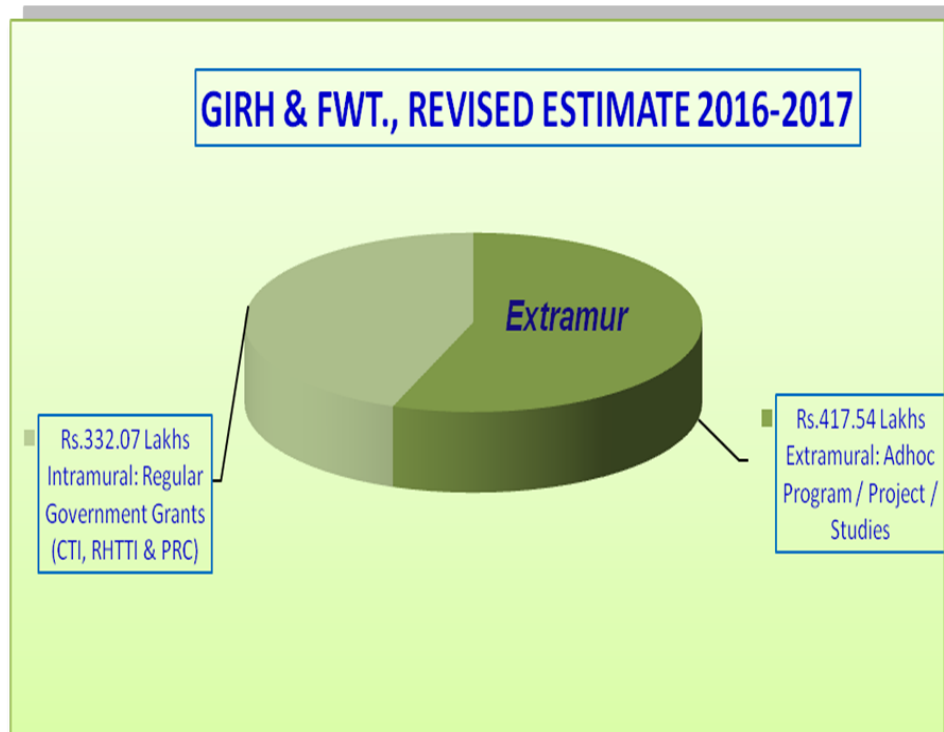
In our PRC, various research studies had been completed during the year 2016-17 which were 1) Monitoring progress of PIP in PIP monitoring visits – 4 districts in Tamil Nadu and 8 districts in Madhya Pradesh 2) A Study on Functioning of Rogi Kalyan Samitis (RKS-Patient Welfare Societies –PWS) in Tamil Nadu, 3) Path to Population decline: A study on negative growth of population during 2001-2011 in the Nilgiris district of Tamil Nadu, 4) Situation Analysis of Primary Health Care in Tamil Nadu: Case study of one Community Development Block each in three Districts of Tamil Nadu, 5) Out of Pocket expenses on Maternal Health and Delivery care in Tamil Nadu, 6) Levels and trends of fetal wastage in Tamil Nadu, 7) Health Hazards of female Garment workers in Tamil Nadu,

Apart from the above we have also conducted trainings for various categories of health personnel in Media department of the Central Unit – CTI.

We, in our institute, through continuous efforts and dedicated service, educate and train the personnel in rural health and conduct relevant researches and are stepping towards upliftment of rural population realizing the vision and objectives of our founder chairman Dr. T.S. Soundram Amma.

Dr. S. Seethalakshmi
Director

3.2. GIRH & FWT REVISED ESTIMATE 2016 - 2017



Highlights of the year 2016-17



Gandhi Jeyanthi



Founder's day



Medical camp for A.P.J. Abdul kalam memorial day



Leprosy awareness programme



Joint Director (Schemes) Directorate of Town panchayat (Chennai) visit to our Institute



International yoga day



Republic day

PART – II

4. RESEARCH

4.1. POPULATION RESEARCH CENTRE

Population Research Centre, Gandhigram is one of the 18 Population Research Centres (PRC) promoted by the Government of India (Ministry of Health and Family Welfare). It is attached to the Gandhigram Institute of Rural Health and Family Welfare, (GIRH & FWT), Dindigul District, Tamil Nadu and functions as the Research Unit of the Institute. The Institute, an autonomous body under the Ministry of Health and Family Welfare, is governed by a Board of Trustees comprising of eminent personalities in public life and learned professionals in the field of Public Health, Demography, Population, Rural Development, Nutrition and Family Welfare. The Chairman of the board implements policy decisions through a full time Director who is also the member secretary of the Trust.

PRC is the mainstay of all the research programs of the Institute. The Institute commenced its research activities in the form of an action research through a Pilot Health Project in Athoor block during 1959. In the year 1961, Government of India sanctioned the Family Planning Communication and Action Research Centre (FPCAR) to the Institute to enable it to undertake research programs on various aspects of Family Planning programme implementation. Later, the FPCAR was upgraded and renamed as Population Research Centre. In 1980 the PRC was upgraded as a fully developed centre (Type I PRC) with 17 well experienced technical staff and six supportive staff (Annexure-I). The Additional Director General (Statistics) in the Ministry of Health and Family Welfare, Government of India is responsible for the functioning of all 18 PRCs in the country and PRC, Gandhigram is one among them.

The geographical jurisdiction assigned to the PRC by the Ministry of Health and Family Welfare, Government of India is the state of Tamil Nadu and the Union Territory of Puducherry. However, the PRC activities extend beyond Tamil Nadu to neighboring States / Union Territory such as the Andaman and Nicobar Islands. Apart from regular and ad-hoc grants from Government of India, the PRC also undertakes studies funded by other agencies such as Government of Tamil Nadu, ICMR, UNICEF, DANIDA, USAID, Population Council, Ford Foundation, UNFPA, WHO, IDRC, PATHFINDER International AND APAC. In addition, the centre is involved in many other activities of its parent body (GIRH & FWT) such as teaching the students of Diploma in Health Education, Nursing and other in-service health training programs apart from consultancy and implementation of special programs.

The Population Research Centre also functions as a support centre for the Government of Tamil Nadu in implementing various health and family welfare programs and Health Management and Information System (HMIS), Mother and Child Tracking System (MCTS) in the State and provides valuable information on program performance apart from making suggestions on various measures to improve its performance. Periodic meetings are arranged with the state and district level health officials to disseminate the research findings of PRC. State level seminars were organized in 1996 and in 2000 to disseminate the research findings of National Family Health Survey – I and Rapid Household Survey – Reproductive and Child Health and other projects undertaken by PRC. The research activities of the PRC including the studies undertaken, performance and findings are discussed with the members of the board of trustees during the board of trustees meetings.

The Population Research Centre, Gandhigram, committed to undertake 10 research studies on various topics during 2016-17. Apart from the regular research work, the centre was assigned with monitoring implementation of the

programs under National Health Mission in 8 districts in Madhya Pradesh and 4 districts in Tamil Nadu. Work completed during the year is described in the following pages.

4.2. ACTIVITIES OF POPULATION RESEARCH CENTRE (YEAR 2016-17) RESEARCH STUDIES COMPLETED

1) Monitoring progress of PIP in PIP monitoring visits – 4 districts in Tamil Nadu and 8 districts in Madhya Pradesh

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	To monitor the implementation of programmes as detailed in the PIP of the state concerned. (Districts covered: Salem, Thiruvallur, Thiruvannamalai and Vellore in Tamil Nadu and Dindori Damoh, Mandla, Singrouli, Raisen, Satna Sidhi and Tikamgarh in Madhya Pradesh)
Period	April 2016 – March 2017
Sample	From each district: Medical College Hospital, District Hospital, Taluk / non-Taluk hospital, CHC, PHCs, HSCs, and UPHCs
Progress	Completed
Findings	Human resources at the facilities are adequate in Tamil Nadu and very poor in Madhya Pradesh. Added to this is, diversion of Medical persons from the place of posting to other medical institutions affects effective service delivery. New initiatives like providing sanitary napkins to the adolescent girls initiated in Tamil Nadu. Nutrition Rehabilitation Centres in Madhya Pradesh is functioning well Community participation in health facility affairs is lacking in both the States. Data generation and utilization is poor. Clients reported satisfaction with the available facilities and with the behaviour of staff.

2) A Study on Functioning of Rogi Kalyan Samitis (RKS-Patient Welfare Societies – PWS) in Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	The main objective of this study is to examine the functioning of Patient Welfare Society (PWS- Rogi Kalyan Samiti, RKS) in Tamil Nadu
Progress	Completed
Findings	This study examined the functioning of Rogi Kalyan Samitis (RKS) established in various public health institutions in Tamil Nadu. RKS/PWS which is envisaged as an important mechanism of hospital management by involving the community to deliver effective and need based health services to attain equity in health care. The study points out that the very basic aim of involving community in hospital management has failed in Tamil Nadu, though it began enthusiastically involving elected members, local leaders and other community members, it lost its vigour due to problems faced by the hospital authorities in having the non institutional members in the regular meetings or getting their approvals. Presently the officials of the institutions only regularly conduct the meetings and pass the resolutions. There are no supervisions by the District Health Society or other officials to sustain the spirit with which the scheme was introduced. Revenue generation for RKS is absent and it fully depends on regular grants from NHM

3) Path to Population decline: A study on negative growth of population during 2001-2011 in the Nilgiris district of Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	The objective is to examine the negative population growth that was recorded at the 2011 census in the Nilgiris district of Tamil Nadu. The census data of the last three census are analyzed using tabular analysis
Progress	Completed
Findings	This study examined the negative population growth that was recorded during the decade 2001-11 in the Nilgiris District of Tamil Nadu while the population growth rate of the State recorded a positive and comparatively higher rate than the previous decades. There was a secular decline in the population growth in this district over past two decades. Both the number of households and population declined consistently in both rural and urban areas. Indicating that the joint family system has been disintegrating. Since it is not industrial district urbanization is not spectacular. The towns are old towns and the spurt in urban population during 1991-2001 was merely due to change in statutory nature of the town panchayats. Except two administrative divisions, taluks, in all the other taluks, population has declined in both rural and urban area. A similar analysis of other districts, particularly those in the Cauvery belt and recorded a slower growth rate will reveal the future course of population dynamics of Tamil Nadu. In addition, analysis of migration data will indicate the geographical area that will contribute to the population growth of Tamil Nadu

4) Situation Analysis of Primary Health Care in Tamil Nadu: Case study of one Community Development Block each in three Districts of Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	<ul style="list-style-type: none"> To assess the preparedness of primary health care delivery in Tamil Nadu in terms of infrastructure and human resource To examine the service utilization by the households
Progress	Completed
Findings	The results of the analysis shows that while the infrastructure has been created for delivery of primary health care health human resource shortage is the major obstacle in realizing the primary health care delivery.

5) Out of Pocket expenses on Maternal Health and Delivery care in Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	<p>The general objective of this study is to understand Out of Pocket Spending (OOPS) on various maternal health services like antenatal care, delivery and post natal care in Tamil Nadu.</p> <p>The specific objectives are:</p> <ul style="list-style-type: none"> To assess the extent of availability of maternal health services free of cost. To determine the socio economic and demographic factors associated with OOPS for getting maternal health services
Progress	Completed
Findings	Out of pocket spending incurred for maternal health care

	<p>services in Tamil Nadu is examined in this Study. Expenses on antenatal care (ANC), delivery and post natal care (PNC) are examined. The study was conducted in three development blocks selected randomly, representing three geographical regions of Tamil Nadu. From these blocks 360 women who delivered a child during the last one year prior to the interview date were interviewed. The findings indicate that the average cost of spending maternal care services is Rs. 9583. On an average woman spent Rs. 2967 for Ante Natal Care services, Rs. 18948 for delivery services and Rs. 1065 for Post Natal care services. Average cost of spending various by components of expenditure viz. Consultancy (Rs. 2828), Diagnostics (Rs. 1559), Medicine (Rs. 1941), room rent (Rs. 669) and other services (Rs. 2586) were calculated. Women belonging to Hindu Backward community (Rs. 13844), women whose educational level was above primary (Rs. 9731), belonging to APL family (Rs. 15577), delivered at private health facilities (Rs. 36583), undergone Caesarian/Assisted deliveries (Rs. 15651) spent more from their pockets than their counterparts. Place of delivery and type of delivery plays an important role in deciding size of out of pocket spending of women while getting their maternal health care services. Making available a medical officer at the PHC may improve utilization of public facility for delivery care and reduce substantially the OOPS for this component of the Maternal health services.</p>
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6) Levels and trends of fetal wastage in Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	To examine the prevalence of pregnancy wastage over a period of time at various districts in Tamil Nadu. <ul style="list-style-type: none"> • To identify the relationship between the child sex ratio at birth and the pregnancy wastage over a period of time at various districts.
Progress	Completed
Findings	<p>In Tamil Nadu, pregnancy wastage shows a upturned “U” shape. Pregnancy wastage was increased from 6.7 in 2011-12 to 9.13 in 2013-14 and shows a decline in 2014-15(8.55) and 2015-16 (7.30). Still birth ratio shows a continuous decline from 1.39 in 2011-12 to 0.64 in 2015-16. Level of abortion varies from period to period. Abortion level increased continuously from 5.64 in 2011-12 to 8.13 in 2013-14 then shows a decline from 2014-15 onwards. Karur recorded a high still birth since 2011-12 (1.31) to 2014-15(1.07) compared to other districts. A Sivagangai, Thiruchirapalli, Krishngiri, Namakkal, Pudukottai, Nilgiris, and Kancheepuram district shows a slight increase trend in pregnancy wastage.</p> <p>Still birth ratio is in increasing trend in Chennai and Kannyakumari districts. Abortion shows a positive trend in Krishnagir, Pudukottai, Thanjavur, Thiruvarur, Thiruchirapalli, Tirupur, Thiruvannamalai, Vellore and Villupuam districts.</p>

7) Health Hazards of female Garment workers in Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	<ol style="list-style-type: none"> 1. To assess the health status of the female workers in garment factory. 2. To identify the health hazards of female garment workers. 3. To analyze the hazards of garment workers according to their living conditions and workplace environment. 4. To find out recommendations to overcome the health problems of the female garment workers
Findings	<p>Mean age of the female garment workers is 33 years with a range of 18 years to 65 years. Highest proportions of them were in the age group of 21-25 years. About three-fourth (76 percent) were migrates from neighbouring district/states. Majority of them have stayed in home with their families (81 percent). Relative/friends (73 percent) were the motivators or persons helped to join in duty. Twenty-five percent had physical stress in work. Work related difficulties i.e., continuous sitting (33 percent), standing (53 percent) and working in same position (71 percent) were also spelled out. Psychological stress, such as work is very hard (84.2 percent), always careful/alert in work (94 percent), always work hard to complete the target (68 percent) and heavy work load (85 percent) were also expressed. Nineteen percent of the workers were under weight. Only three percent were obese or over weight. Continuous work and inadequate sleep and unrest make frequent head ache</p>

	<p>(44 percent) and tiredness (33 percent). Twenty percent had eye problem and eye irritation. Fifteen percent had stomach related problems and 14 percent said they had no sufficient sleep. Ten percent reported about allergy. Eight percent had chest pain and seven percent had nose problem. Six percent had breathing trouble and four percent reported about ear problem.</p> <p>Work related pains/ailments like neck pain (57 percent), frequent body ache (55 percent), musculo skeletal pain (52 percent), back pain (45.2 percent), joint pain and frequent head ache (33 percent each) were mostly prevalent. Environmental and climatic diseases like Common cold (18 percent) and fever (18 percent) were also reported. Food related diseases such as malnutrition (42 percent), ulcer (34.5 percent), pain in abdomen and less appetite (11 percent each) is also prevalent. Ten percent had eye related diseases such as visual discomfort and burning eyes. Heavy work load, strain to complete the task in time and the same routine work leads to depression (11 percent) and frustration (8 percent). Treatment was taken by most of the people.</p> <p>Government health care facilities like government hospitals (24 percent) and ESI hospital (46 percent) were the choice of treatment for any ailment or disease.</p>
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4.3. PROPOSED STUDIES

1. Research Studies Proposed for 2017 - 2018

1.1 Regular studies

1. Perception and prevalence of work related problems of health workers in the Primary Health Care facilities in Tamil Nadu

2. Causative factors behind preference to home deliveries – A situational Analysis in Tamil Nadu
3. Perception and knowledge on sanitation and hygiene behavior among school children
4. A Study on functioning of mobile medical units (MMU-Hospital on Wheels) in Tamil Nadu
5. Population Growth in Tamil Nadu. Identifying geographical areas that may contribute to negative population growth/population stabilization in Tamil Nadu
6. A study on implementation of Rashtriya Bal Swasthya Karyakaram (RBSK) in Tamil Nadu
7. A Study on implementation of National Health Mission components in the Union Territory of Lakshadweep

1.2 Research studies funded by Central / State / International Organisations

- Main survey of Longitudinal Ageing Study in India (LASI) funded by IIPS/GOI

4.4. OTHER ACTIVITIES

1. Teaching by PRC staff

PRC staffs are involved in teaching Demography/Population & Health Policies, Statistics, Research Methodology, Health Economics, RCH, NRHM and other Health Programmes to the long-term and short term trainees of other departments of the Institute.

5. TRAINING

5.1. CENTRAL TRAINING INSTITUTE (CTI)

Introduction

The Central Training Institute (CTI) is the major stay of most of the training programs conducted in the Gandhigram Institute of Rural Health and Family Welfare Trust. The Government of India recognized the Institute as one of the seven CTIs in India during the year 1973 with the objective to provide guidance for the teaching faculties of the health and family planning training centers and the central family planning field units in the four southern states i.e. Tamil Nadu, Andhra Pradesh, Karnataka and Kerala. The responsibilities are to:

- Train District level extension educators from Tamil Nadu, Andhra Pradesh, Karnataka, U.T. of Pondicherry and Kerala as well as extension educators employed by Ministry of Defense and Railways in the southern zone.
- Provide technical guidelines to the regional family planning training centers and the central family planning fields units in the southern zone.
- Perform duties assigned by the Ministry according to the program needs.

Nature of training Programs

All the training programs basically to enhance knowledge, attitude, Skills in technical and managerial aspects of health and its related areas and to provide technical guidance and assistance to the HFWTCs in the states allotted.

These training programs are short-term period, ranges from one week to four weeks for the categories of

- Trainers of training Institutions viz. HFWTCs, ANM training schools, etc.
- District level medical personnel
- District level paramedical personnel

The special training programmes are being conducted for the program personnel of

- Ministry of Railways/Defense
- Voluntary organizations/NGOs

The Central Training Institute consists of Central Unit (CU), Health and Family Welfare Training Centre (HFWTC), Diploma in Health Education (DHE) and Administrative Unit. The CTI conducts short and long-term training in health promotion and education, health communication and produces educational/media materials for outreach programs. It has an integrated teaching Faculty for the Health and Family Welfare Training Centre, Diploma Course in Health Promotion Education and the Central Unit. The CTI consists of the following units:

Central Unit conducts capacity building training programs on Health Communication and Management for the teaching faculties of Regional Training Centres, District Level Extension Educators and other health personnel of Government and Non Governmental Organizations.

Health and Family Welfare Training Centre (HFWTC) organizes training programs for the sub-district level health personnel of various categories.

Health Promotion and Education unit conducts one year Post Graduate Diploma in Health Promotion and Education course for the health professionals working in Government and non-Government sector

During the year 2016-17, the following activities were carried out under the CTI.

5.1.1. CENTRAL UNIT

The central unit was two wings viz. Communication & Management

5.1.1.1. CENTRAL UNIT (COMMUNICATION & MEDIA WING)

I) MAJOR OBJECTIVES OF THE MEDIA DEPARTMENT ARE TO:

- Train long and short term trainees on communication;
- Develop communication strategy for Health and Family Welfare program implementation; and
- Develop IEC/BCC materials to the requirements of Central/State Governments, area projects, and NGOs on Health and Family Welfare themes.

The activities carried out by Media division of the central unit during this year are presented categorically

1. Teaching work:

Media Division staff handled classes on communication and Media related subjects to the following categories of trainees

S.N,	Category of trainees	No. of participants
1	Medical officers	14
2	M. Sc(N)	36
3	B. Sc(N)	615
4	P.BSc(N)	22
5	Health visitors	30

6	DGNM	41
7	CPHN	32
8	Health educators	15

2. Trainings programs organised

2.1. Media Practical for Health Visitor Course (Promotional Training for ANM / MPHW (F)) students

Media practical training was conducted to help the trainees to understand the importance of audio visual aids in health education. They learned to produce posters, flannel graphs, etc. This practical training helped the trainees to design and prepare low cost teaching aids which can be used for community health education programs. Ten (10) students from promotional course participated in this program from 04.04.2016 to 06.04.2016.

2.2. One day workshop on “Digital photography” was organized for the Extension Educators from Gandhigram group of institutions on 26th April 2016. The participants were given training on handling of camera, shooting techniques, image editing skills, etc. A total of 19 Extension Educators participated and got benefited through this one day workshop.

2.3. Training on Communication & Education Technology

Forty eight (48) B.Sc. (Nursing) students from Christian College of Nursing, Ambilikkai, attended one-day specialized training on **“Communication & Education Technology”** in Media department on 09.06.2016. Classes were taken on Communication, IEC, Audio Visual Aids, and Puppets. Various strategies of community health education were taught to the students.

2.4. Training on Mental Health

Based on the request from the Organisation for Eelam Refugee Rehabilitation (OfERR), Chennai, three day training on **‘Mental Health’** was organized for the Health Workers from 14.06.2016 to 16.06.2016. A total of 21 participants

from refugee camps of different districts of Tamil Nadu participated in this 3 days training.

2.5. Training on documentation and reporting

A Training on documentation and reporting was conducted to the program coordinators of NGOs. 9 participants attended this training for three days from 26.07.2016 to 28.07.2016. The participants were taught about the skills of effective documentation and proper reporting techniques.

2.6. Training on Information, Education and Communication (IEC)

Two days training was conducted for the students of Sanitary Inspector course of Gandhigram Rural University.. Sessions on IEC and Audio Visual Aids for Health Education were taught to the students. Eighty (80) students were trained in two batches on 08.09.2016 and 09.09.2016.

2.7. Training on Preparation of Teaching aids

Two batches of training on preparation of teaching Aids for B.Ed Students of Lakshmi College of Education, Gandhigram was organised on 05.12.2016 & 16.12.2016 (I batch) and 14.12.2016 & 15.12.2016 (II Batch). Totally 59 students participated in the training and learnt about the various pedagogical skills of preparing and using the teaching aids.

2.8. Training on Health communication and Educational Technology

A Training on Health communication and educational technology was organized for the BSc Nursing students of Christian college of Nursing, Amblikai. 21 Students were trained on Health communication strategies and effective use of educational technology for 3 days from 02.03.2017.

2.9. Training on IEC Management

A special training on IEC management was conducted from 06.03.2017 to 07.03.2017 for the M.Sc. Nursing students from St.John's college of Nursing,

Bengaluru. Various communication and media strategies of IEC management were taught to the 3 students.

3. Short courses

Two technical courses were conducted during this year

3.1. Fine arts – A short course on Fine arts was organized by this unit from 09.05.2016 to 21.05.2016. Eight rural students participated in this course and got benefited in learning about Elements & principles of drawing

- Free hand outline & model drawing
- Water colour work
- Creative designing
- Coffee painting

3.2. Digital photography – A short course on Digital photography was organized by this unit from 9.05.2016 to 21.05.2016. Thirteen rural students participated in this course and got benefited in learning about

- Visual communication
- Camera handling
- Shot composition
- Creative shooting skills
- Digital imaging techniques

4. Proposals developed

4.1. A proposal regarding the consulting services to develop a digital campaign to increase public opinion and support to increase investment in family planning budget and spacing methods was prepared and sent to Population Foundation of India.

4.2. Preparatory work to conduct three months capacity building training for the Health workers of ACM Medical foundation, Chennai.

5. Other work carried out during this year

- 5.1 Letters sent to Nursing colleges for IEC training
- 5.2 Project proposal committee discussion for exploring new projects on public health
- 5.3 Contacted the principals of B.Ed. Colleges for the training Teaching aids.
- 5.4 Preparation for budget estimate for MOHFW
- 5.5 Letter sent regarding IEC training to State Institute of Health and Family Welfare, Karnataka
- 5.6 Letter sent regarding Health communication to Health Ministry of Nepal
- 5.7 Contacted the Nutrition department of Government arts college, Nilakkottai College regarding Health communication training.
- 5.8 Letters were sent to Pudhu Valvzhu project and District Industrial centre for joint Programs
- 5.9 Finalized the draft of the MoU between GIRH&FWT and the MoHFW.
- 5.10 Report preparation for the MoHFW, Gol regarding the justification of the institute to continue as an autonomous body
- 5.11 Preparation for the template received from the MoHFW, Gol regarding the question raised in Lok Sabha about the new initiatives for rural health care delivery services.
- 5.12 Question paper setting and paper correction for the internal test and model exams of the Health visitors course
- 5.13 Editing of information for the Institute's annual report
- 5.14 Designing of Institute brochure
- 5.15 Contacted southern railways for Health communication training
- 5.16 Preparation of reports to the Ministry of Health and Family Welfare and NITI AYOOG, New Delhi

5.17 Selection of candidates for the Promotional course for Health Visitors (6 months).

5.18 Liaison with IT companies for the CSR programs

5.19 Planning work for a longitudinal documentary research work on Women empowerment with a Fulbright scholar through US India Educational foundation

5.20. Production of IEC materials for Mother Teresa college of Nursing, Pudukottai.

6. SUPPORT SERVICE

The Media division did the following support service to various activities of the institute

- Identity card designed & printed - 79
- Banner designing -11
- Banner writing - 2
- Photo documentation - 204
- LCD arrangements for classes —687
- PA system arrangements – 21
- Film show – 158
- Annual report cover page designing – 1
- Poster designing – 182
- Designing of stickers of founder and Gandhiji
- Chart work– 20
- Pamphlet designing, flex banner designing for short courses
- Flex banner – 2 designing printing
- Name board work – 26
- Display of Gantt chart in flex board, designing and printing with frame work for DMLT course inspection.
- Public address system – 139
- Banner writing for international yoga day

- DHPE students photo editing – 15
- HFWTC sign board preparation work
- Cover page designing – 7
- Thermocol model – 7
- Wall painting for Tobacco free institute

MEDIA DIVISION



Training on Communication & Education Technology



Training on Mental Health



Training on Preparation of Teaching aids



One day workshop on "Digital photography"

MEDIA DIVISION



Training on IEC Management



Training on documentation and reporting



Fine arts



Digital photography



Media Practical for Health Visitor Course

5.1.1.2 CENTRAL UNIT (MANAGEMENT WING)

Co-ordinated one batch Communication & Education training for B.Sc(N) students on 09-05-2016 with 48 students with Media Division,. Also, Co-ordinated one batch Mental Health Training for Health Workers of OfERR with 21 participants held in our institute from 14 to 16 June 2016



Interaction by our Director with
Health workers(OfERR)



Session on Documentation using
computers

With Media Division, co-ordinated one batch of workshop on Documentation & Reporting with 9 participants from NGOs held in our institute from 26 to 28 July 2016. Co-ordinated two batches of short term training on Training on

Teaching Aids preparation i.e. 14 & 15 Dec. 2016 with 27 B.Ed students and

5 & 16 Dec. 2016 with 32 B.Ed students from Lakshmi School of Education, Gandhigram.

Also, co-ordinated two batches of Health Communication and Educational Technology training for 45 B.Sc. students from Christian College of Nursing, Ambilikkai (Batch 1: 27 Feb. 2017 to 01 Mar.'17 and Batch 2 : 02-04 Mar.'17).

Co-ordinated one batch of Managerial Skill Training for MOs (12- 26 Sep. 2016) with HFWTC Department. There were 14 MOs from GPHCs attended this training



program. During this training, two field visits were made to TNMSC, Dindigul and GPHC-Perumparai. Co-ordinated 3 batches of Basic Emergency Obstetric Care (BEmoc) training to Medical Officers at Govt. Theni Medical College & Hospital, Theni for a total of 11 MOs.



Coordinated one batch of Bio-Statistics and Data Management training for 14 M.Sc. students from Mother Theresa Post Graduate & Research Institute of Medical Sciences, Puducherry from 13 to 17 Feb.'17.

- Co-ordinated 13 batches of short term training on Community Health Nursing for B.Sc (N)/M.Sc(N) students in 2016-17.
- Training proposals were sent to Railway Directorates of Chief Medical Director in Southern States, Office of Director General, Armed Forces Medical Services, Ministry of Defence, Directorate of Family Welfare, Chennai and Public Health Foundation of India (PHFI), Haryana. Based on the communication received from Southern Railway, revised training proposal sent.
- Involved in the development of project proposal on Video documentation with Mr. Ilango Samuel Peter, STO(C&M) and filled-in proposal prepared and sent to ASMAE, France.
- Training proposal on Health awareness programs sent to 59 Corporate companies in Madurai district under Corporate Social Responsibility (CSR). Swank-Gate, Madurai held a meeting on 31.8.2016 to enquire about the types of health awareness programs.

- Prepared a project on Family planning campaign with Mr. Ilango Samuel Peter, STO (C&M) and submitted to FPI.
- Concept notes on Unmet need for FP and Concept note on Post Sequealae of Cessarian Delivery developed and submitted.
- Report on possibility of taking up programs under PMKVY-Gol, for our Institute prepared and submitted.
- Sessions on Health Management Information System (HMIS), Statistics, SPSS, Current health scenario, PICME & MRMBBS-on line reporting, Training Aids were taken for the different training programs conducted by the Institute.

5.1.2. HEALTH AND FAMILY WELFARE TRAINING CENTRE

The HFWTC, Gandhigram is one of the seven RTIs in the state and one of the 47 HFWTCs in India catering to the needs of in-service training for medical, nursing and other paramedical personnel working in the Govt. Primary Health Centres. The Gandhigram RTI covers four revenue districts having six HUDs namely Dindigul, Palani, Theni, Ramnad, Paramakudi and Sivaganga. The duration of training will vary from 1 day to two weeks.

Under National Health Mission (NRHM) capacity building of Health functionaries and allied staff is given prime importance. Many skill based & knowledge based trainings to the health providers are implemented to improve the skills & knowledge of service providers to provide various health care delivery in the Institutions and as well as to create awareness among the community on availability and utilization of health care services.

Generally, the training programs are conducted as follows:

- Skill based training are conducted in the major government hospitals through six regional health training institutes (RTIs),
- Knowledge based training are conducted by the RTIs and by the district/block training teams and
- Community based training-through the district/block training teams coordinated and supervised by the RTIs.

The HFWTC, Gandhigram conducted the following training programs during 2016-17

S.No.	Name of Training	No. of batches	No. trained
Maternal Health			
1.	BEmOC	4	24
2.	SBA-SN	10	69
3.	MCH Skill Lab Training to MOs/SN/ANM	12	153
4.	Integrated Ref. Training (IRT)-SHNs	1	24
5.	IRT-VHNs	1	20
Others			
6	Managerial skill training to MOs	1	14
7	Ref.General IMNCI-Health and Nutrition functionaries	4	69
8	RBSK – Mobile Health Team	11	292
9	NSSK-SNs	15	284
Interim-Plan			
10	IRT-Urban Health Nurses	3	67

I) Maternal Health

1. BEmOC Training

Approximately 15% of all pregnant women develop a potentially life-threatening complication that calls for skilled care and some will require a major obstetrical intervention to survive. The main causes of maternal death and disability are complications arising from hemorrhage, sepsis, unsafe abortion, eclampsia and obstructed labor.

The course follows a symptom-based approach to the management of life-threatening obstetric emergencies. The emphasis in this course is on rapid assessment and decision-making and clinical action steps based on clinical assessment with limited reliance on laboratory or other tests suitable for district hospital and health centers in low resource settings. In addition, throughout the training course emphasis is placed on recognition of and respect for the right of women to life, health, privacy and dignity.

The training was conducted in the OG department of Govt. Theni Medical College Hospital. A total of 24 Medical officers (both Male and Lady MOs) underwent the training in 4 batches. Each batch of the training was conducted for a period of 6 days.

Name of Training	No. of batches	No. trained
BEmOC	4	24

2. SBA Training

Skilled Birth Attendant(SBA) is considered as a person who can handle common obstetric and neonatal emergencies, recognize when the situation reaches a point beyond his/her capability and refers the woman or the newborn to a FRU/appropriate facility without delay. Government of India has taken policy initiatives to empower the ANMs/LHVs/SNs to make them

competent for undertaking certain life saving measures. These measures are as follows:

- Permission to use Uterotonic drugs for prevention of PPH.
- Permission to use drugs in emergency situations prior to referral for stabilizing the patient.
- Permission to perform basic procedures at community level in emergency situations.

The objective of the training was to upgrade skills of ANMs/Staff Nurses posted in 24 hours PHCs to improve the quality of intra-partum and new born care in institution and achieve better maternal and infant salvage.

TOT trained medical and staff nurses of the hospital along with the faculty of the Institute are handling the sessions. SBA training to SNs is being conducted at Govt. Head Quarter Hospitals at Dindigul and Ramnad. A total of 69 staff nurses have been trained in 10 batches during 2016-17.

Name of Training	No. of batches	No. trained
SBA	10	69

3. MCH-Skill Lab Training



This hands on training imparts skill to medical Officers and staff nurses related to maternal and child health in the skill labs established in Regional Training Institutes. Developing the appropriate skills in midwifery and

newborn care in skill laboratories using mannequins before the students are allowed to handle the humans is essential in the interest of the students as well as patients. It is the ethical way of learning midwifery skills.



Well-trained medical and staff nurses when they enter actual midwifery



practice, will have confidence to deliver quality midwifery services. Hence, there is a need to establish skill laboratories with mannequins. A recent evaluation of listed critical skills of nurses

emphasizes the need for establishing MCH skill development laboratories in all the RTIs.

A total of 153 personnel were trained comprising 28 Medical officers and 125 SNs. Twelve batches of MCH-Skill Lab training were conducted.

Name of Training	No. of batches	No. trained
MCH-Skill Lab	12	153

4. IRT Training to Sector Health Nurses (IRT-SHN)

The Sector Health Nurses (SHNs) who are the supervisors of VHNs in the periphery were refreshed and updated with knowledge and skill in all the fields of their function such as their roles, AN care, natal care, PN care, on-line reporting, management of sepsis, skin infection, pneumonia, management of diarrhoea, adolescent health & anaemia control program, Cu-T insertion and removal, MVA syringe sterilization etc., The training is for five working day. One batch of training for 24 SHNs was conducted.

5. IRT Training to VHNs

One batch of the Integrated Refresher training to VHNs was organized in the Institute and trained 20 VHNs for 6 working days. The VHNs are the staff who really providing the services directly to the community. They were refreshed and updated with knowledge and skill in all the fields of their function such as their roles, AN care, natal care, PN care, on-line reporting, management of sepsis, skin infection, pneumonia, management of diarrhea, adolescent health & anaemia control program, Cu-T insertion and removal, MVA syringe sterilization etc.,

6. Managerial Skill Development Training

The Medical officers of GPHCs are the managers of all its activities. To discharge their duties effectively, they need to have a good exposure on the organisational structure and functions of a Primary Health Centre. They have to know about the job functions of various categories of staff, supervisory arrangement, etc. They are exposed to various national health programs, management functions such as personnel, financial, material and vehicle management. They are also trained in the prevention and control of epidemics, IDSP, National Immunization Programme, Vector borne diseases, communication skills, public speaking and other relevant topics to become effective managers of GPHCs.



Participatory learning and teaching methods are used throughout the course. Well experienced resource persons in the field of public health actually share their experiences. Inter disciplinary faculty add value addition to the training. Fourteen MOs were trained in one batch.

Name of Training	No. of batches	No. MOs trained
Managerial Skill Training to MOs	1	14

7. General- IMNCI-Refresher Training



Integrated Management of Neonatal and Childhood Illness (IMNCI) is a strategy that targets children less than 5 years old - the age group that bears the highest burden of deaths from common childhood diseases. The IMNCI strategy includes

both preventive and curative interventions that aim to improve practices in health facilities, the health system and at home. It specifies integrated case management of the most common neonatal and childhood problems with a focus on the most common causes of death. The strategy includes three main components:

- Improvements in the case-management skills of health staff through the provision of locally-adapted guidelines on Integrated Management of Neonatal and Childhood Illness and activities to promote their use.
- Improvements in the overall health system required for effective management of neonatal and childhood illness.
- Improvements in family and community health care practices.

In Tamil Nadu as per the operational guidelines from GOI, State Health Society initiated IMNCI refresher training for all health and nutrition functionaries in batches for three working days each. Four batches of IMNCI training was conducted in Gandhigram RTI and 69 personnel were trained comprising 4 SHNs, 63 VHNs and 2 ANMs,

Name of Training	No. of batches	No. Trained
IMNCI-CHN/SHN/VHN	4	69

8. RBSK Training



According to March of Dimes (2006), out of every 100 babies born in this country annually, 6 to 7 have a birth defect. This would translate to around 17 lakhs birth defects annually in the country and accounts for 9.6% of all the newborn deaths. Various nutritional deficiencies affecting the preschool children range from 4 per cent to 70 per cent. Developmental delays are common in early childhood affecting at least 10 percent of the children. These delays if not intervened timely may lead to permanent disabilities including cognitive, hearing or vision impairment. Also, there are group of diseases common in children viz. dental caries, rheumatic heart disease, reactive airways diseases etc. Early detection and management of diseases including deficiencies bring added value in preventing these conditions to progress to its more severe and debilitating form and thereby reducing hospitalization and improving implementation of Right to Education.

Rashtriya Bal Swasthya Karyakram (RBSK) is an important initiative aiming at early identification and early intervention for children from birth to 18 years to cover 4 'D's viz. Defects at birth, Deficiencies, Diseases, Development delays including disability. Towards this objective the Institute organized 11 batches of training to the Mobile Health Team members which includes MOs, SNs and Pharmacist.

Name of Training	No. of batches	No. Trained
RBSK	11	292

9. NSSK Training

According to WHO statistics, out of 9.2 million under-5 deaths in world, India accounts for 2.2 million which is the maximum in the world. Two-third of the neo-natal deaths occurred in the first week of life, two-third of those took place within the first 24 hours due to non-availability of delivery institutions in villages and smaller towns.



Causes of neonatal deaths include infection, complications related to premature birth, pneumonia, diarrhoea and measles apart from hypothermia and infection, and basic newborn resuscitation. Navjat Shishu Suraksha Karyakram(NSSK) – a new programme in Basic new-born care and resuscitation is one of the three pronged strategies to focus on new born care in National Rural Health Mission (23% of neonatal death occurs due to asphyxia at birth).

A two-day training module for care providers at health facilities has been developed and training programme with TOT trained health team. The new programme will enable the paramedical staff to save new born child and mother at various health centres across the country. A total of 284 Staffnurses were trained in 15 batches during 2016-17 in our RTI.



Name of Training	No. of batches	No. Trained
NSSK-SN	15	284

III) Interim-Plan (Special Training)

10. IRT-UHN Training

The Integrated Refresher training to Urban Health Nurses was organized in the Institute and trained 67 UHNs in 3 batches for 5 working days. It was specially organized as an interim-plan apart from the one scheduled at the start of the year. Since NHM covers both rural and urban health programs, the Urban Health nurses working in the UPHCs were trained to deliver services under Urban PHC setup as that of their counterpart, that is, like the VHNs who are trained to deliver services in the rural area. They were refreshed and updated with knowledge and skill in all the fields of their function such as their roles, AN care, Natal care, PN care, on-line reporting, management of sepsis, skin infection, pneumonia, management of diarrhea, adolescent health & anaemia control program, Cu-T insertion and removal, MVA syringe sterilization etc.

Name of Training	No. of batches	No. Trained
IRT-UHN	3	67

IV Health Policy and Vision 2030

A two-day' program on **Health Policy and Vision 2030** for Tamil Nadu state was organized at HFWTC, Gandhigram on 13th and 14th May 2016. The program was organized by the State Health Society and O/o the Director of Public Health. All the Principals and faculty of Regional Training centres and local Deputy Directors of Health Services and District Training Team Medical Officers attended the meeting. The Director of Public Health presided over the function. The Joint Director of Public Health and Deputy Director (Training) of SHS gave special address and conducted the meeting. Policies regarding various courses, duration, training venue and other logistic arrangements were worked out.



DPH Inaugurates



DPH addresses



Faculty Gandhigram
Presents a Group Work



V. TMIS data update and verification

- Govt of India has developed a portal for Computerising Training details, scheduling training, certificate printing, load updation etc.
- As per the State Health Society's direction our faculty were involved in the updation process and as well as verification of training details.
- Dindigul, Palani, Theni, Karur, Ramnad, Paramakudi and Sivaganga HUDs were allotted for the TMIS update.

5.1.3. POST GRADUATE DIPLOMA IN HEALTH PROMOTION AND EDUCATION

Introduction

The Gandhigram Institute of Rural Health and Family Welfare Trust is pioneer in starting Post Graduate Diploma in Health Education Course in the year 1964, catering to the needs of appointing Block Health Educators/Block Extension Educators. The curriculum was developed by involving the policy-makers and programme executives both from Central Government and State Government. The objective of the course is to produce health education specialist to promote the implementation of **National Health programmes under National Health Mission**, health care delivery and development of healthy behavior among people. Duration of the course is one year. The sanctioned strength of trainees is 30 candidates per batch.

The PG Diploma in Health Promotion and Education Course is affiliated with the Tamil Nadu Dr. MGR Medical University, Chennai. It is a professional and residential course, approved by the Medical Council of India. The main objective of the course is to prepare Professional Health Educators to plan, implement, and evaluate the Health Education Programme according to the prevailing health problems and the National Health Programmes.

The Institute has successfully produced 1434 (One thousand four hundred and thirty four) students who are effectively and efficiently involved in health promotion and education in all the National Health programs and effectively contributing their services in National Health Mission.

April 2016

The University theory examination was conducted from 15.04.2016 to 25.04.2016 for the 2015-2016 batch. Follow the theory examinations Viva-Voce examination conducted on 03.05.2016 for all the theory subjects as well for Concurrent Field Training Programme. Dr.P.Kalidas MD, Professor and HOD, Department of community medicine, Coimbatore Medical College and Dr.S.Seethalakshmi, the Director of the Institute was the examiners for the viva-voice.

The students were relieved from the Institute on 03.05.2016 and instructed to join for two months SFT programme (Supervisory Field Training) in the selected institutions under the guidance of SFT programme guide on 09.05.2016.

May 2016

The admission process for the year 2016-17 continued in April and May 2016. Filled in applications were received from 30 candidates from various states of India such as Andhra Pradesh, Odisha, Sikkim and Nagaland. Applications were also received from Nepal candidates. 26 eligible candidates were identified from the applicants and selection order was sent to them by post and email.

June 2016

Dr. M. Malarvizhi and Dr.M.Chellamuthu, Teaching faculty, Department of Health Promotion and Education made Supervisory visits to Odisha, Andhra Pradesh and Sikkim to guide and supervise the PGDHPE students as part of Supervisory Field Training in June 2016. During their visit they met the district health officials of concern states and the SFT guides and provided the necessary guidance and support to strengthen the SFT programme further.

The PGDHPE class room renovated with flooring, roofing and fixing of LCD projector with necessary accessories. The financial support was extended for the renovation work by the PGDHPE students.



July 2016

PGDHPE students were admitted for the Year 2016-17 the 53rd batch of in July 1st 2016. Totally 15 students from Tamil Nadu, Andhra Pradesh, Odisha, Sikkim and Nepal joined the course. Theory sessions started as per the syllabus and curriculum.

Brochure of the Institute prepared for the year 2016-17 and along with the report of departmental activities for the year 2015-16 to be included in the Institute annual report.

University Administrative fees and Continuance of Provisional Affiliation fee were remitted for the academic year 2016 -17 to the Tamil Nadu Dr. MGR Medical University, Chennai through RTGS mode.

SFT project reports received (23 nos.) from the students for the academic year 2015-16 and it was evaluated by the Director and the faculties of the DHPE department.

August 2016

The Independence Day was celebrated at our Institute campus on 15.08.2016 and the flag was hoisted by the Director of our Institute. All staff members and students participated in the celebration.

Founder's day of our Institute ("Amma Day") was celebrated on 18.08.2016 in memory of 111th Anniversary day of our beloved Amma, Dr. Soundram Ramachandran. In view of this celebration we conducted sports events for students and staff. Cultural programs were conducted students and staff of Gandhigram Trust participated in the celebration. Dr.T.G.Vinay, IAS, District Collector, Dindigul was the chief guest and delivered the chief guest address. The other dignitaries were Mr.M.R.Rajagopalan, the Executive Committee Chairman, Dr. Kousalya Devi, Medical Superintendent of Kasthuriba hospital,

Mr. Shivakumar, Chairman, Finance Committee who delivered special address. The entire Gandhigram family attended the founder's day celebration.

The theory classes for the PGDHPE students were carried out concurrently.

September 2016

As part of the course the Concurrent Field Training (CFT) programme, orientation Sessions were conducted from 19.09.2016 to 27.09.2016 for PGDHPE students. The students were trained in preparation of various data collection tools for carrying out survey.

The villages for carrying out CFT program was selected based on the selection criteria and permission for the same was obtained from the Deputy Director of the Health Services, Dindigul. Three villages were selected in Athoor block and the PGDHPE students were divided in to three groups and were guided with faculty guide.

The Concurrent Field Training (CFT) survey was conducted in the selected villages for ten days from 28.09.2016 to 07.10.2016. The students were made to stay in their respective villages for the 10 days during the survey.





We have sent all the require documents on 06.09.2016 to the Registrar (FAC) of the TN Dr. MGR Medical University, Chennai for Continuance Provisional Affiliation (CPA) for the academic year 2016-17.



October 2016

After the survey the consolidation of survey findings were done by doing the survey analysis and the students were taught to prepare the tables and inference. They were taught to make community diagnosis by prioritizing the health problems. Following this a presentation was done on their survey findings.

The supplementary University examinations for the candidates who have failed in April 2016 exams were carried out from 24.10.2016 to 31.10.2016.

The theory classes for the PGDHPE students were carried out concurrently.

November 2016

The Viva-Voce for the students who attended the theory examinations in the month of October was conducted on 03.11.2016.

The regular theory classes were carried out.

The Media practical sessions for the PGDHPE students conducted for 10 days from 15.11.2016 to 25.11.2016 at PGDHPE department. The students were given hands on training by improving their writing and drawing skills. They were taught to produce hand bills/leaf lets, posters, flip charts, flip books, flash cards, brochure, banners, puppets and models. They were trained specially in folk media-folk dances, songs and dramas. They were also taught the basics of computers especially to prepare the PowerPoint presentation.



December 2016

Theory classes were conducted for PGDHPE students. The students were also visited to their respective CFT villages to plan for implement the health education program in their CFT villages along their CFT programme guide.

Mark statement, Provisional certificate and Transfer certificate were dispatched to 16 PGDHPE students(2015-16 batch) on 05.12.2016.

Orientation Training Camp (OTC) for village leaders were conducted by the PGDHPE students in their CFT villages namely Bodikamanvadi, Salai Pudur and Nallampillai in Dindigul district on 08.12.2016 President of the villages, ward members, formal and In-formal leaders, youth club members, women self help group members and other health officials have participated in this OTC program.

January 2017

Regular theory classes were conducted for PGDHPE students and the students also visited to their CFT villages for implementing the health education program in their CFT villages.

Work report of faculty of PGDHPE dispatched (weekly, monthly, and yearly) to the Registrar, The Tamil Nadu Dr. MGR Medical University, Chennai on 03.01.2017.

Observation visit was made by the PGDHPE students to the following places on 06.01.2017 and 07.01.2017.

Date	Time	Place of Observation visit
06.01.2017	10.00 a.m.	slow sand filter-water treatment plant in
	12.00	Rapid sand filter-water treatment plant in
07.01.2017	7.00 a.m.	Slaughter house at Nellpettai
	8.30 a.m.	Aavin dairy farm in Madurai
	11.30 a.m.	Sewage treatment farm and Solid Waste

The Director i/s attended a meeting on 05.01.2017 at the Tamil Nadu Dr.MGR Medical University, Chennai in connection with issuing of Continuance of

Provisional Affiliation. Required documents were submitted to the Registrar of the Tamil Nadu Dr. MGR Medical University, Chennai on 13.01.2017

Pongal festival was celebrated on 13.01.2017 by the PGDHPE in the institute campus.

February 2017

Regular theory sessions were conducted to the PGDHPE students and the students were also visited their respective Concurrent Field Training (CFT) villages to implement health education program.

Provisional certificate for 5 students (October 2016) from the Tamil Nadu Dr. MGR Medical University, Chennai on 18.02.2017

To fix the guide for Supervisory Field Training (SFT) they were contacted through email and confirmed for guiding the students on SFT programme. SFT programme was planned to conduct in two phases from 15.03.2017 to 14.04.2017 (Ist Phase) and from 01.06.2017 to 30.06.2017 (IInd Phase).

First model examination (6 theory papers) was conducted to the PGDHPE students from 20.02.2017 to 25.02.2017.

March 2017

Provisional certificate, Transfer certificate and the Mark statement were dispatched to five PGDHPE students (Oct. 2016) on 01.03.2017.

The PGDHPE students visited their CFT villages to conduct the health education.

Necessary documents were submitted to the Registrar of the Tamil Nadu Dr. MGR Medical University, Chennai on 15.03.2017 to get the Continuance

Provisional Affiliation for the academic year 2016-17 for the course of PG Diploma in Health Promotion and Education (PGDHPE).

Admission process was started for the academic year 2017-18 (54th batch). A letter was dispatched on 24.03.2017 to the concerned officers of the states like, Andhra Pradesh, Tamil Nadu, bhopal (Madhya Pradesh), Odisha, Kerala, Pondicherry and New Delhi to depute candidates for PGDHPE course for the academic year 2017-18.

As part of the PGDHPE course 15 students of current batch involved in health education programme to their area as part of the SFT programme.

5.2. REGIONAL HEALTH TEACHERS' TRAINING INSTITUTE

5.2.1. HEALTH VISITOR COURSE (PROMOTIONAL TRAINING FOR ANM/MPHW-F) 4th batch – 6 Months (2015-16)

We have commenced the fourth batch of the course on 16th November 2015. We have enrolled 10 candidates from various municipal corporations of Tamil Nadu and DMS.

Theory Session

Theory sessions were taken by RHTTI faculty on Anatomy and Physiology, principles of nursing, Psychology, Sociology, Communication, Supervision and Management, Pediatrics, Midwifery and Community Health Nursing.

Model examination

Model examinations were conducted from 25.04.2016 to 29.04.2016. After model examinations were over, study holidays for the Govt. board examinations were declared for the students from 30.04.2016 to 08.05.2016.

Govt. Board Examination

The Govt. Board examinations were conducted from 09.05.2016 to 13.05.2016. The trainees were relieved on 16.05.2016 after completion of the Course.

Result

Received Government board examination results for 10 candidates of fourth batch (2015-2016) from Directorate of Public Health and Preventive Medicine, Chennai. All the 10 candidates were passed successfully and the course certificates were issued by the board of examination to the candidates.

HEALTH VISITOR COURSE (PROMOTIONAL TRAINING FOR ANM / MPHW-F) 5th Batch – 6 Months (2016-17)

Received recognition order/validity for the academic year 2016-17 from Tamil Nadu Nurses and Midwives Council, Chennai, and Indian Nursing Council, New Delhi. Preliminary work has been initiated for admission of candidates. Admission intimation letters were sent to all municipal corporations of Tamil Nadu and DMS to select and depute the candidates for the course.

Admission orders were sent to eligible candidates of the Municipal corporations of Tamil Nadu and DMS namely Dindigul, Tuticorin, Trichy, Pudukottai, Sivagangai and Coimbatore, for the course.

We have commenced the Fifth batch of the course on 5th October 2016. We have enrolled 30 candidates from various Government hospitals, Medical college hospitals and Municipal corporations of Tamil Nadu.

Sl. No	Deputed from DMS/DME/Corporation	No. of candidate s
1	Tirunelveli Government Medical College Hospital	2
2	Thoothukudi Government Medical College Hospital	1
3	Kilpauk Medical college Hospital, Chennai	1
4	Institute of Mental Health, Kilpauk, Chennai	2
5	Government Peripheral Hospital, Chennai	1
6	Government Mohan Kumaramangalam Medical college Hospital, Salem	2
7	Chengalpet Medical College Hospital	2
8	Government Hospital, Srivilliputhur, Virudhunagar Dist	1
9	Government Hospital, Sattur, Virudhunagar Dist	1
10	Government Hospital, Kariyapatti, Virudhunagar Dist.	1
11	Government Hospital, Cheranmahadevi, Tirunelveli Dist.	1
12	Government Hospital, Melapalayam, Tirunelveli Dist.	1
13	Government Hospital, Sendhamangalam, Namakkal Dist.	1
14	Government Women & Children Hospital, Sivagangai, Sivagangai Dist.	1
15	Government Hospital, Illayangudi, Sivagangai Dist.	2
16	Government Hospital, Panruti, Cuddalore Dist.	1
17	Government Hospital, Thiruthangal, Virudhunagar Dist	1
18	Government Hospital, Rajapalayam, Virudhunagar Dist	1
19	Government Hospital, Sankarankovil, Tirunelveli Dist.	1
20	Government Hospital, Watrap, Virudhunagar Dist	1
21	Government Hospital, Podaturpet, Thiruvallur Dist.	1
22	Government Head Quarters Hospital, Thiruvallur, Thiruvallur Dist.	1
23	Tirunelveli Corporation, Tirunelveli Dist.	1
Total		30

Application with necessary documents for renewal/validity for the academic year 2017-18 was sent to the Indian Nursing Council, New Delhi, through Tamil Nadu Nurses & Midwives Council, Chennai.

Theory

Regular theory sessions were taken by RHTTI and HFWTC teaching faculty on Anatomy & Physiology, Principles of Nursing, Paediatrics, Midwifery, Community Health Nursing, Environmental Sanitation, Nutrition, Sociology and Psychology, Family Planning, Communication, Supervision & Management, Lesson Plan & Practice Teaching, and Health Education.

Clinical posting

Trainees were posted for their clinical experience at Leonard Hospital, Batlagundu, from 07.11.2016 to 23.11.2016. During the clinical posting, the trainees were able to give bedside nursing care for the patients in the medical ward, surgical ward, paediatric ward and maternity wards. In addition to that, as part of the curriculum requirement, they have completed two nursing care plans of medical surgical and paediatrics, mother care record and clinical presentation on various diseases.

Observation Visit & Community Postings

S.No.	Period	Place	Posting for (subjects)
1.	07.11.2016 To 23.11.2016	Leonard Hospital, Batlagundu, Dindigul District	The trainees were posted at surgical, medical, pediatric and maternity wards to give bedside nursing care and complete nursing care plans case studies and clinical presentations

2.	09.12.2016	Blood Bank and Anbagam AIDS Care Centre, Dindigul	To learn about functions and storage facilities of Blood Bank To learn about HIV/AIDS and care of HIV/AIDS patients at AIDS care centre
3.	21.12.2016 To 23.12.2016	Family Planning Association of India, Dindigul	To learn about various family planning methods, and to observe laparoscopy and pre, post care of family planning procedures
4.	27.12.2016	District Tuberculosis Centre, Dindigul Govt. HQ Hospital, Dindigul	To learn about RNTCP, Lab investigations, Drug regimen and Care of TB patients
6.	23.01.2017 To 04.02.2017	Concurrent Field Training – CFT to Ammapatti village, Ammayanayakanur Block PHC area	To learn about Household survey, PLM Techniques, Nutrition Demonstration, Immunization and School Health program
7.	10 th February 2017	Visit to Cold Storage Unit Sewage Farm and Walk-in Cooler, Madurai	To observe the cold storage system at regional level To learn about disposal of waste water and solid waste, and storage of vaccines
8.	27.02.2017 To 01.03.2017	Supervisory Field Training (SFT) at Ammayanayakanur block PHC area	To understand the set up and functions of community health centre.

9.	10 th March 2017	Slow & Rapid Sand Water Filtration Plant at Udumalapet	To learn about slow & rapid sand water filtration systems
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Concurrent Field Training

Concurrent Field Training (CFT) at Ammapatti village, Ammayanayakanur Block PHC area, was conducted from 23.01.2017 TO 04.02.2017. During the CFT posting, the trainees were able to do the following activities:

- Orientation, village transect, numbering of houses and community mapping
- Conduction of household survey
- Continuation of household survey and consolidation of survey
- Participating in school health programme
- ICDS visit and under-five assessment
- Participating in outreach services
- Conduction of focus group discussion
- Participating in Ante Natal Clinic and administration of vitamin-A prophylaxis
- Conduction of Participatory Learning Methods techniques
- Health Sub-Centre (HSC) visit and participating in immunization programme
- Nutrition demonstration and exhibition
- Conduction of orientation training camp for the leaders

Media Practical

The trainees were posted in Media division on 20th to 22nd February 2017 to learn about preparation and use of Audio Visual Aids.

Measles Rubella Vaccination Campaign

The health visitor trainees were participated in the Measles Rubella Vaccination Campaign in Dindigul district from 13.02.2017 to 18.02.2017. Totally 1283 children were immunized.

Supervisory Field Training (SFT)

The trainees were posted for Supervisory Field Training (SFT) at Block PHC, Ammayanayakanur, for a period of 3 days from 27.02.2017 to 01.03.2017. The following activities were carried out by the trainees during their SFT:

- PHC orientation
- Attending antenatal clinic at Nagayangoundanpatti Health Sub Centre
- Discussion with VHN/SHN/CHN about their roles & responsibilities
- Participating in the PHC activities
- Learning the records & the reports
- Attending review meeting at Block PHC
- Preparation of ATP, FTP and Duty roaster
- Participating in the immunization clinic conducted at Nagayangoundanpatti
- Sub centre visit and use of facility assessment check list at Malayagoundanpatti Attending theory sessions taken by Block Medical Officer, Medical Officers, Non-Medical Supervisors at Block PHC

Model Examination

The Model examinations were conducted for the students from 13.03.2017 to 18.03.2017. After model examination were over, study holidays for the Government board examinations were declared for the students from 19.03.2017 to 26.03.2017.

Government Board Examination

The Govt. board examinations were conducted for the students from 27.03.2017 to 03.04.2017. The trainees were relieved on 04.04.2017 after completion of the Course.

Result

Received Government board examination results of 30 candidates of fifth batch (2016-2017) from Directorate of Public Health and Preventive Medicine, Chennai. All the 30 candidates were passed successfully and the course certificates were issued by the board of examination to the candidates.

5.2.2. UPGRADATION OF DNEA COURSE INTO POST BASIC B.Sc. (NURSING) PROGRAM

Received a clarification letter from the Ministry, regarding the revised staffing pattern for Post Basic B.Sc. (Nursing) with proof of the relevant scale of pay mentioned in the proposal. In this regard, a reminder letter was sent to Indian Nursing Council, New Delhi once again on 14.07.2016. As a follow up once again the proposal and the necessary documents of Post Basic B.Sc. (Nursing) were sent to the Training Division, Ministry of Health and Family Welfare Government of India on 23.09.2016.

Regular follow-up was done with the Training Division of the Ministry for upgradation of Post Basic B.Sc.(N) program.

5.2.3 SHORT TERM TRAINING (FROM APRIL 2016 TO MARCH 2017)

Sl. No.	Name of the College	Category of students	Period		Duration	No. of trainees
			From	To		
1	M.E.S. College of Nursing, Malappuram, Kerala	B.Sc.(N) (I-Batch)	11.04.2016	15.04.2016	5 days	23
2	M.E.S. College of Nursing, Malappuram, Kerala	B.Sc.(N) (II-Batch)	18.04.2016	22.04.2016	5 days	23
3	Mother Theresa Post Graduate and Research Institute of Health Science, Pondicherry	M.Sc.(N)	18.04.2016	22.04.2016	5 days	5
4	GRT College of Nursing Tiruttani, Chennai	B.Sc.(N)	25.04.2016	29.04.2016	5 days	30
5	Rani Meyyammai College of Nursing, Annamalai University	M.Sc.(N)	25.04.2016	29.04.2016	5 days	5
6	Thiravium College of Nursing, Theni District	B.Sc (N)	02.05.16	06.05.16	5 days	46
7	Josco College of Nursing, Edappan, Pandalam, kerala	M.Sc (N)	02.05.16	06.05.16	5 days	1
8	St. John's college of Nursing, Bangalore	M.Sc (N)	02.05.16	06.05.16	5 days	2
9	Christian College of Nursing, Ambilikkai	B.Sc.(N)	09.06.2016	-	1 day	45
10	Christian College of Nursing, Neyyoor, Kanyakumari District	M.Sc.(N)	15.06.2016	22.06.2016	7 days	1
11	City college of nursing, Mangalore, Karnataka	M.Sc.(N) IInd Year	18.07.2016	29.07.2016	2 weeks	4
12	Sakthi College of Nursing, Karur	B.Sc (N) DGNM	14.11.2016	18.11.2016	5 days	28 09
13	Dr. Mahalingam Institute of Paramedical Science and Research, Erode	B.Sc (N) DGNM M.Sc (N) Ist batch	21.11.2016	25.11.2016	5 days	18 11 01
14	Dr. Mahalingam Institute of Paramedical Science and Research, Erode	B.Sc (N) IInd Batch	28.11.2016	02.12.2016	5 days	29
15	O.P.R. College of Nursing, Cuddalore	B.Sc (N) I Batch	13.12.2016	17.12.2016	5 days	30

16	O.P.R. College of Nursing, Cuddalore	B.Sc (N) IIInd Batch	19.12.2016	23.12.2016	5 days	30
17	Christian Fellowship Hospital, Oddanchatram	DGNM	15.12.2016	15.12.2016	1 day	30
18	State Institute of Health & Family Welfare, Bangalore	CPHN	19.12.2016	21.12.2016	3 days	32
19	CSI, Eliza College Idaiyangudi, Tirunelveli	B.Sc (N)	09.01.2017	13.01.2017	5 days	37
20	S.P.Fort College of Nursing Trivandrum	B.Sc (N)	17.01.2017	21.01.2017	5 days	36
21	Seventh day Adventist, Ottapalam, Kerala	B.Sc (N)	06.02.2017	10.02.2017	3 days	39
22	Assisi College of Nursing, Kottayam	B.Sc (N)	13.02.2017	17.02.2017	5 days	38
23	Mother Teresa Post Graduate and Research Institute of Medical Sciences, Puducherry	P.B.Sc (N)	17.02.2017	1 day	1 day	22
24	Nehru Nursing College Vallioor, Tirunelveli District	B.Sc (N) M.Sc (N)	20.02.2017	24.02.2017	5 days	32 1
25	St.J ohn's College of Nursing, Bangalore	M.Sc (N)	27.02.2017	03.03.2017	5 days	3
26	Sacred Heart College of Nursing, A. Vellodu	B.Sc.(N)	06.03.2017	08.03.2017	3 days	46
27	E.S. College of Nursing, Villupuram	B.Sc.(N) (I-Batch)	20.03.2017	24.03.2017	5 days	26
28	E.S. College of Nursing, Villupuram	B.Sc.(N) (II-Batch)	27.03.2017	31.03.2017	5 days	26
Total						709

The following teaching learning activities were carried out during their community experience at our Institute:

- Introduction and video film on genesis of the Institute
- Visit to Rural Energy Centre at Gandhigram
- Observation visit to HIV/AIDS Terminal Care Centre at Anbagam, Dindigul
- Observation visit to CHC, Kosavapatty and HSC, Nochiyodaipatti

Theory classes on IEC, preparation and handling of AV Aids, Community Organization and Development, Community Diagnosis, Community Participation and Community Need Assessment approach, PLM techniques, Organization of Health Education program in the community, Puppet preparation, NRHM, Health Care Delivery System, HMIS, etc.

Slow & Rapid Sand Water Filtration Plant at Udumalapet



Pongal Festival



Valedictory Function



6. SELF FINANCING COURSE

6.1. Diploma in Medical Laboratory Technology (DMLT) - 2 years

The Health and Family Welfare Training centre of this Institute is also conducting a self financing two year Diploma course in Medical Laboratory Technology (DMLT). This course is approved by the Directorate of Medical Education, Govt of Tamil Nadu vide GO (MS) No- 122 of Health and Family Welfare (PME) Department dated 03.04.2012.

Objectives of the course

At the end of the course, the students will able to

- Perform all the pathological, serological and bio-chemical examinations of all the samples of human being efficiently.
- Develop and enforce a professional code of conduct.
- Understand and perform their roles in National Health Programmes in hospital settings.

A total of 41 students are undergoing the course as follows:

Batch No.	Academic Year	No. of Students		
		Male	Female	Total
4 th Batch	20014-16 (2 nd year)	1	10	11
5 th Batch	2015-17 (1 st year)	4	11	15
6 th Batch	2016-18 (new admission)	3	12	15

ACTIVITIES OF THE DMLT COURSE

a) Regular theory and practical classes



As per the curriculum given by King Institute of Preventive Medicine and Research, Chennai the theory and practical classes were conducted for second year DMLT students at our institute from April 2016 to March 2017 and for the first year students from April 2016 to August 2016.

b) Lab experience in hospital settings

Eleven second year DMLT students attended one month training from 1st to 30th September 2016 at District Head Quarters Hospital, Dindigul in the General lab, Blood bank, ICTC and RNTCP.

c) 100% achievement in Medical Board Examination

In the month of December 2016 ten second year DMLT students appeared for the Medical board examination conducted by the Directorate of Medical Education, Govt. of Tamil Nadu. All of them have passed the exam Successfully

d) Internship training



Ten second year DMLT students attended three months internship training from January to March 2017 at Kasturba Hospital, Gandhigram.

e) Admission of candidates for the academic year 2016 -2018.

The admission process started in the month of July 2016. and 15 eligible candidates were admitted for the academic year 2016 -2018. Their regular classes started from December 2016.

Visit of the Inspection Team to increase DMLT seats from 15 to 30

A proposal was submitted to the Government of Tamil Nadu to increase DMLT seats from 15 to 30 per batch at the institute. Subsequent to this a team of Medical experts inspected the DMLT course in the month of May 2016.

Outreach activities organized in rural areas

Plantation of 300 trees in the memory of the 1st death anniversary of Dr. A.P.J. Abdul Kalam in the premises of Govt Primary School, Ambathurai.



School children lighted the lamp and planted trees by remembering Dr.Kalam's quotations

Health Screening Camp for school children

A total of 124 school children were screened for anaemia and malnutrition in two government schools. Health education sessions were conducted on anaemia and personal hygiene. First camp



was organised on 27th July 2016 in memory of Dr.A.P.J.AbdulKalam and the second camp was organised on 21st October 2016 in memory of 32nd death anniversary of Dr.Soundram founder of Gandhigram.



7. DISSEMINATION

7.1. LIBRARY

The GIRH Institution of education has the main responsibilities of equipping Students, Trainees, Researchers, Faculty and Staff with advanced knowledge. In particular library undertakes many responsibilities and performs varied functions and it plays a vital role to our education & research by providing invaluable resource for knowledge and services.

Mission of the Library

- "To provide quality services, facilitating access to comprehensive and relevant resources, and fostering good learning environment through the collection of physical and electronic documents from various sources and disseminate to patron".
- A special library for Public Health, Community Medicine and Family Planning

Objective

To provide quality services, facilitating access to comprehensive and relevant resources, and fostering good learning environment through the collection of physical and electronic documents from various sources and disseminate to patron.

WHO Books

In-addition to its collection, the library has access to World Health Organization books focused on Public Health, Preventive Medicine, Primary Health Care, Nursing Management and Allied Health. Also, a collection of some old reports and documents published by WHO are kept preserved.

List of Books purchased for the academic year of 2016-17

Sl.No	Accession No.	Author	Title
01	10551	BARBARA BERMAN & SHARMA, K. L	Social Work in Health and Ageing
02	10552	AJAY KUMAR SAHOO & GAVIN J ANDREWS	Sociology of Ageing
03	10553	MOHAMMAD AKRAM	Maternal Health in India
04	10554	BILL JORDAN & FRANK DUVELL	Migration: The Boundaries of Equality and Justice
05	10555	JEFFERY HAYNES	Development Studies
06	10556	PATIL, R. B	Sustainable Development
07	10557	ANIL KUMAR JANA	Decentralizing Rural Governance and Development
08	10558	ANNE METTE KJAER	Key Concepts Governance
09	10559	JAYARAM N	Sociology of Education in India
10	10560	GERARD MCCANN & STEPHEN MCCLOSKEY	Key Issues in Development Studies
11	10561	PETER V ZIMA	What is Theory?
12	10562	CHANDRAKALA PADIA	Theorizing Feminism
13	10563	VINITHA PANDEY	Rethinking Urban Development
14	10564	EDWARD ROYCE	Classical Social Theory and Modern Society

15	10565	JONATHAN H TURNER	The Emergence of Sociological Theory
16	10566	PAULINE KOLENDA	Caste, Marriage and In Equality
17	10567	MILTON SINGER	Structure and Change in Indian Society
18	10568	MARIANNE	Group Work: Process and Practice
19	10569	HAQUE T	Empowerment of Rural Woman
20	10570	SNEH SANGWAN	Gender Bias Missing Girls and Population Imbalance
21	10571	DASH K.N	Health and Tribes in India
22	10572	PATEL R. K	Health Status and Programs in India
23	10573	RAY C. N	Liberalisation and Urban Social Science
24	10574	JEJEEBHOY S. J	Population and Reproductive Health in India
26	10576	HUSSAIN, AZMAL	Rural Health: Perspectives and Experiences
27	10577	RAJAGOPALAN, S	Rural –Urban Migration: Trends , Challenges and Strategies.
28	10578	SHEAFF, MICHAEL	Sociology & Health Care
29	10579	SUJATHA, V	Sociology & Health and Medicine

30	10580	ROY, T. K	Statistical Survey Design and Evaluating Impact
31	10581	RAMACHANDRAN P	Survey Research in Public Health
32	10582	BAILY, STEPHEN	Academic Writing: A Handbook for International Students
33	10583	BINOY KUMAR	Population and Society
34	10584	DEBJANI ROY	Population Geography
35	10585	LESTER, JD	Research Paper Handbook
36	10586	SHARMA, BC	Scientific and Technical Report
37	10587	MALMFORS, B	Writing and Presenting Scientific Paper
38	10588	MEHTA, N. V	Income-Tax Ready Reckoner
39	10589	UNISA SAYEED	Population, Health and Environment
40	10590	SUJATHA, V.	Health by the People
41	10591	SPENCE, MICHAEL	Urbanization and Growth
42	10592	BREWER, JOHN D.	Ethnography
43	10593	BRITO, OLIVIER	Understanding Urban Poverty in India
44	10594	HAYNES, JEFFREY	Development Studies
45	10595	PATEL, SARJOO	Ageing: An Interdisciplinary Approach
46	10596	JOHNSON, C. SHANTHI	Ageing and Health in India
47	10597	JORDAN, BILL	Migration: The Boundaries of Equality and Justice
48	10598	THAMILARASAN, M.	Medical Sociology
49	10599	RITZER, GEORGE	Modern Sociological Theory

50	10600	BERKMAN, BARBARA	Social Work in Health and Ageing
51	10601	SAHOO, AJAYA KUMAR	Sociology of Ageing: A Reader
52	10602	UNISA, SAYEED ET AL.	Population Health and Environment
53	10603	AKRAM, MOHAMMAD	Sociology of Health
54	10604	JORDAN, BILL	A Theory of Poverty and Social Exclusion
55	10605	AKRAM, MOHAMMAD	Maternal Health in India
56	10606	PRASAD, KIRAN	Communication for Development II Volume - I
57	10607	PRASAD, KIRAN	Communication for Development II Volume - II
58	10608	KUMARI, VANDANA	Elderly Women in Indian Village
59	10609	SAMANTA, R. K.	Empowering Rural Women
60	10610	MEERA LAL	Female Foeticide And Infanticide
61	10611	MCPAKE, BARBARA	Health Economics
62	10612	HIRAMANI, A. B.	Health Education in Primary Health Care
63	10613	RAJU, S. SIVA & SEKHER, T. V.	Health, Gender And Development
64	10614	RANI, ANJALI	Maternal Nutritional Status And Pregnancy Outcome
65	10615	NAYAR, P. K. B.	Older Women In India

66	10616	GIRIDHAR, G. & OTHERS	Population Ageing in India
67	10617	GOULD, W. T. S.	Population And Development
68	10618	RAJU, S. SIVA & RANI, P. M. SANDHYA	Primary Health Centers in Rural Health Volume - I
69	10619	RAJU, S. SIVA & RANI, P. M. SANDHYA	Primary Health Centers in Rural Health Volume - II
70	10620	SINGH, ABHA LAKSHMI	Rural Women: Work And Health
71	10621	NATH, MADHURI	Rural Women Workforce in India
72	10622	MURTHY, M. S. R.	Sex Awareness Among Rural Girls
73	10623	KRISHNA. SANGEETA	Single Women
74	10624	KACHRU, ASHA	Single Women No Problem
75	10625	SOMAYAJULU, SLIMIRI V.	Social Inclusion And Women Health Volume - I
76	10626	SOMAYAJULU, SLIMIRI V.	Social Inclusion And Women Health Volume - II
77	10627	WEINSTEIN, JAY & PILLAI, VIJAYAN K.	Demography: The Science of Population
78	10628	MEHTA, N. V	V. G. Mehta's Income Tax Ready Reckoner (2017-2018)

JOURNALS

Library subscribes National & International Journals for the past 30 years focused on the following subject headings. Because Journals are the medium of scientific communication with up-to-date information.

- Clinical Research
- Demography
- EPW
- Family Welfare
- Health Sciences
- Health Education
- Medical Research
- Nursing
- Public Health
- Social Work
- Yoga

In addition, library has Magazines, News Letters & News Papers

Back Volumes

Library has very good collection of back volumes of journals focused on Demography, Epidemiology, Family Planning, Health Sciences, Medical Research, Nursing, Nutrition, Preventive Medicine, Public Health and General.

Project Reports

Library has a good collection of students and research scholar's dissertation in various subject headings done in Health Education, Demography, Mental

Health, Public Health and etc., which is extremely useful for new trainees and students for their research and project.

Services

Library provides the following important services to all the users of GIRH such as Current Awareness Service (CAS), Selective Dissemination of Information (SDI), and News articles from different Journals, Magazine and News papers. The Information covered on community health, preventive medicine, nursing management and allied subjects. All the information has been forwarding to all the users via their email IDs. CAS service is monthly based and SDI and News articles are daily based. Also, main objective is to provide the reference service. Librarian assists users to find the references needed to their study and research.

Librarian provides a user education in regular basis for the new users including students from various courses, trainees and others coming to our institute, which helps users to identify the available resources in library (Print and Electronic) for easy access.

Databases

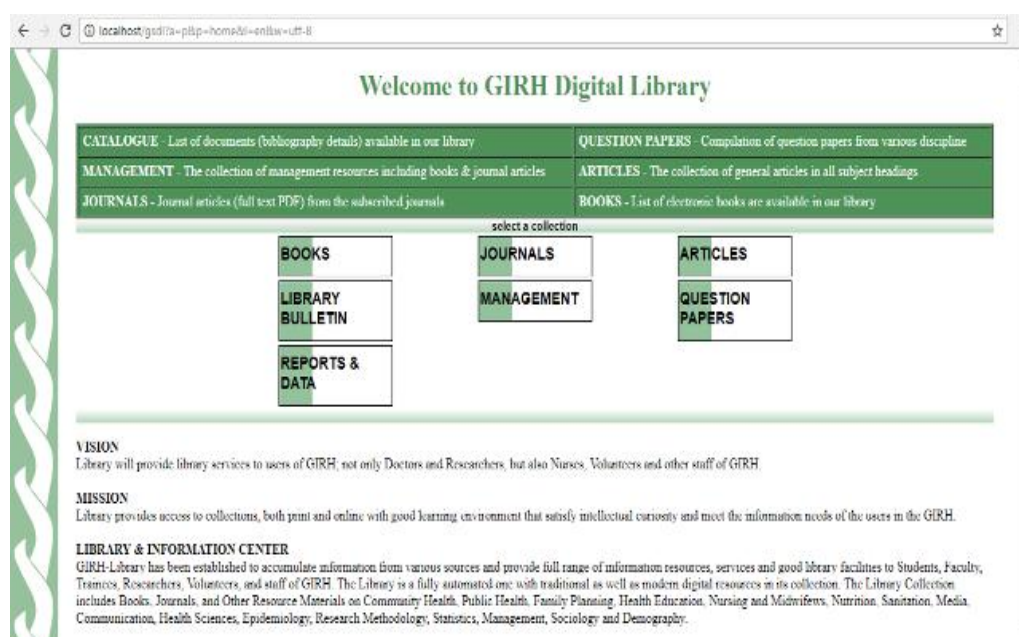
CDS/ISIS, GSDL and PubMed databases are used to retrieve the citation and literature.

CDS/ISIS

Currently, library has a collection of electronic catalogues documented and indexed with the help of library software called CDS/ISIS and through this e-catalogue librarian is able to meet the user's needs.

GSDL

For the digital library, the librarian recently has started and builds a digital platform with the help of Greenstone Digital Library (GSDL) Software. Through this software all the electronic resources are gathered and built the collection. After the completion of these work users can have an easy access to all the electronic resources including Journal articles, eBooks, and etc in all formats (PDF, WORD, PPT, and EXCEL)



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Consortium

Librarian is a member of Association of Vision Science Librarian (AVSL) and its consist of more 200 librarians in world wide. Librarian is able to collect the unavailable articles, data and any other resources from AVSL for institute faculty and the students.

Other Performance for this academic year

Library renovation - Library has been renovated in some areas of library, which includes:

- All the doors have been removed and fitted with new doors (6 Nos)
- All windows have been painted
- Back volumes shelves were covered with glass doors (20 Nos.)
- Whole library has been done with white washing and green color

Binding works

In this academic year library books have been bound about 114 books. It includes damaged and poor condition books.

Users access electronic resources via their email IDs:

Based on this services librarian sends electronic resources requested by the users as well as SDI-selective disseminated of information to the concerned in following subject heading.

Sl.No.	Users	Online Search, Emails & Print
1	Director	418
2	HODs & Faculty	350
3	PGDHPE students	150
4	DMLT students	100
5	HV course students	90
5	Staff	250
6	Others & Trainees	200
Total		1558

Other general works

Reorganizing the library resources

This is a kind of major work in the library in this academic year. All the library racks/shelves are checked out manually with each subject and verified with the accession number as well as subject headings.

Weeded out

Some old news papers (2 years papers) and magazines from the library have been weeded out.

Book wrappers

Library staffs have identified 200 damaged book wrappers and got corrected.

8. ADMINISTRATIVE STRUCTURE

Board of Trustees address list for the year 2016-2017

Smt. Sheela Rani Chunkath, IAS (Rtd) No. 17, Kaveri Salai, Kalachetra Colony, Besant Nagar, Chennai – 600 090. Chairman	The Secretary to Government of India Ministry of Health and Family Welfare Nirman Bhavan New Delhi – 110 108 Ph: 011-23062432 / 23061863 Member
The Secretary to Govt. of Tamil Nadu Health and Family Welfare Department Government of Tamil Nadu Secretariat Chennai – 600 009 Ph: 044-25671875 Member	The Director of Public Health & Preventive Medicine DMS Office Complex 359 Anna Salai, Teynampet Chennai – 600 006 Ph: 044-24320802 Member
The Director International Institute for Population Sciences (Deemed University) Govandi Station Road Deonar, Mumbai – 400 088 Ph: 022-25562062 / 25573943 Member	The District Collector, Dindigul District Velunachiar Compound Dindigul – 624 001 Member
The Senior Regional Director Regional Office for Health & Family Welfare (Ministry of Health & Family Welfare) Govt. of India, A-2A, Rajaji Bhawan Besant Nagar, Chennai – 600 090 Ph: 044-24919232 Member	Dr. R. Jayaraman Principal Officer-CED Trust, 54, Visuvasapuri First Street, Gnanaolivupuram Madurai – 625 016. Cell No. 9443069056 Member
Shri M.R. Rajagopalan Managing Trustee Gandhigram Trust Gandhigram – 624 302 Ph: 0451-2452326 Member	The Vice Chancellor Gandhigram Rural University Gandhigram – 624 302 Ph: 0451-2452371 Member

Dr. G. Natchiar Director (HRD) Aravind Eye Hospital Anna Nagar Madurai – 625 020 Ph: 0452- 2532653 / 4356100 Member	Shri. K. Shivakumar, Secretary, Gandhigram Trust Gandhigram – 624 302 Ph: 0451-2452326 Member
The Medical Superintendent Kasturba Hospital Gandhigram - 624 302 Member	Dr. R. KousalyaDevi Life Trustee Gandhigram Trust Gandhigram - 624 302 Special Invitee
Shri D.V. Jayaraman Partner M/s. V. Ramaswamy Iyer & Co., Chartered Accountants A-55, M.V.M. Nagar, Karur Road Dindigul - 624 001 Ph: 0451-2430744 / 2431944 Member	Member Secretary The Director, GIRH & FWT Soundram Nagar Gandhigram - 624 302 Member

EXECUTIVE COMMITTEE

Executive Committee Members' List as on 31.03.2017

S.No.	Executive Committee Member Name & Address	Status on the Executive Committee
1.	Sri M.R. Rajagopalan Managing Trustee Gandhigram Trust Gandhigram - 624 302	Chairperson
2.	Dr. R. Kousalya Devi Life Trustee Gandhigram Trust Gandhigram - 624 302	Member
3.	Dr. S. Natarajan, Vice Chancellor, Gandhigram Rural University Gandhigram - 624 302	Member
4.	Sri D.V. Jayaraman (Institute Auditor) Partner M/s. V. Ramasamy Iyer & Co., A-55, M.V.M. Nagar, Karur Road Dindigul - 624 001	Member
5.	Director GIRH & FWT Soundram Nagar Gandhigram - 624 302	Member Secretary
6.	Dr. M. Chellamuthu Teaching Assistant - DHPE, GIRH & FWT Soundram Nagar Gandhigram - 624 302	Elected Member (Teaching staff)
7.	Sri. M. Swaminathan Projectionist GIRH & FWT Soundram Nagar Gandhigram - 624 302	Elected Member (Non-Teaching staff)

The Board has constituted a Finance Committee to review the financial position of the Institute and accounting system, scrutinize the budget, analyze expenditure and suggest methods to improve the financial position of the

Institute. The Finance Committee reviews all the audited reports and suggests steps to implement them. This committee at present consists of the following members:

Finance Committee Members As On 31.03.2014

Sri. K. Shivakumar, B.Sc.,FCA.,FICWA.,DMA.(ICA) Convenor
Convenor, Finance Committee (GIRH & FWT)
Secretary, Gandhigram Trust,
Gandhigram – 624 302.

Sri. M.R.Rajagopalan Member
Member, Finance Committee (GIRH & FWT)
Secretary Gandhigram Trust
Gandhigram 624 302

Prof. Dr. R. Jayaraman, Member
Member, Finance Committee (GIRH & FWT)
Principal Officer, CED Trust,
54, Visuvasapuri 1st Street, Gnanaolivupuram,
Madurai - 625 016.
Mobile:9443069056, PH: 0452-2459109

Sri.D.V.Jayaraman, B.Com, F.C.A., Member
Chartered Accountant,
Member, Finance Committee (GIRH & FWT)
M/s.V.Ramasamy Iyer & Co.,
A55, MVM Nagar, Karur Road,
Dindigul -624 001
PH: 0451 – 2430 744

Dr. S. Seethalakshmi, MBBS, DGO, DPH, Member-
Secretary
Director
The Gandhigram Institute of Rural Health and
Family Welfare Trust
Ambathurai R.s Gandhigram P.O
Dindigul District – 624 302.

9. ANNEXURES

9.1. Participation of faculty/staff members in workshop/seminars

Name & Designation	Program details	Date	Place
Dr. S. Ravichandran, Chief, PRC	Attended the PRC-Annual Action Plan Meeting	23..03.2017 & 24..03.2017	Guwahati.
Dr. S. Ravichandran, Chief, PRC	Attended the Training of Trainers programme for the LASI survey	from 5 th October 2017 to 29 th October 2017	Lonavala
Dr. S. Ravichandran, Chief, PRC	Delivered lecture at the Anugraha college, Dindigul on the occasion of World Population Day organized by the FPAI	11 th July 2016	Dindigul
Dr. S. Ravichandran, Chief, PRC	Attended the PRC-Annual Action Plan Meeting	22..03.2017 & 23..03.2017	Guwahati
Dr. S. Ravichandran, Chief, PRC	Attended Compendium work shop	6 th & 7 th October, 2016	Trivandrum
Dr, N. Dhanabhagam, Assistant Chief, PRC	Attended the PRC-Annual Action Plan Meeting	22..03.2017 & 23..03.2017	Guwahati
Dr, N. Dhanabhagam, Assistant Chief, PRC	Attended Compendium work shop	6 th & 7 th October, 2016	Trivandrum
Mr. V. Saravanakumar, Research Investigator, PRC	Attended Training of Trainers for Mapping / Listing for LASI project	from 6 th September 2016 to 10 th September 2016	IIPS, Mumbai

Mr. M. Senthilkumar, Field Investigator, PRC	Attended Training of Trainers for Mapping / Listing for LASI project	from 6 th September 2016 to 10 th September 2016	IIPS, Mumbai
Mr. K. Ilango Samuel Peter, STO (C & M)	Resource person for the CNE workshop on <i>Advanced Educational Technology in Nursing for Quality Patient care</i> funded by Government of India and in association with Tamil Nadu Nurses and Midwives council. Presentations done on a) Micro teaching b) Selection, preparation and utilisation of Instructional media	10.6.2016	Apollo college of Nursing, Madurai
Mr. K. Ilango Samuel Peter, STO (C & M)	Resource person for the B.Ed college and gave a talk on The role of communication in teaching	21.11.2016	Lakshmi college of Education, Gandhigra m
Mr. K. Ilango Samuel Peter, STO (C & M)	Participated in the conference on Earth bag construction technology organised by Good earth Nepal foundation.	18.6.2016	Madurai

Mr. K. Ilango Samuel Peter, STO (C & M)	Participated in the Board of studies meeting for Visual communication	20.2.2017.	Gandhigra m Rural University
Smt. J. Punitha Selvi Principal, RHTTI	Conducted Tamilnadu Nurses and Midwives Council, inspection for ANM Course	27.06.2016 to 28.06.2016	Auxillary Nurse Midwife Training School, Community Health Centre, Theni District
Smt. J. Punitha Selvi Principal, RHTTI	External examiner for practical examination for PGDSI course students	11.11.2016 to 12.11.2016	Sanitation Faculty department , GRI, Gandhigra m
Sri. R. Ganesan SSO	Training on Total Sanitation program for trainer and Animator under Swatch Bharat (UNICEF)	15.08.2016 to 20.08.2016	Coimbatore
Smt. K. Alageswari PHNO	Attended Refresher training on Curriculum implementation / Institute Management System - Updation	20.02.217	Tamilnadu and midwives council, Santhome, Chennai

Smt. K. Alageswari PHNO	Attended Continuing Nursing Education on “Educational Technology” workshop Conducted by Government of India and Tamilnadu Nurses & Midwives Council.	08.06.2016 to 14.06.2014 (1 week)	Apollo College of Nursing, Madurai
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**9.2. SANCTIONED STAFF STRENGTH (2016-2017)
(GOVT. GRANTS AND INSTITUTE FUNDS)**

I. GOVERNMENT GRANT

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.1. CTI-Central Unit				
1.	Director	1	1	0
2.	Senior Training Officer (Mgmt.)	1	0	1
3.	Senior Technical Officer (Comm. & Media)	1	1	0
4.	Statistical Assistant	1	1	0
	Total	4	3	1
1.2. CTI-Diploma in Health Promotion & Edn.				
5.	Professor in Health Education	1	0	1
6.	Lecturer in Health Education (Medical)	1	0	1
7.	Lecturer in Health Education (Non-Medical)	1	0	1
8.	Lecturer in Behavioural Sciences	1	1	0
9.	Teaching Assistant	4	3	1
	Total	8	4	4

1.3. CTI-Health & Family Welfare Trg. Centre				
10.	Principal	1	0	1
11.	Medical Lecturer-cum-Demonstrator	1	0	1
12.	Social Science Instructor	1	0	1
13.	Health Education Instructor	1	1	0
14.	Statistician	1	1	0
15.	Public Health Nurse Instructor	1	1	0
16.	Health Education Extension Officer	1	1	0
17.	Senior Sanitarian	1	1	0
18.	Senior Health Inspector	2	2	0
	Total	10	7	3
1.4. CTI-Administrative Unit				
19.	Administrative Officer	1	0	1
20.	Office Superintendent	1	1	0
21.	Senior Accountant	1	1	0
22.	Stenographer	1	0	1
23.	Steno-Typist	3	3	0
24.	Librarian	1	1	0
25.	Upper Division Clerk	2	2	0
26.	Artist-cum-Draftsman	1	1	0
27.	Projectionist	1	1	0
28.	Store Keeper-cum-Clerk	1	1	0
29.	Clerk-cum-Typist	2	2	0
30.	Driver	6	2	4
31.	Attender	2	2	0
32.	Peon-cum-Daftry	1	1	0
33.	Domestic Staff	3	3	0
	Total	27	21	6

Sl. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
2. Regional Health Teachers Training Institute				
34.	Principal	1	1	0
35.	Public Health Nursing Officer	3	1	2
36.	Senior Sanitarian Officer	1	1	0
37.	Health Education Officer	1	0	1
38.	Lower Division Clerk	1	1	0
39.	Steward – cum-clerk	1	1	0
40.	Attender	1	1	0
41.	Domestic Staff	2	2	0
42.	Cook	1	1	0
	Total	12	9	3
3. Population Research Centre				
43.	Chief	1	1	0
44.	Assistant Chief	1	1	0
45.	Research Officer	2	0	2
46.	Research Investigator	4	2	2
47.	Field Investigator	4	3	1
48.	Data Assistant	4	3	1
49.	Documentalist	1	0	1
50.	Office Superintendent	1	0	1
51.	Assistant	1	0	1
52.	Upper Division Clerk	1	1	0
53.	Lower Division Clerk	1	1	0
54.	Driver	1	1	0
55.	Attender	1	1	0
	Total	23	14	9
Grand Total		84	58	26

II. INSTITUTE FUND

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Accounts Officer	1	0	1

III. BUILDING MAINTENANCE FUND

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Electrician-cum-Pumpman	1	1	0

IV. MESS

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Cook	1	1	0

RECRUITMENT DETAILS FOR THE YEAR 2016-2017

S.No.	Name	Designation	Date of Joining
1.	Ms. S. Varalakshmi	Documentalist	30.06.2016
2.	Sri. S. Palanichamy	Office Superintendent	30.09.2016

RETIREMENT DETAILS FOR THE YEAR 2016-2017

S.No	Name	Designation	Date of retirement
1.	Sri. G. Rajasekaran	Senior Health Inspector	30.06.2016
2.	Sri. K. Vellaithurai	Attender	30.06.2016
3.	Sri. P. Srimurugan	Senior Accountant	31.08.2016
4.	Smt. D. Usharani	Office Superintendent	31.03.2017

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