

# **Program Book**

**Community Service Project**

**AP STATE COUNCIL OF HIGHER  
EDUCATION**

**(A STATUTORY BODY OF GOVERNMENT OF ANDHRA PRADESH)**



### Student's Declaration

I, Am I Goutham, a student of Community Service U. Program, Reg. No. 120130805208 of the Department of Statistics Mrs. A.V.N. College do hereby declare that I have completed the mandatory community service from..... to .....in ..... (Name of the Community/Habitation) under the Faculty Guideship of Mrs. Chmalleka (Name of the Faculty Guide), Department of Statistics in Mrs. A.V.N. College College

T. Eswathami  
(Signature and Date)

### Endorsements

Faculty Guide Ch. Mallika

Head of the Department [Signature]  
Head of the Department  
Department of Mathematics & Statistics  
Mrs. A.V.N. College, Visakhapatnam

[Signature]  
Principal

PRINCIPAL  
Mrs. A.V.N. COLLEGE  
VISA KHAPATNAM

### ACKNOWLEDGEMENTS

I wish to Express my gratitude to those who extended their valuable Co-operation and contribution Towards the project.

I would like to thank my project mentor Ms. Mallika madam for her valuable time and continued assistance for the successful completion of the project.

I would also like to Express my gratitude to Ms. Mallika, Mr. Shankar Narayan Sir, Mrs. AVN College management for facilitating this project and providing his guidance through out the duration of the project.

I would also like to thank the faculty and staff of the institute, family members and my dear friends for their support to successful completion of the project.

## CHAPTER 1: EXECUTIVE SUMMARY

The community service report shall have only a one-page executive summary. It shall include a brief description of the Community and summary of all the activities done by the student in CSP and five or more learning objectives and outcomes.

In Each Executive Summary, the term "members" refers to individuals enrolled in the Sooner Care program. Sooner Care improves the health of qualified necessary benefits and services are available. Qualifying include Certain low-income children, seniors, individuals who are disabled, those being treated for breast or cervical cancer and those seeking family planning services.

The data provided in these reports may be conservative due to use of claims data members are only identified as having the select chronic condition if they sought care and had at least two or more paid claims that included a diagnosis code for the select chronic condition.

Child

members who are as years old or younger at the end of the state fiscal year.

## CHAPTER 2: OVERVIEW OF THE COMMUNITY

- About the Community/Village/Habitation including historical profile of the community/habitation, community diversity, traditions, ethics and values.
- Brief note on Socio-Economic conditions of the Community/Habitation.

Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living. Both chronic diseases such as heart diseases, cancer, and diabetes are the leading causes of death and disability in the United States. They are also leading drivers of the nation's trillion in annual health care costs.

Many chronic diseases are caused by a short list of risk behaviors.

- Tobacco use and Exposure to secondhand smoke.
- Poor nutrition including diets low in fruits and vegetables and high in sodium and saturated fats.

### CHAPTER 3: COMMUNITY SERVICE PART

Description of the Activities undertaken in the Community during the Community Service Project. This part could end by reflecting on what kind of values, life skills, and technical skills the student acquired.

The World Health Organization defines chronic diseases as 'diseases of long duration and generally slow progression.'

Common themes found in other definitions state that chronic diseases:

- have many causes but often share common risk factors.
- usually begin slowly and develop gradually over time.
- can occur at any age, although they become more common in later life.
- chronic diseases impact the health of the population as well as the sustainability of the health care system - over half of New Zealand and Labrador residents aged 12 years and older have at least one chronic disease.

## OUTCOMES DESCRIPTION

### ❖ SURVEY ON LIVING WITH CHRONIC DISEASES ❖

1. what is your chronic medical condition?

- A. Diabetes [ ]
- B. Heart attacks
- C. Cancer
- D. Asthma
- E. others.

2. How many medicines are you taking for your Condition

- A. 1-3 [ ]
- B. 4-6
- C. more than 6
- D. None right now

3. Please provide your age, gender and location in the world

- A. under [ ]
- B. 25-35
- C. 36-50
- D. over-50
- E. female
- F. male

4. How many doctors do you consult to manage your condition?

- A. one - my primary care physician [ ]
- B. 1-3 including my primary and one or two specialists
- C. more than three. It's complicated.

5. Are you habituated to drugs and alcohol?

- A. Yes to both [ ]
- B. Only to Drugs
- C. Only to Alcohol
- D. I am not habituated to either

6. Do you currently suffer from any chronic diseases?

- A. Yes [ ]
- B. No

7. Do your family members give you unsolicited advice about managing your condition?

- A. Yes [ ]
- B. No



8. In general how do you say your health is?

A. Good

B. Average

C. poor

[ ]

9. How often do you get a health check-up?

A. once in 3 months

B. once in 6 months

C. once a year

D. only when needed

E. never get it done

F. others

[ ]

10. In your opinion, at what capacity can you perform everyday activities?

A. Excellent capacity

B. Good capacity

C. Moderate capacity

D. Slightly impaired capacity

E. Completely impaired capacity

[ ]

**Describe the problems you have identified in the community**

The problem I was identified in our community is they are sugar and obesity people who are under age of 40 to 70 years. And in the community some families were not eating community in healthy food they were eating the food which gives them an unhealthy life. fried, oily, sugar foods was consuming by them and they getting health problems like mostly sugar, obesity the accurate problem. so many people not weekly or monthly health checking is not used checking her health and three drinks and poison drinks also like drugs and alcoholic etc. and also so many peoples are to infected a sugar and cancer and Asthma or diabetes etc this type of issues they are facing meeting I too faced many problems was because many of the people in our community were not answering to my questions.

Meeting with all individuals that too personality. made me to face lot of troubles in my area.

They were not keeping money for the food which gives them nutrition. They are all eating of junk food, oily foods, lot of sweets etc.

Short-term and long term action plan for possible solutions for the problems identified and that could be recommended to the concerned authorities for implementation.

### Short - TERM Action plan:

1. Choosing of outside junk food for a week (or) a month continuously then they will eat healthy food which includes, vegetables, fruits etc.
2. Every family should be provided awareness on benefits of healthy foods.
3. Every family should change their idyltlogs and behaviours on the food they consuming daily.
4. Every they should be drink atleast 2 to 3 liters of water for better digestive system.
5. They were many of people who didn't consume healthy food so, we have to suggested them and make realize about the healthy food which will make their life healthy.

### LONG - TERM ACTION PLAN:

1. There should be know which food is healthy for our body.
2. There should be a separate course on food habits.
3. Every family should be get a scientific knowledge about food to eat.

**Description of the Community awareness programme/s conducted w.r.t the problems and their outcomes.**

I learned to many classes in the program of community service conducted by the college management.

I learned to speak straight-forward and Tamil <sup>facing</sup> ~~factory~~ with other people.

I learned to give proper explanation on particular topic to other.

I learned the way of interacting with other and communicating and get-to know the problems which they are facing. And I learned the way of preparation of documentation on the problem of people.

I learned to be stay with patience when others are not answering to my community service project questions.

The main problem of the community is to be maintain a health diet plane - They are all not having an healthy diet.

If they eat an unhealthy food then they will get unhealthy.

Through this program all are noticed that consuming / Eating of healthy food gives us healthy life. And this program teach every one to be healthy.

**Report of the mini-project work done in the related subject w.r.t the habitation/village.**

A mini-project work in the related subject w.r.t the habitation/village. (For ex., a student of Botany may do a project on Organic Farming or Horticulture or usage of biofertilizers or biopesticides or effect of the inorganic pesticides, etc. A student of Zoology may do a project on Aquaculture practices or animal husbandry or poultry or health and hygiene or Blood group analysis or survey on the Hypertension or survey on the prevalence of diabetes, etc.

The Report shall be limited to 6 pages.

Abstract

As non-communicable or chronic diseases are a growing threat to human health and economic growth, political stakeholders are aiming to identify options from improved response to the challenges of prevention and management of non-communicable diseases. This paper is intended to contribute ideas on personalized chronic disease management which are based on experience with one major chronic disease, namely diabetes Mellitus.

Diabetes provides a pertinent case of chronic disease management with a particular focus on patient self-management.

Personalizing the management of diabetes according to the patient's individual profile can help in improving therapy adherence and treatment outcomes. This paper suggests using a six-step cycle for personalized diabetes (self-management and collaborative use of structured blood glucose data). E-health solutions can be used to improve process efficiencies and allow remote access.

Decision support tools and algorithms can help doctors in making therapeutic decisions based on individual patient profiles. Available evidence about the effectiveness of the cycle's constituting elements.

Justifies expectations that the diabetes management cycle as a whole can generate medical and economic benefit. Chronic non-transmissible diseases represent a major problem in the world, being the main cause of death today. Diabetes Mellitus is one of the most worrying chronic.

## Introduction

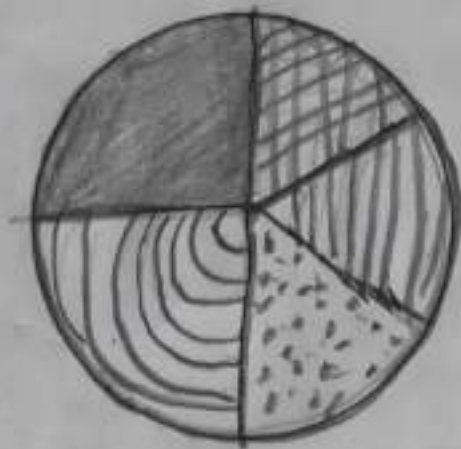
The concept of Stigma was initially introduced as a relationship between an attribute between an attribute and a stereotype and its a reference to negative attributes, weakness or disadvantage. In other words, the stigmatized person is considered as possessing a different characteristic a different characteristic from those who are accepted in office society and is treated differently by the community, which may have misinterpretations and inaccurate beliefs about the stigmatized person.

over the years, the word stigma became related to degradation, and in related to degradation and in general use, stigma refers to a brand or mark that turns a person into a different one because of its negative connotation. Some suggested a causal correlation between epilepsy and inadequate feelings and behaviors, such as hostility, treated differently by the community which may have stigmatized person.

## My Survey reports

### • AGE GROUP

-As per my observation, in my village 3 members are 20 office - 30 age group 5 members are 30-40 age group, 10 members are 40-50 age group, 4 members are 50-60 age group, 3 members are 60-70 age group, 2 members are 70-80 age group and 1 members are 80-90 age group And the major age group is 40-50 and minor age groups are 70-80 and 80-90

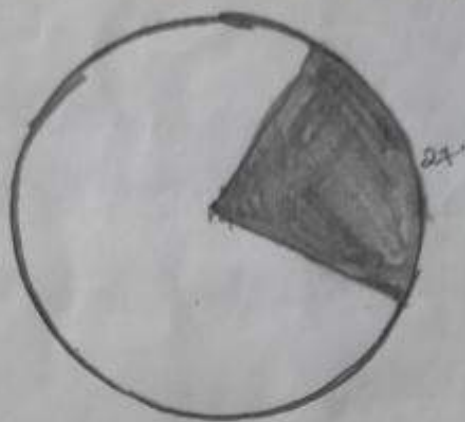


-Above pie chart indicates that in 30 households that in 30 households they secure 35% of 40-50 age group 17.5% of 30-40 and 50-60 age groups, 10% of 20-30 and 60-70 age groups, 5% of 70-80 and 80-90 age group.



## GENDER

-As per my observation, in 30 households 3 members are male and 27 members are female.



-According to pie chart, 25% of male candidates and 75% of female candidates.

## LIFE STYLE

-As per my observation in 30 houses, 29 houses are rented, and 1 house is owned. Majority people have rented houses.

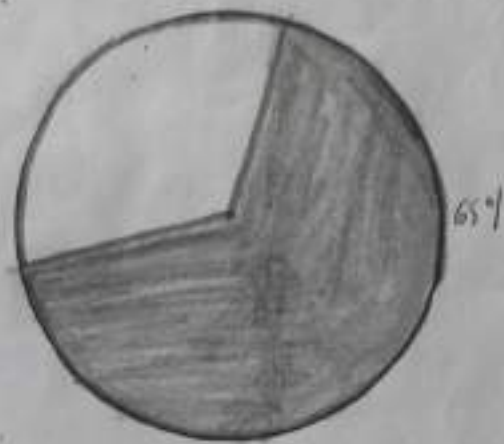


-According to pie chart, in 40 households 90% of own houses, 7.5% of rented houses and 2.5% of others.

Survey on living with Chronic diseases  
there your chronic medical condition are  
Diabetes, heart attacks, cancer, Asthma,  
others. they medicines are there are taking  
for your condition more than and 6  
or none right now. Many doctors do you  
consulted to manage your condition. one - my  
primary care physician and 6-8 including  
my primary and one or two specialists  
more than three. It's complicated. they  
have only habituated to drugs and  
alcohol only to Alcohol. Do you currently  
suffer from any chronic diseases yes.  
family members give you unsolicited advice  
about managing your condition you are  
employed. what are issues at work that  
challenging unsympathetic co-workers boss  
not enough paid sick leave I feel I need to  
hide my symptoms, is I am having a bad  
day inflexible schedule having good  
physical health several day.

## HEALTH DISEASES :-

-As per my survey, in 30 households 23 families health condition good, families condition good, families are suffering from blood.



-According pie chart. in 40 households 65% of often do you have trouble taking medicines the way you have been told to take them. Some times I take them as prescribed any I do not have to take medicine. I seldom take them as prescribed. Totally physically impaired. then until severely physically impaired. In general how do you say your health is good. if you often do you get a health check-up once a year, take medication for your long term illness, disability & medical condition.

## CHAPTER 6: RECOMMENDATIONS AND CONCLUSIONS OF THE MINI PROJECT

Diabetes is a slow killer with no known curable treatments. However, its complications can be reduced through proper awareness and timely treatment. Three major complications are related to blindness, kidney damage and heart attack. It is important to keep the blood glucose levels of patients under strict control for avoiding the complications. One of the difficulties with tight control of glucose levels in the blood is that such attempts may lead to hypoglycemia that creates much worse complications than an increased level of blood glucose. Researchers now look for alternative methods for diabetes treatment. The goal of this paper is to give a general idea of the current status of diabetes research. The author believes that diabetes is one of the highly demanding research topics of the new century and wants to encourage new researchers to take up they.





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