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⑤	⑥
IC - AA (200)	
IB - LSc-I (TRK)	
IB-LSc-IV Aad (TRK) AA	Dr. Inter (M) SH
Dr. Inter - M (Gf) B. Com (A) G-IP - (TRK)	
L (AA) Dr. Inter (SH) Com - (B) -IB - TRK	
AA (200)	Dr. Inter (SH) (M)
Dr. Inter (M) SH LSc-IP	Dr. Inter (M) A. A.

A. Archana  
(H.O.D. Dept.  
Zoology)

**SURVEY ON OPRAL HYGINIC USED BY PEOPLE AT  
BHEEMUNIPATNAM AND GOLLALAPALEM AREA**

BY  
**MADHURI GOLAGANI**  
REGD.NO.: 720130805239



Estd : 1860

**PROJECT WORK SUBMITTED TO MRS. A.V.N COLLEGE,  
AFFILIATED TO ANDHRA UNIVERSITY, VISAKHAPATNAM FOR  
THE PARTIAL FULFILMENT OF DEGREE OF  
BACHELOR OF SCIENCE**

**2020 - 2023**

## DECLARATION

I, **MADHURI GOLAGANI**, Student of II B.Sc – C.B.Z, Mrs. A.V.N College, affiliated to Andhra University here by declared that this project entitled “ **Survey on ORAL HYGANIC USED BY PEOPLE AT BEEHMUNIPATNAM AND GOLLALAPALEM area**” is a genuine work carried out by me under the guidance of **Dr.A.ARCHANA**, Lecturer in Zoology, Mrs.A.V.N College, Visakhapatnam, Andhra Pradesh. Furthermore, this project work was not submitted to any other institution or University for awarding any Degree.

DATE:

PLACE: Visakhapatnam

Name & Signature of the student

*Gr. madhuri*

G. madhuri  
III-year  
BSC (C.B.Z)

# Program Book

## Community Service Project

AP STATE COUNCIL OF HIGHER  
EDUCATION

(A STATUTORY BODY OF GOVERNMENT OF ANDHRA PRADESH)



Program Book  
for  
Community Service Project

Name of the Student: MADHURI GOLAGANI

Name of the College: Mrs. A.V.M college

Registration Number: 720130805239

Period of CSP: From: 01/10/22 To: 15/12/22

Name & Address of the Community/Habitation: Bheemunipattanam, Gollapudi



*Instructions to Students for Community Service Project*

*KIASSI JAKI THE KATAKAS (KATAKAS) TO Community Service Project (CSP) IN THE HABITATS OF AN DATA (KATAKAS) OF HIGHER EDUCATION (KATAKAS)...*

Link  
<https://apschs.ap.gov.in/Pdf/Guidelines%20for%20Students%20for%20Community%20Service%20Project.pdf>

1. It is mandatory for all the students to complete 2 months' (60 days) of Community Service Project as a part of the 15 month mandatory course as a part of the job training.
2. Consider yourself as a committed volunteer in the community/habitation.
3. Every student should identify the village/community/habitation for Community Service Project (CSP) in consultation with the College Principal/An authorized person nominated by the Principal.
4. Report to the community/habitation as per the schedule given by the College. You must make your own arrangements of transportation to reach the community/habitation.
5. You will be assigned with a Faculty Guide from your College. He/She will be creating a WhatsApp group with your fellow volunteers. Post your daily activity done and/or any difficulty you encounter during the programme.
6. You should maintain punctuality in attending the CSP. Daily attendance is compulsory.
7. You are expected to learn about the community/habitation and their problems.
8. Know the leaders and the officials of the community/habitation.
9. While in project, always wear your College Identity Card.
10. If your College has a prescribed dress as uniform, wear the uniform daily.
11. Identify at least five learning objectives in consultation with your Faculty Guide. These learning objectives can address:
  - Information about the community, including the realities and problems of the society.
  - Need for creating awareness on socially relevant aspects/programs.
  - Acquiring specific Life Skills.
  - Learning areas of application of knowledge and technologies related to your discipline.
  - Identifying developmental needs of the community/habitation.



Certificate from Official of the Community

This is to certify that P. Karaka Mahaling (Name of the Community Service Volunteer) Reg. No 7212001028 of Sri V. L. N. S. Govt. College (Name of the College) underwent community service in Gallapalem (Name of the Community) from Bheeruli to Gallapalem

The overall performance of the Community Service Volunteer during his/her community service is found to be Good (Satisfactory/Good).

P. Karaka Mahaling  
Authorized Signatory with Date and Signature



## 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

### \* Habitation :-







- ⇒ Basic demographic information for every household member
- ⇒ main economic activities for individuals age 10 and older
- ⇒ school enrolment status and educational attainment of every household member, age 5 and older.
- ⇒ Agricultural practices, output and sales
- ⇒ Livestock holdings, losses, and sales.
- ⇒ Income from employment or small businesses
- ⇒ household nutrition
- ⇒ Food security.

### \* Socio-Economic conditions :-

The main sources of income to villages are agricultural, cattle rearing and daily waged labour. only 3 to 4 members are in govt and private dignified jobs only 5% of villages are such and 88% are middle classed and 7-6 of people are still in poor stage from the last five years nearly 10% of villages were migrated to towns for livelihood.



### ACTIVITY LOG FOR THE SECOND WEEK

DAY & DATE	BRIEF DESCRIPTION OF THE DAILY ACTIVITY	LEARNING OUTCOME	Person In-charge Signature
Day - 1	create a programme about the <del>daily</del> <sup>activity</sup>	we learn the skill development in the an project	
Day - 2	Prepare the questionnaire in computer	Achieved system skills	
Day - 3	All collected data was written in the questionnaire papalshet	written skills	
Day - 4	Estimated the problems they are facing in the oral hygienic procedure	mind thinking	
Day - 5	Discuss the problems that facing community with my friends	Interaction	
Day - 6	After that we have decided to tell the advantages of oral <sup>oral</sup> <del>recrim</del>	critical thinking	



WEEKLY REPORT

WEEK - 2 (From Dt. 11/12/2020 to Dt. 17/12/2020)

Objective of the Activity Done:

Communication Skills in the society

Detailed Report:

After the convection of data from houses in 1<sup>st</sup> week in prepared questionnaire in computer regarding covid-19 than all collected data was written in questionnaire sheet than analyse who are clean and oral hygienic where did age group have more teeth clean? These who have not teeth clean after that I & my friends are analyze the problems facing the illiterate people and community facing regarding covid-19 oral hygienic procedure.

We search the remedies for this problem and discuss which my friends and note down in the book. Then we have decided that tell that advert-ages to the community Bheemnipatanam (Gollapalem) for their future.

Oral hygienic are very usefull for killing diseases especially corona in the year of 2020-21 many people were died due to the covid-19 virus. than I get part invented in village oral hygienic and relates to the Bheemili our parliament market Dr. Divyesh mandra. The Indian oral care market is worth ₹15,000 CR comprising of toothpaste, toothbrush, tooth powder, mouth wash, and denture care. for all people without paying any fees it is very greatful decision to poor people

\* Any dental treatment they follow?  
NO

\* Are they any tobacco/betel nut  
YES

\* What is their tooth condition?  
bad

\* Do they consume tobacco products and paan  
YES

\* Do you feel bad breath?  
YES

\* Do you eat gutkha and paan masala?  
YES

\* Oral concerns?  
NO

\* Do you brush your teeth with water after each meal and  
brush?  
NO

\* Do you use mouth wash?  
NO

\* How would you rate your overall oral health?  
very poor



## Questionary



Health and Hygiene : oral Hygiene

Name :- G. Ramu

Gender :- male

Age :- 44

Occupation :- Mill

Do you know about the importance oral health?

If yes from whom. G. Ramu

Do you brush your teeth daily?  
once

What type of material you use to clean teeth?  
brush tooth

Do you have bleeding gums?

NO

Are they regularly consumed?

Tea

Do you have tooth sensitivity?

NO

Do you have cavity, spoiled tooth?

Yes one

Do you have teeth loss?

one

How often you visit dental doctor?  
yes three times

\* Any dental treatment they follow  
yes

\* Are they any smokers & alcohol drinker  
NO

\* What is there tooth condition good  
Good

\* Do they consume tobacco products and paan  
NO

\* Do you feel bad breath?  
NO

\* Do you eat gutkha and pan masala?  
NO

\* Oral cancer?  
NO

\* Gargle your teeth with water after each meal  
and brush

\* Do you use mouthwash  
NO

\* Do you use tongue cleaner?  
NO

\* Do you use tooth picks?  
NO

\* How would you rate your overall oral health?  
Good



Question  
Health and

How about it  
If yes from whom

\* Do you brush your teeth  
once

\* What type of material do  
brush tooth

\* Do you have bleeding gums  
NO

\* Are they regularly consume  
Tea

\* Do you have tooth sensitive  
NO

\* Do you have cavity, spoiled  
yes - one

\* Do you have teeth loss  
one

\* How often you visit dentist  
yes. Three times



\* Do you feel bad breath? (yes)  
yes

\* Do you eat gutka gutkha and pan masala?  
no

\* Do you have oral concerns?  
no

\* Do you brush your teeth with water after each meal and brush?  
no

\* Do you use mouthwash?  
no

\* Do you use <sup>tongue</sup> tongue cleaner?  
yes

\* Do you use tooth picks?  
yes

\* Do you think teeth arrangement proper?  
yes

\* How would you rate your overall oral health?  
poor.



if yes  
do you  
only  
what type  
Neem  
do you  
no  
like they  
sweets  
do you  
yes. one  
do you  
yes.  
do you have  
3 teeth.  
How often





- \* Do they follow treatment they follow?
- \* All they any smokes/alcohol/drinks?
- \* Do they consume tobacco products and pan (No).
- \* Do you feel bad breath?
  - Yes
- \* Do you eat gutka and pan masala?
  - No
- \* Do you brush water after each meal and brush?
  - No
- \* Do you use mouthwash?
  - No
- \* Do you use tongue cleaner?
  - Yes
- \* Do you use tooth picks?
  - Yes
- \* Is your teeth arrangement proper?
  - Yes
- \* How would you rate your overall oral health?
  - Poor

Health

- Do you know  
If yes.
- Do you brush  
what type
- Do you have  
Are they
- Do you have
- Do you have
- Do you have  
how often

\* Any dental treatment by follow  
yes

\* Are you very conscious about diabetes  
no

\* what is your tooth condition  
good

\* Do you consume tobacco products, and pan  
no

\* Do you feel bad breath  
good

\* Do you eat gujcha and pan masala?  
no

\* Oral cancers?  
no

\* Goggles you teeth with water after each meals and  
brushes  
no

\* Do you use mouthwash?  
no

\* How would you rate your overall oral health?  
good



Health

ow ab

if yes

no you hand

How often do

what type

Do you know

Are they do

Do you be

Do you h

Do have

How often





Area	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
...	...	...	...	...	...	...	...	...	...	...	...	...	18
...	...	...	...	...	...	...	...	...	...	...	...	...	20
...	...	...	...	...	...	...	...	...	...	...	...	...	10/12

Health ...

Name: Rombabu  
 Gender: male  
 Age: 42  
 Occupation: 2<sup>nd</sup> class  
 Health: ...

How about the importance of oral health?  
 If yes, how often Rombabu: yes

Do you brush your teeth daily?  
 yes once

How often do you brush your teeth?  
 NO

What type of material you use to clean teeth?  
 NO

Do you have bleeding gums?  
 yes

Are they regularly consumed soft drinks?

Do you have tooth sensitivity?  
 yes

Do you have cavity, spoiled tooth?  
 yes

Do you have tooth loss?  
 yes

How often do you visit dental doctor?  
 NO

\* Any dental treatment they follow

NO

\* Are they any tobacco/tobacco products

YES

\* What is their teeth condition  
very bad

\* Do they consume tobacco products and pan

YES

\* Do you feel bad breath?

YES

\* Do you eat gutika and pan masala

YES

\* What tobacco?

NO

\* Do you brush your teeth with tooth brush after each meal and  
brush?

NO

\* Do you use mouthwash

NO

\* How would you rate your overall oral health?  
very poor



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 50-59  
 LSC-V



and

Evaluation by the Person in-charge in the Community / *Handwritten*

Student Name: *Golagani, modhuni*  
 Registration No: *720130205239*  
 Period of CSP: From *01/07/22* to *15/08/22*  
 Date of Evaluation: *15/08/22*  
 Name of the Person in-charge: *A. Anchan*  
 Address with mobile number: *967641846*

Please rate the student's performance in the following areas:

Please note that your evaluation shall be done independent of the Student's *etc.*

Rating Scale: 1 is lowest and 5 is highest rank.

Sl. No.	Criteria	1	2	3	4	5
1)	Oral communication					✓
2)	Written communication					✓
3)	Participation					✓
4)	Interaction ability with community					✓
5)	Positive attitude					✓
6)	Self-confidence					✓
7)	Teamwork					✓
8)	Work Plan and organization					✓
9)	Professionalism					✓
10)	Creativity					✓
11)	Quality of work life					✓
12)	Time Management					✓
13)	Engagement in the Community					✓
14)	Achievement of Desired Outcomes					✓
15)	OVERALL PERFORMANCE					✓

*G. S. Singh*  
 Signature of the Supervisor

Date: