



Bharatiya Bhatke Vimukt Vikas va Sanshodhan Sanstha's  
**YASHWANTRAO CHAVAN SCHOOL OF SOCIAL WORK**  
**SATARA, MAHARASHTRA**  
Affiliated to Shivaji University, Kolhapur

BEST PRACTICE 2020-21

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**BEST PRACTICE #1**

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**TITLE OF THE PRACTICE: STUDENT VOLUNTEERISM**

**1. The context**

YCSSW has undertaken different COVID response activities during the pandemic period. It was in such a condition that poor families in remote area had left with nothing to survive in the absence livelihood. The desire to help this people made the institute to link with alumni working with different organization and started distributing dry ration kits to the poor families and also fulfilling the needs of PHCs and civil hospital required for treating the COVID patients. To do all these activities there was a high requirement of manpower. In this context it was kept in front of the students and consequently 80 students volunteered for fulfilling the manpower requirement.

**2. Objectives of the Practice:**

1. To develop volunteerism spirit among the students.
2. To fulfill the manpower requirement for covid response activities.
3. To expose the students to the field realities
4. To inculcate management skills among the students
5. To develop creativity and rapid response to the difficult situation

### 3. Practice

The volunteer students were given training for each activity and get involved in the covid response activities. In each subsequent activities the need of instruction and training have come down. Some of the villages were very interior and there were no proper transport facilities. Volunteers had to put lots of physical work and they had to report early in the morning at 5 am and reached back late in the evening. Due to lack of funds and remoteness of villages they had to bring eatables from home. Volunteers were involved in identifying beneficiaries and distributing dry ration kits to the poor families. They have distributed ration kits to 7000 families in Satara district. They were able to use their social work skills during these activities. District administration and funding agencies appreciated their systematic approach in coordinating the activities without any supervision. This inculcates the values of responding to the needs of humanity.

**Obstacles:** Initially the students were reluctant to come forward due to the fear of Corona. Due to lack of funds students had to bring the eatables for breakfast and lunch from home early in the morning at 5am.

### 4. Impact:

This practice has helped the students to understand the needs and problems of the poor families due to lack of livelihood. They have become more empathetic to the needs of the people and learned fund raising, networking, time management, management skills. It was also observed that the volunteers placed for internship with various paganizations were appreciated by the organization for their performance

### 5. Obstacles:

Initially it was not easy for the students to tell or discuss the issues freely. But, later, once they gained confidence, they shared the matters easily.

### 6. Resources Required

1. Transportation

2. Covid safety measures
3. Funds
4. Manpower

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## **BEST PRACTICE :2**

**1. Title of the practice:** Tele-counselling during Covid pandemic situation.

**2. The context**

In December 2019 there was the inception of covid-19 virus from China as the time passed it had spread from country to another and almost within 5 to 6 months it engulfed almost whole world. Every country had got almost lakhs of people infected due to this virus. Like other countries this virus also reached India in March 2020 and it started spreading from one state to another. In Maharashtra also day by day the situation became worst in which Satara District came up with very high number of cases as compared to other districts from Maharashtra. Everyone was under very big threat, the people who got infected and their families, relatives were in a depressed state of mind. They were not knowing about the symptoms after getting infected how the treatment they should take, which type of care they should take, how the others can be protected, lot of questions were in front of the people. A fearful environment was there and in addition to it, there was the imposition of lockdown. Initially people were hesitating to bring any material from outside many rumors in regarding the virus, it's spreading mechanism, mortality rate, its symptoms were prevailing in the society. District administration was on their toes to serve/ cater the health care needs of the society but these all efforts were insufficient. There was an urgent need of intervention of private partners to help the society to cope up the situation. So, in this scenario, being a social work institution, we thought of helping out the district administration as well as the society. With the permission of district administration, the service of tele-counselling to the home isolated patients and their family members.

**2. Objectives of the practice**

1. To provide information about Covid appropriate behaviour.
2. To administer the use of thermometer and Pulse oxymeter.

3. To assist Covid infected patients to cope up with the trauma situation.
4. To counsel and assist the patients and their family members to manage physical condition.
5. To give people grief counselling those who lost their near and dear ones.

### **3. The Practice**

We collected the list of the Covid infected patients who were in home isolation from health officials and from district Collector office Satara. Simultaneously we also short listed the students from our college who were interested in this tele-counselling. After that we had arranged a small training session for these students, which were coordinated by the office of district health officer. After the training we allotted the patients to the respective students and they were given responsibility of tele-counselling till the completion of period of 14 days of isolation of respective patient. The students were also provided with the phone numbers of the respective patients and were asked to call the patients twice a day to know about their health status, to clarify the doubts in regard to the diet, symptoms, treatment about the disease. Also they were asked to give information about the things to be done by the patient for early recovery from the disease. In this the use of homemade remedies, immune boosters, 6 minute walk test for measuring oxygen saturation, use of Yoga were covered. The students were asked to maintain all records and to provide it to concern health officials for deciding further way of treatment. Also students were asked to have a dialogue with the family members to clarify the doubts in regard to the health condition of the patient and the care to be taken by them. The doubts which in case the students were not able to clarify were conveyed to the concern health official and get back to patient and the family member.

### **4. Obstacles faced if any and strategies adopted to overcome them**

1. Many times it was not possible to have dialogue with the patients as the mobile phones were with the family members or the relatives. So we had to convince them to keep at least one mobile phone with the patient so that we can have a direct dialogue with him and know the exact health condition of the patient.

2. Some of the families were having poor socio-economic condition so they were having only one mobile phone which was supposed to be share with the patient. Because of this there was a chance of other people to get infected. To overcome this barrier, we had asked them to wear compulsorily N-95 mask to have a surface sanitizers and washing hands compulsorily.

3. Patients as well as their family members were asking the questions about the cost of treatment, the tests to be done in the laboratories, their frequencies, is it essential to be in quarantine even though no symptoms are there, how many days to stay in quarantine, course of medicine, availability of medicine etc. We conveyed all these problems to the health officials as well as the district administrators and asked them to help the patients to get their doubts clear.

4. Few patients had registered wrong phone numbers due to which getting communication with them itself was a big problem. So we conveyed such cases to the government officials after which the concern government officials had done the home visits and had gone for updating the phone numbers.

### **5. Impact of the practice**

We were able to cater /serve the health care needs of more than 300 plus patients from in and around Satara. It had helped the patients as well as the family members to cope up effectively with this traumatic situation. It had helped to boost their psychology and think positively to come out of this distressful situation. It had helped them to get their doubts clarified in regard to the treatment and the care required to fight against this disease. It also had helped to know about the precautionary measures as well as the Covid appropriate behaviour. It had helped the patients as well as the family members to get their message conveyed to district as well as health officials which helped effectively manage the further treatment. Many patients were not aware about using pulse oximeters, thermometer and they were enabled through this tele-counselling. People were also able to get assistance in regard to tests required to be done to get exact and proper treatment as per the symptoms in the reports. Many people had given the feedback that they were really feeling happy and comfortable and also it has reduced their tension. This tele-counselling had helped to reduce the workload of health officials at least to some extent. It also had helped to know about the current health condition of the concern patient. Simultaneously the students also got a hands-on experience of how to handle the pandemic situations, to work with government officials, to build the skills in regard to communication counselling, relationship building, etc.

### **6. Resources required:**

1. Mobile Phones
2. List of Patients

3. Contact numbers of Officials

4. IEC material