



**Report on  
Cancer Awareness & Early Detection Project  
For Community Residing in  
Rural Areas of Nandurbar District of Maharashtra  
Implemented by  
Aashray-Durg Bahu-Uddeshiy Samajik Sanstha**



A Model developed for Doorstep Healthcare Delivery, Cancer Awareness & Breast Cancer Screening Project for Tribal Areas of Maharashtra

Supported By

**Johnson Controls India Pvt. Ltd.**

Report by

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## **Background**

Cancer is a commonly used generic term for a large group of diseases that can affect any part of the human body. Other terms used are malignant tumours and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs; the latter process is referred to as metastasis. Metastases are the primary cause of death from cancer.

## **The problem**

Cancer is a leading cause of death worldwide, accounting for nearly 10 million deaths in 2020. The most common in 2020 (in terms of new cases of cancer) were. Many are not diagnosed at early stage and remain untreated due to various reasons especially in remote villages.

## **About Organisation**

“Aashray-Durg” Bahu-Uddeshiy Samajeek Sanstha (Multipurpose Charitable Organization) is a Not-For-Profit, Non-Governmental Organisation, registered under Society Registration Act, 1860, in the year 2007. Since inception, this organization has been involved in various community development related charitable activities including educational development, social development, leadership development in the designated villages. Apart from this the other major area of involvement is the healthcare services for the needy and poor community rendered through medical camps, health education, community health care awareness campaigns in collaboration with likeminded organization in rural area of Maharashtra, India. “Aashray-Durg” is engaged in continuously finding out social, educational, health related issues/problems at ground level among the villages in Nandurbar and Surat District in India. This helps us to plan activities to address such needs of the community in more focused and concerted ways. We have successfully implemented some of the activities for community development in tribal villages of Navapur block of Nandurbar district.

## **Objectives of the Project**

Project aim was to render basic healthcare services to the tribal population residing in villages of Navapur block by conducting Cancer Early Detection Camps in Different locations. Locations were identified by our trustees and volunteers in association with team members. Camps were conducted with following specific objectives.

- To create awareness about early signs of all types cancer among tribal population
- To offer early detection facilities for various types of cancer including breast cancer for tribal women at doorsteps
- To Increasing chances of identifying illnesses/diseases at an early stage
- To motivate them for early and appropriate treatment
- To Educate Community for Healthy Living by means of Information, Education and Communication (IEC)
- To identify needs of community for initiating community development activities

## **Target Beneficiaries**

- The community (Women, Elderly and Youth) residing in villages or slum area will be the beneficiaries under the program.
- It aims to reach out directly to more than 2,000 (Two Thousand) individuals (Direct), covering more than 2 lakh population (Indirect) through monthly camps in various villages.
- The program specially focuses on women, children and old age people as communicable and non communicable diseases are major cause of concern in the areas.

## **Service Offered during camp**

- General Health Check up
- Promotive, Preventive Curative, and Referral health care services,
- Early detection of cancer related lesions.
- Health, Hygiene & Sanitation Education awareness for beneficiaries.
- Promotion of healthy habits among school children at camp locations.
- Promotion of self breast examination for identifying early signs of breast cancer.
- Encouraging different methods for consumption of safe drinking water.
- IEC material distribution for health awareness.
- Early detection of precancerous lesions and motivate them for treatment.
- Create Awareness about Ill Effects of Tobacco and Tobacco Product use.
- Nutritional supplements for women and children.
- Free Medication to all beneficiaries.

## **Referral Services**

- Individuals in need of specialized services are given counseling and referred to Medicare Surgical & Dental Hospital and other nearby higher centers (Government/NGO/Private) for further necessary treatment.

## **Mode of delivery of services**

Clusters were identified by trustees, Community Mobilisers and project coordinators. Camps will be arranged in association with local village representatives. Our Mobile Medical Unit Team created awareness about proposed camps well in advance by word of mouth and by using social media, posters and banners.

## **Time & Duration of Camps:**

As mentioned in project proposal we were supposed to conduct SIX (6) medical Camps in Nandurbar district; however, we could conduct SEVEN (7) in Nandurbar and ONE (1) in Palghar district. Duration from August to December 2021.

## **Monitoring and Evaluation**

Aashray-Durg Trustees, Technical Team and Core members monitored all camp activities closely by remaining present during camps. Team from Jonson Controls India Private Limited were personally present for 1<sup>st</sup> Camp at Zamanzar Dist. Nandurbar and last Camp at Vadoli, Talasari Dist. Palghar. Camp reports are submitted by Organisation.

## **Form of Support**

Jonson Controls India Private Limited supported this project under CSR initiative.

## Publicity with Co branding

Aashray-Durg has given wide publicity to the donor agency by using their Names and logos on posters, banners and in media.

## Outcome of the Activity

Since Aashray-Durg is working remote areas of Maharashtra, we intended to conduct cancer early detection camps for the communities residing in target intervention geographies. Proposal was submitted to Johnson Controls India Private Limited requesting support for conducting cancer early detection activities. We received support for conducting **SIX (6)** camps; however, we could conduct **EIGHT (8)** camps at different locations.

**Details of locations and number of beneficiaries are mentioned in following table.**

Sl. No.	Date	Location	No. of Beneficiaries	No. Pts Referred
1	11/08/21	Zamanzar, Tal. Navapur, Dist. Nandurbar (MH)	60	13
2	08/09/21	Suli, Tal. Navapur, Dist. Nandurbar (MH)	102	15
3	13/09/21	Bodara Tal. Sakri, Dist. Dhule (MH)	117	6
4	30/09/21	Bopkhle Tal. Sakri, Dist. Dhule (MH)	67	6
5	06/10/21	Waghalapada, Tal. Navapur, Dist. Nandurbar	200	35
6	20/10/21	Vadfali, Tal. Navapur, Dist. Nandurbar	201	7
7	17/11/21	Ranale, Tal. Navapur, Dist. Nandurbar	161	17
8	11/12/21	Vadoli, Tal. Talasari, Dist. Palghar	36	6
<b>Total Beneficiaries</b>			<b>944</b>	<b>105</b>

## Key Findings

1. Selected villages were remotely located. People from long distance could not visit camp sides.
2. Most of beneficiaries belongs to tribal communities.
3. Tobacco uses and smoking is commonly observed in few beneficiaries.
4. Our team could diagnose Diabetic, Hypertension, Malnutrition and skin diseases.
5. About 60% beneficiaries do not approach health care providers or health facilities for illnesses.
6. Many individuals remain untreated due to various reasons.
7. Precancerous lesions were found few individuals.
8. Those who were found with pre-cancerous lesions or Tumors were unaware about future complications.
9. Patients diagnosed were not willing to accept reality.
10. Those who were referred to higher centers for further treatment took long time to reach hospitals.
11. In-depth counselling was required for patient and relatives.
12. Few individuals diagnosed were already in advanced stage of cancer.
13. People were hesitated to visit Cancer Early Detention Camp. Therefore, event or camp was renamed as General Medical and Cancer Early Detection Camp.
14. Since villages are located in highly scattered manner, many needy could not reach camp sites on given dates
15. There is high demand from other villages for conducting similar camps in different locations.
16. Our Consolers are meeting people with precancerous and cancerous lesions periodically motivating them for further treatment.
17. Those who are in last stage of cancer, we are providing them required medication and dressing material.

## Recommendations

- ✓ More camps to be arranged other locations.
- ✓ Need in-depth and repeated counselling for those who were referred for further treatment.
- ✓ Palliative care with alternatives treatment modalities are recommended for those who cannot be treated further.
- ✓ Continuous supply of Antioxidants and vitamins highly recommended
- ✓ IEC material to be designed mentioning Ill effects of tobacco / tobacco products use and smoking on Health. So that it can be displayed at prominent places.
- ✓ Tobacco cessation program need to be implemented among young or adolescent population. This activity will help us to prevent young population from going to various addictions.
- ✓ Social Behavior Change Communication (SBCC) methods to be used for training community. Which will help community to increase health seeking behavior and this will be helpful for early detection of many diseases.



## Visuals of Camps





































## Selected Visuals of Individuals Referred for Further Treatment





**We would like to acknowledge**  
**Active Participation,**  
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**&**  
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1. Johnson Controls India Pvt. Ltd. - CSR Partner
2. NIMS' Medicare Surgical and Dental Hospital, Nandurbar - MH
3. Kailash Cancer Hospital, Goraj, Ta. Waghodiya, Dist. Vadodara (Gujarat)
4. Grace Hospital, Karanji (Khurd), Navapur, Dist. Nandurbar - MH
5. Eurasian Cancer Research Council, India / Russia
6. Eurasian Federation of Oncology, Russia
7. Dayanand Hospital, Vadoli, Tal. Talasari, Dist. Palghar - MH

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