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**Initiatives for Women
Development**

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INITIATIVES FOR WOMEN DEVELOPMENT

STEP (SUPPORT TO TRAINING AND EMPLOYMENT PROGRAM FOR WOMEN)

- STEP Programme, has been addressing special situation of poor women and women in remote areas who are not in a position to move out of their immediate surroundings and go to a formal skill centre to acquire training.

Need of the initiative

- Government of India has set an ambitious plan training 500 million individuals by 2022 which translates to training 42 million a year. For this purpose, India's vocational training infrastructure needs to be expanded to meet the diverse and many skill requirements of the population. There has been recent concern about the decline in women's workforce participation in India. Simultaneously, women have become more aspirational and are ready to contribute equally to the economy.

About STEP

- The Ministry of Women and Child Development (MWCD) has been administering 'Support to Training and Employment Programme for Women (STEP) Scheme' since 1986-87 as a 100% 'Central Sector Scheme'.
- The STEP Scheme aims to provide skills that give employability to women and to provide competencies and skill that enable women to become self-employed/ entrepreneurs.
- The Scheme is intended to benefit women who are in the age group of 16 years and above across the country including rural women.
- The grant-in-aid under the Scheme is given to institutions/ organizations including NGOs.
- Training is provided to poor and marginalized women in traditional trades which are largely in the informal sector. The programme strives to build upon the traditional knowledge of women and convert it into sustainable livelihood capacitation.
- The assistance under STEP Scheme will be available in any sector for imparting skills related to employability and entrepreneurship, including but not limited to the Agriculture, Horticulture, Food Processing, Handlooms, Tailoring, Stitching, Embroidery, Zari etc, Handicrafts, Computer & IT enable services along with soft skills and skills for the work place such as spoken English, Gems & Jewellery, Travel & Tourism, Hospitality.
- All Skill Development courses offered under the scheme framework must conform to the National Skill Qualification Framework (NSQF).

How it had worked so far?

- The guidelines were revised last in 2016, wherein the duration of training was set at 3 months and 6 months maximum, and the programme was modified to focus solely on skill development and employment.
- Currently, the scheme is implemented via partner agencies and monitored closely by the government.
- 80 percent of the payment is linked with training assessments; and only 20 percent is contingent on actual placements.
- Lodging and travel expenses of trainees are reimbursed, and an independent third party certifies the trainees, and issues certificates at the end of training.
- The implementing agencies can show proof of employment by submitting salary slips of the first few months, etc. to the Ministry.
- Beneficiaries are also provided post-placement support.
- During 2013-14 period, 31,478 beneficiaries were covered while the number stood at 30,481 in the 2012-13 fiscal.
- By providing skilling in specific trades, STEP increases women's access to employment/ self-employment opportunities and factors of production. Therefore, it is marked 'Positive' on Access.

Year	Funds Budgeted (in Cr)	Actuals/ Funds Released (in Cr)	Projects Sanctioned	Beneficiaries
2013-2014	18	7.02	14	31,478
2014-2015	18	7.4	23	30,953
2015-2016	27	11.73	95	15,133
2016-2017	30	8.86	-	18,239
2017-2018	40	2.40	-	4,200
2018-2019	5	-	-	-
2019-2020	3	-	-	-

Source: Lok Sabha members

What needs to be done in future?

- **Beneficiary Identification:** Beneficiaries under the scheme are identified by the implementation agencies on metrics such as ownership of assets, income status, etc. Data on these metrics is not readily available and information is hard to verify, making the scheme prone to leakages on this account.
- **Monitoring:** The scheme requires rigorous monitoring and places significant administrative load on the implementation agencies for submitting documents and on the government for verifying them. Requirements such as employment records/salary slips are difficult to implement, especially in economic setups that are largely informal.
- **Alignment of Incentives:** The incentives of the different actors involved in the scheme are not aligned. This may lead to suboptimal outcomes.
- **Only 20 per cent of the funding is linked to actual employment** and pay-out is contingent on submission of employment record/salary slips. Therefore, it is highly likely that beneficiaries will just get trained and not get linked with employment opportunities.
- **Budget for STEP has progressively reduced.** Even in the earlier years, the actual funds spent were much lower than those budgeted.

SURAKSHIT MATRITVA AASHWASAN (SUMAN)

- This initiative focuses on assured delivery of maternal and newborn healthcare services encompassing wider access to free, and quality services, zero tolerance for denial of services, assured management of complications along with respect for women's autonomy, dignity, feelings, choices and preferences, etc.

Need of the Initiative

- Though the country has a civil hospital in every district but still in many states the pregnant lady has to deliver the baby at home. The biggest reason for this practice is the lack of transportation and poverty. When a lady is in labor she needs to be in a clean place and needs professional help.

About SUMAN

- The Surakshit Matritva Aashwasan (SUMAN) has been launched by the Ministry of Health and Family Welfare on 10th October 2019.
- It is committed to provide Assured, dignified, respectful and quality healthcare, at no cost and zero tolerance for denial of services, for every woman and newborn.
- Under the SUMAN initiative, all Pregnant Women/Newborns visiting public health facilities are entitled to a set of free services.
- Since all services cannot be provided at all facilities, each health facility is expected to notify the service guarantee package on the basis of their current resources and service availability with measures put in place to reach 100% of the expected service standards for the level of that facility.



Key Features

- Zero Tolerance for Any Negligence
- Integrates Existing Initiatives (JSSK, PMSMA, LaQshya, FRUs, etc.)
- Respect for Women's Autonomy, Dignity, Feelings and Choices
- 100% Maternal Death Reporting and Reviews
- Grievance Redressal Mechanism
- Client Feedback Mechanism
- Awards to Champions
- Community Level Maternal Death Reporting

- Community Engagement & Mega IEC/BCC
- Inter-sectoral Convergence

Objectives of the SUMAN Scheme

Following are the objectives of the SUMAN scheme that Government aims to achieve -

- This scheme offers zero expenses access to detection and management of complications during and after pregnancy.
- Pregnant women can avail a zero expense delivery and C-section facility at public health facilities.
- SUMAN scheme ensures zero-tolerance for denial of services to children and pregnant women.
- Pregnant women also receive free transport from home to the health facility and drop back after discharge.
- This initiative facilitates respectful care with privacy and support for breastfeeding.
- Facilities such as services for sick newborns and neonates and vaccination is offered for zero cost.
- However, to gain these benefits, applicants have to fulfill certain eligibility parameters.

How the initiative had worked so far?

Till 14th December 2021, 10,010 facilities have been notified under SUMAN.

What needs to be done more?

- Health Infrastructure and healthcare facilities needs to be improved to ensure more inclusivity and easy access as still hospitals facilities are majorly concentrated in urban area.
- There has to be a strict mechanism to ensure the implementation of the initiative.
- Complaint register and redress mechanism should be ensured for its efficient functioning.
- The initiative should be linked with the Common Service Centers for making it digital.
- Digital literacy and educational literacy should be enhanced to get better results.

PRADHAN MANTRI SURAKSHIT MATRITVA ABHIYAN

- Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) was launched to provide fixed-day assured, comprehensive and quality antenatal care universally to all pregnant women (in 2nd and 3rd trimester) on the 9th of every month.

Need of the Initiative

- While India has made considerable progress in the reduction of maternal and infant mortality, every year approximately 44000 women still die due to pregnancy-related causes and approximately 6.6 lakh infants die within the first 28 days of life. Many of these deaths are preventable and many lives can be saved if quality care is provided to pregnant women during their antenatal period and high risk factors such as severe anemia, pregnancy-induced hypertension etc are detected on time and managed well.

About PMSMA

- The Pradhan Mantri Surakshit Matritva Abhiyan has been launched by the Ministry of Health & Family Welfare (MoHFW), Government of India.
- Antenatal checkup services would be provided by OBGY specialists / Radiologist/physicians with support from private sector doctors to supplement the efforts of the government sector.

- A minimum package of antenatal care services (including investigations and drugs) would be provided to the beneficiaries on the 9th day of every month at identified public health facilities (PHCs/ CHCs, DHs/ urban health facilities etc) in both urban and rural areas in addition to the routine ANC at the health facility/ outreach.
- Using the principles of a single window system, it is envisaged that a minimum package of investigations (including one ultrasound during the 2nd trimester of pregnancy) and medicines such as IFA supplements, calcium supplements etc would be provided to all pregnant women attending the PMSMA clinics.
- While the target would reach out to all pregnant women, special efforts would be made to reach out to women who have not registered for ANC (left out/missed ANC) and also those who have registered but not availed ANC services (dropout) as well as High Risk pregnant women.
- OBGY specialists/ Radiologist/physicians from private sector would be encouraged to provide voluntary services at public health facilities where government sector practitioners are not available or inadequate.
- Pregnant women would be given Mother and Child Protection Cards and safe motherhood booklets.
- One of the critical components of the Abhiyan is identification and follow up of high risk pregnancies. A sticker indicating the condition and risk factor of the pregnant women would be added onto MCP card for each visit:
 - Green Sticker- for women with no risk factor detected
 - Red Sticker – for women with high risk pregnancy
- A National Portal for PMSMA and a Mobile application have been developed to facilitate the engagement of private/ voluntary sector.
- 'IPledgeFor9' Achievers Awards have been devised to celebrate individual and team achievements and acknowledge voluntary contributions for PMSMA in states and districts across India.

Objectives of the program:

- Ensure at least one antenatal checkup for all pregnant women in their second or third trimester by a physician/specialist
- Improve the quality of care during ante-natal visits. This includes ensuring provision of the following services:
 - All applicable diagnostic services
 - Screening for the applicable clinical conditions
 - Appropriate management of any existing clinical condition such as Anaemia, Pregnancy induced hypertension, Gestational Diabetes etc.
 - Appropriate counselling services and proper documentation of services rendered
 - Additional service opportunity to pregnant women who have missed ante-natal visits
 - Identification and line-listing of high risk pregnancies based on obstetric/ medical history and existing clinical conditions.
 - Appropriate birth planning and complication readiness for each pregnant woman especially those identified with any risk factor or comorbid condition.
- Special emphasis on early diagnosis, adequate and appropriate management of women with malnutrition.
- Special focus on adolescent and early pregnancies as these pregnancies need extra and specialized care.

What is the implementation status of the scheme?

- Inspite of the massive increase in the number of pregnant women coming to institutions for delivery, till date only 61.8% women receive first ANC in first trimester (RSOC) and the coverage of full ANC (provision of 100 IFA tablets, 2 tetanus toxoid injections and minimum 3 ANC visits) is as low as 19.7% (RSOC).

- Utilization of social media for recognizing the work of volunteers would be a core strategy of the initiative.
- A virtual 'Hall of Fame' has been created for recognition of doctors who have consistently performed and achieved the desired benchmarks.
- Total Pregnant Women Examined Under PMSMA Scheme - 31,118,039



What needs to be done more?

- Maternal mortality with MMR of 167 per 1, 00,000 live births still remains high even with improved access to maternal health care services. There has to be mechanisms for monitoring and supportive supervision.
- Regular training of health care providers at different levels across the country.
- Existence of outreach platforms like Village Health and Nutrition Day should be conducted.
- The desired coverage and quality of maternal health services should be ensured.

POSHAN ABHIYAN

- Nutrition or POSHAN Abhiyaan or National Nutrition Mission, is Government of India's flagship programme to improve nutritional outcomes for children, pregnant women and lactating mothers.

Need of the Initiative

- The problem of under-nutrition is a complex and multi-dimensional issue, affected mainly by a number of generic factors including poverty, inadequate food consumption due to access and availability issues, inequitable food distribution, improper maternal infant and child feeding and care practices. The high rate of anaemia amongst women (53.1 percent in 2015-16) has a negative impact on their future pregnancies, leading to the birth of potentially anaemic children. The situation worsens when these infants also receive inadequate diets. To address the nutrition challenges of women and children government has Ministry of Women and Child Development has started POSHAN Abhiyaan.

About POSHAN Abhiyan

- It was launched on the occasion of the International Women's Day on 8 March, 2018 from Jhunjhunu in Rajasthan.
- POSHAN (Prime Minister's Overarching Scheme for Holistic Nutrition) Abhiyan directs the attention of the country towards the problem of malnutrition and address it in a mission-mode.
- It is a multi-ministerial convergence mission with the vision to ensure attainment of malnutrition free India by 2022.

- The objective of POSHAN Abhiyaan to reduce stunting in identified Districts of India with the highest malnutrition burden.
- POSHAN Abhiyaan targets to reduce stunting, under-nutrition, anaemia (among young children, women and adolescent girls) and reduce low birth weight by 2%, 2%, 3% and 2% per annum respectively. Although the target to reduce Stunting is at least 2% p.a., Mission would strive to achieve reduction in Stunting from 38.4% (NFHS-4) to 25% by 2022 (Mission 25 by 2022).
- It aims to do it by improving utilization of key Anganwadi Services and improving the quality of Anganwadi Services delivery. Its aim to ensure holistic development and adequate nutrition for pregnant women, mothers and children.
- NITI Aayog has played a critical role in shaping the POSHAN Abhiyaan.
- NITI Aayog has been entrusted with the task of closely monitoring the POSHAN Abhiyaan and undertaking periodic evaluations.
- With the overarching aim to build a people's movement (Jan Andolan) around malnutrition, POSHAN Abhiyaan intends to significantly reduce malnutrition in the three years.
- National Council under the Chairmanship of Vice Chairman, NITI Aayog and the Executive Committee under the Chairmanship of Secretary, Ministry of Women & Child Development (MWCD) also monitor the progress of POSHAN Abhiyaan.

Pillars of the Mission

- ICDS-CAS(Common Application Software)
- Convergence
- Behavioural change, IEC Advocacy
- Training and Capacity building
- Innovations
- Incentives
- Grievance Redressal

Key Features

- Mapping of various Schemes contributing towards addressing malnutrition
- Introducing a very robust convergence mechanism
- ICT based Real Time Monitoring system
- Incentivizing States/UTs for meeting the targets
- Incentivizing Anganwadi Workers (AWWs) for using IT based tools
- Eliminating registers used by AWWs
- Introducing measurement of height of children at the Anganwadi Centres (AWCs)
- Social Audits
- Setting-up Nutrition Resource Centres, involving masses through Jan Andolan for their participation on nutrition through various activities, among others.

Implementation of the Scheme

- For implementation of POSHAN Abhiyaan the four point strategy/pillars of the mission are:
- Inter-sectoral convergence for better service delivery

- Use of technology (ICT) for real time growth monitoring and tracking of women and children
- Intensified health and nutrition services for the first 1000 days
- Jan Andolan

How the Abhiyan had performed?

- As per the report of Comprehensive National Nutrition Survey (CNNS) conducted by UNICEF, prevalence of stunting, wasting and underweight among children is 34.7%, 17% and 33.4% respectively, which is an improvement and reduction from the levels reported in National Family Health Survey-4.
- The funds released for the scheme are being utilized by most of the State Governments except Odisha and West Bengal.
- Odisha has recently approved implementation of POSHAN Abhiyaan in the State and West Bengal is yet to implement the Abhiyaan.
- Osmanabad district has stood first in Maharashtra in implementing the Centre's 'poshan abhiyaan' and bringing down the number of malnourished kids as well as stunting among children. The schemes were implemented by the child and women welfare department of the Osmanabad ZP through 'bachat gats' (self-help groups), Anganwadi workers, their officers and public participation.

What needs to be done to make it a success?

- Awareness generation in the remote areas.
- Real time monitoring at every level by the officials and departments.
- Digital Literacy should be enhanced to avail benefits.
- Digital devices and infrastructure should become more accessible.
- Nutrition quality should be improved to get better results.

UDYAM SAKHI PORTAL

- The ministry of MSME, on a mission to enhance the cause of women entrepreneurship, has introduced a portal known as Udyam Sakhi portal. The facility is set to nurture entrepreneurship and create business models for economical products and services so as to empower women, thereby making them self-reliant and self-sufficient.

Need of the Initiatives

- India ranks low for women entrepreneurship, in spite of a female population which numbers to around 80 lakhs. These women are in need of revenue and modes of self-sustenance. Entrepreneurship supports them with these aspects and provides a boost to their self-esteem. The portal will facilitates these women to initiate their businesses by providing them with the essential technical support.

About the Portal

- It was launched in March 2018 to provide information regarding financial schemes, policies and programmes of the Ministry of Micro, Small and Medium Enterprises to existing/prospective women entrepreneurs in the MSME sector.
- It was developed by the Institute for Design of Electrical Measuring Instruments (IDEMI), an organisation under the Ministry of MSME.

- The portal will include information on the Prime Minister's Employment Generation Programme (PMEGP), Incubation and Enterprise Support Centre (IESC), and Market Promotion and Development Assistance Scheme (MPDA), as well as other government MSME programmes for women entrepreneurs.

The portal accords the following services through its programmatic functions:

- ▶ Entrepreneurship learning tools
- ▶ Incubation facility
- ▶ Training program for fund raising
- ▶ Providing mentors
- ▶ One-on-one investor meet
- ▶ Provide facilities for market survey
- ▶ Learning and development; be it by means of education, information, or technical assistance and training.

Significance of the portal

- It is a network for nurturing social entrepreneurship creating business models revolving around low-cost products and services to resolve social inequities.
- It seeks to encourage women entrepreneurs and to aid, counsel, assist and protect their interests.
- It also helps women to start, build and grow their businesses.
- It preserves free competitive enterprise and to maintain and strengthen the overall economy of our nation.

SWADHAR GREH

- The Scheme targets the women victims of difficult circumstances who are in need of institutional support for rehabilitation so that they could lead their life with dignity.

Need of the Initiative

- During the COVID-19 pandemic lockdown in 2020, National Commission for Women (NCW) received 23722 complaints of crimes against women, the highest in the past 6 years. Even before the pandemic, increased violence against women (VAW) between 2015-16 and 2019-20 was observed for more than seven States. If women are to be empowered and gender gaps to be bridged, addressing VAW should be at the top of policy formulation and implementation. A study highlights that a large number of survivors of VAW continue living in their abusive homes, often unaware of alternative safe spaces or not finding them viable. In line with the Sustainable Development Goals emphasising on eliminating VAW and under the purview of National Policy for Women 2016, the Swadhar Greh was initiated.

About the Scheme

- The Ministry of Women and Child Development is implementing the Swadhar Greh Scheme.
- The Scheme envisages providing shelter, food, clothing and health as well as economic and social security for these women.

Objectives of the Scheme

- Under the Scheme, Swadhar Greh will be set up in every district with capacity of 30 women with the following objectives:

- ▶ To cater to the primary need of shelter, food, clothing, medical treatment and care of the women in distress and who are without any social and economic support.
- ▶ To enable them to regain their emotional strength that gets hampered due to their encounter with unfortunate circumstances.
- ▶ To provide them with legal aid and guidance to enable them to take steps for their readjustment in family/society.
- ▶ To rehabilitate them economically and emotionally.
- ▶ To act as a support system that understands and meets various requirements of women in distress.
- ▶ To enable them to start their life afresh with dignity and conviction.

Beneficiaries

The benefit of the component could be availed by women above 18 years of age of the following categories:

- Women who are deserted and are without any social and economic support;
- Women survivors of natural disasters who have been rendered homeless and are without any social and economic support;
- Women prisoners released from jail and are without family, social and economic support;
- Women victims of domestic violence, family tension or discord, who are made to leave their homes without any means of subsistence and have no special protection from exploitation and/ or facing litigation on account of marital disputes; and
- Trafficked women/girls rescued or runaway from brothels or other places where they face exploitation and Women affected by HIV/AIDS who do not have any social or economic support. However such women/ girls should first seek assistance under UJJAWALA Scheme in areas where it is in operation.

How the scheme will help women?

It would be pursued adopting the following strategies:

- Temporary residential accommodation with the provision of food, clothing, medical facilities etc.
- Vocational and skill up gradation trainings for economic rehabilitation of such women
- Counseling, awareness generation and behavioral trainings
- Legal aid and Guidance
- Counseling through telephone

Implementing Agencies

- State Government agencies including Women Development Corporations established by the State Governments
- Central or State autonomous bodies
- Municipal Bodies
- Cantonment Boards
- Panchayati Raj Institutions and Co-operative institutions
- Departments of Women and Child Development/Social Welfare of the State Governments which may construct Swadhar Greh and run them on their own or lease them to organization(s) having requisite experience for such period as deemed fit, for managing the operations under this scheme
- Public Trusts registered under any law for the time being in force

- Civil Society Organizations such as NGOs etc. having proven track record of working in the fields of women's welfare/social welfare/ women's education subject to the condition that such organization is registered under the Indian Societies Registration Act, 1860 or any relevant State Act;

How the scheme is working so far?

- As on December 2020, there were 362 SGs, down from 559 in 2017-18 and 417 in 2019-20. This was despite the sanction of 51 new SGs in 2019-20. Based on the guidelines, each of the 736 districts in India should have a SG; however, the existing numbers of SGs cover only 50 per cent of the required number.
- In terms of the number of beneficiaries of the scheme, there has been a sharp decline from 16530 to just 7785 between 2016-17 and 2020-21. This may also be one of the reasons for decline in budget allocation for SG scheme.
- A number of States/UTs like Arunachal Pradesh, Chhattisgarh, Haryana, Manipur, Tamil Nadu and Tripura reported more than 90 per cent utilisation of allocated funds during FYs 2016-17, 2017-18 and 2018-19.
- Since the amount allocated under the scheme is low, the utilisation rate seems to be high for these States. However, States like Bihar, Goa, Gujarat, Jharkhand, Rajasthan, Madhya Pradesh, Maharashtra and Odisha have been reporting comparatively low extent of fund utilisation.
- A crucial message emerges from the fact that data on fund utilisation for many States and UTs are not readily available in the public domain and some states even reported 'zero' utilisation of available fund.
- Budget allocations for the scheme have seen a decline over the last five years.

What needs to be done?

- The concept of shelter-homes has been in place for over 20 years now, but a decline in the number of SGs can either mean that 'everything is fine', or that there is a serious lacuna in the system.
- The way forward should be increasing policy focus on SG and related schemes, with adequate budgetary allocations.

GENDER ADVANCEMENT FOR TRANSFORMING INSTITUTIONS (GATI)

- GATI is a novel pilot programme envisioned in mission mode to promote gender equity in Science, Technology, Engineering, Mathematics and Medicine (STEMM) domains

Need of the initiative

- Women in India face several challenges in moving up the academic and administrative ladder due to systemic barriers and structural factors. Gender equality in scientific laboratories and institutions of higher education is not only about numbers but also about various micro and macro level factors operating at institutional level. There exist various policies and enabling environment in different institutions in India but a common approach or guiding principles to bridge the gender gap is still lacking. In science and technology sector it is difficult to assess and evaluate the merit of existing process/procedures from gender lens. This clearly demonstrates a need for multi stakeholder interventions.

About GATI

- It is one of the initiatives the Department of Science and Technology (DST).
- The GATI was one of the three initiatives of DST announced on 28 February 2020, the National Science Day.
- It ushers a novel intervention programme for promoting gender equity in science and technology.

- GATI aims to nudge institutions of higher education and research towards supporting diversity, inclusion and the full spectrum of talent for their own success and progression.
- In particular, it aspires to create an enabling environment for equal participation of women in Science, Technology, Engineering, Medicine and Mathematics (STEMM) disciplines at all levels, addressing deep-rooted problems.
- The GATI model draws inspiration from the Athena SWAN Gender Equality Charter and accreditation framework operated by Advance HE, UK, since 2005.

How the Scheme will be implemented?

- Project GATI pilots a sustainable self-assessment and accreditation model.
- Institutions who are signatory to the GATI charter would be expected to commit to adopting its principles within their policies, practices, action plans and institutional culture.
- They would be required to create SMART (Specific, Measurable, Achievable, Relevant and Time-bound) action plans for systemic and cultural transformation.
- A metric-based self-assessment application followed by peer review would be used to establish how well the principles of the charter have been imbibed in the institutional framework through outcome focused initiatives.
- Success in the endeavor would lead to an institutional award and recognition as beacon of gender equity.
- The project will primarily be based at the NAAC Delhi Office. Work will be carried out in mission mode in close cooperation with DST KIRAN Division and the British Council.

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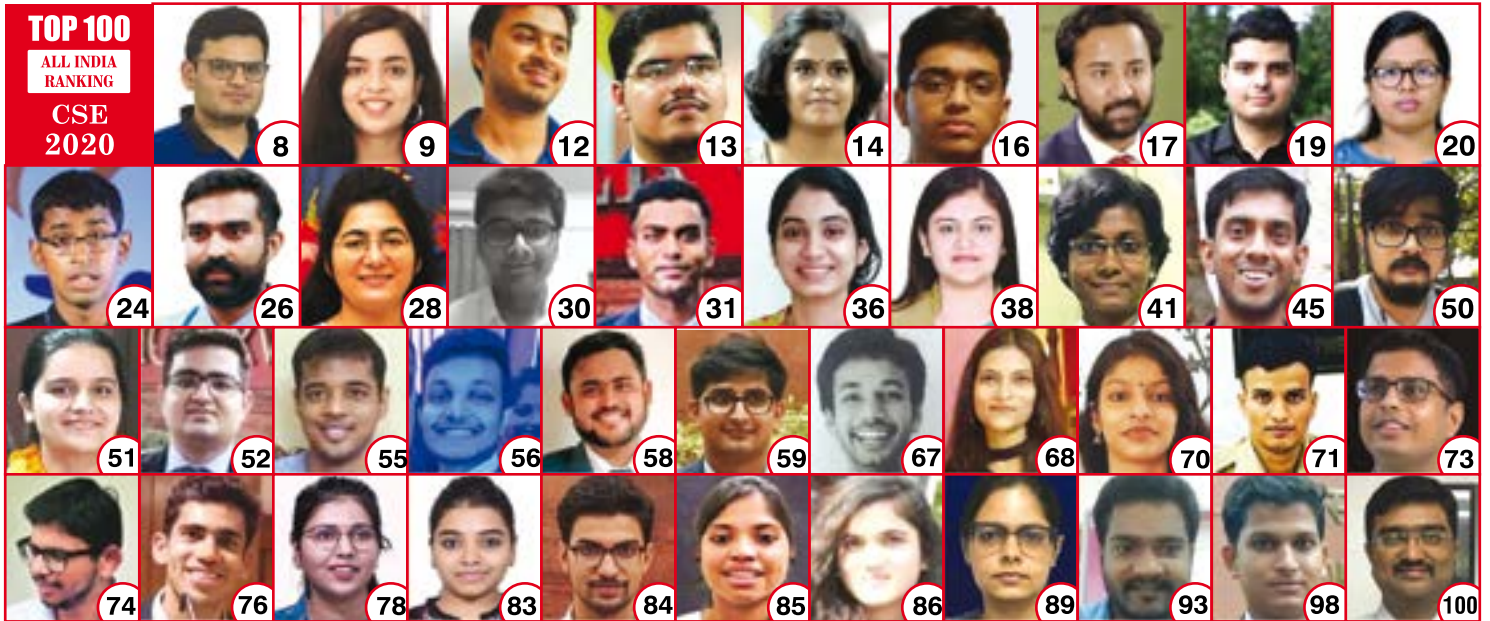
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