Nursing Kaushal Colleges programme 2021-2023

Impact Assessment Report

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Executive summary

Introduction and programme details

The ANM Nursing Vocational Education Programme, implemented by the PanIIT Alumni Foundation with support from HDFC Bank's CSR initiative, Parivartan, provides quality nursing education to young tribal women from disadvantaged backgrounds in Jharkhand. Delivered through Nursing Kaushal Colleges in Chanho, Gumla, and Chaibasa, the programme combines residential training, skill loans, and assured placement support, aiming to build healthcare capacity and empower marginalised communities.

Purpose and scope of the evaluation

The evaluation focused on the 2021–2023 cohort of 600 women beneficiaries. It assessed the programme's relevance, effectiveness, impact, and sustainability, using a mixed-methods approach combining structured surveys, case studies, and focus group discussions.

Key stakeholders included the beneficiaries, families and communities, training institutions, healthcare employers, financial partners, implementation teams, and government collaborators, each contributing to the programme's success and sustainability.

Indicators such as skill development, academic achievement, employment outcomes, financial empowerment, shifts in community attitudes, aspirations for further education, and contributions to public healthcare capacity were assessed. A mixed-methods approach was adopted, with stratified sampling across key groups. Data quality was maintained through pre-testing and real-time checks, and a holistic lifecycle lens guided the evaluation of relevance, effectiveness, impact, and sustainability.

Findings and results

The majority of participants came from disadvantaged backgrounds, with most having completed secondary education but facing barriers to higher education and formal employment. After completing the programme, 100% of respondents secured placements, largely in hospital settings across Hyderabad, Bangalore, and Delhi NCR. Motivations to join were rooted in aspirations for financial security, personal growth, and family upliftment. The programme successfully channelled these ambitions into structured healthcare career pathways, creating opportunities that would otherwise have remained out of reach.

Shaping journeys: overall experience and programme relevance

A significant 86% of participants reported that the programme effectively met their specific training and employment needs, while all respondents confirmed receiving placement opportunities. Placements were concentrated in reputed institutions such as Cloud Nine Hospitals, Care First Home Care, and Apollo Home Health Care. Additionally, nearly 95% agreed that the programme enhanced their access to higher education opportunities. Key factors influencing enrolment included the availability of skill loans, strong interest in nursing, and assurance of placements, highlighting the relevance and holistic design of the intervention.

Building skills for success: technical training and workplace readiness

Around 85% of respondents rated the skills learned through the programme as very or extremely useful. Those placed in hospital settings reported slightly higher satisfaction compared to home care roles, citing broader clinical exposure. The programme's emphasis on soft skills, English communication, teamwork,

and professionalism was seen as a major strength. Simulation labs and life skills training played a critical role in preparing participants for real-world work environments. However, gaps in local language fluency, computer literacy, and certain workplace readiness aspects were identified as areas requiring future attention.

Strengthening livelihoods: financial empowerment and inclusion

The programme substantially contributed to improving the financial independence of its graduates. Nearly half focused primarily on loan repayment post-placement, while others contributed towards family welfare through asset purchases, education support, and home improvements. Around 80–85% of graduates became primary or sole earners in their households, driving improved living standards. Formal banking adoption also improved, with nearly 90% actively managing salaries through bank accounts. While large asset acquisition remains limited, participants' earnings are beginning to fuel tangible upward mobility for themselves and their families.

Empowering change: mobility, agency, and community perceptions

The programme catalysed shifts beyond financial metrics, enhancing mobility, personal agency, and community perceptions of young women's roles. 96% of participants felt more prepared for independent futures. Many successfully delayed marriage and relocated for work—steps traditionally difficult in their sociocultural contexts. Families and communities increasingly recognised the value of women's education and employment, with many younger siblings and peers now aspiring to follow similar paths, pointing towards early signs of intergenerational change.

Shaping ambitions: aspirations, challenges, and the road ahead

Graduates are not only securing employment but are also actively planning for future growth. Many expressed ambitions to pursue General Nursing and Midwifery (GNM) studies, move to larger or government hospitals, or take on higher clinical responsibilities. However, barriers remain, including limited promotion prospects compared to GNM/BSc nurses, language challenges in southern placements, and balancing work with savings for further education. Participants also suggested strengthening English language support, offering clearer GNM pathways, and improving residential facilities to better support their journeys.

Conclusion and recommendations

The ANM Nursing Vocational Education Programme has successfully empowered tribal women in Jharkhand by bridging gaps in education, employment, and financial independence. Graduates have gained technical skills, secured placements, contributed to family incomes, and inspired wider societal change, despite challenges around career progression and balancing work with further education.

Key conclusions:

- The programme enabled holistic empowerment through accessible, market-aligned nursing education.
- Strong delivery across technical skills, soft skills, and financial inclusion improved livelihood outcomes.
- Challenges remain around career growth, language skills, and continued educational support.
- The model has strong potential for replication in other low HDI states.

Key recommendations:

- Expand English, local language, and computer training to boost workplace readiness.
- Support graduates aspiring for higher education through counselling and savings facilitation.
- Strengthen partnerships with employers to create clearer career advancement pathways and upskilling opportunities.

Introduction

Jharkhand, a state with significant tribal populations and some of the poorest socio-economic indicators in India, faces systemic challenges around education, financial inclusion, and gender equality[1]. Young tribal women often encounter layered barriers of caste, class, and gender, which prevent them from accessing higher education or formal employment[2]. The ANM Nursing Vocational Education Programme recognises these challenges[3] and seeks to address them by offering a two-year residential course in Auxiliary Nurse Midwifery (ANM), accredited by the State Nursing Registration Council (SNRC) and the State Council for Vocational Training (SCVT). The programme includes a structured combination of classroom instruction, practical training, clinical attachments, and on-the-job experience.

The ANM Nursing Vocational Education Programme, launched through a partnership between HDFC Bank and the PanIIT Alumni Reach for India (PARFI) Foundation, is a targeted initiative aimed at addressing the entrenched socio-economic inequalities faced by tribal women in Jharkhand. Designed to empower young women from marginalised communities, the programme seeks to provide high-quality, market-aligned nursing education alongside sustainable pathways for employment in India's growing healthcare sector. Through this programme, HDFC Bank and PARFI are working together to build healthcare capacity while also creating life-changing opportunities for young women historically excluded from such prospects.

Alongside technical nursing education, the programme supports financial independence through an innovative skill loan model, removing upfront financial barriers and encouraging self-sufficiency. Placement support is integrated into the model, ensuring that graduates have clear employment pathways upon completing their education. Beyond technical skills, the programme nurtures communication abilities, self-confidence, and aspirations for further education, positioning these young women as agents of change in their families and wider communities.

About the Nursing Kaushal College programme

The Nursing Kaushal College programme is a residential, market-aligned vocational education initiative designed to empower young tribal women from underserved communities in Jharkhand. Supported by HDFC Bank and implemented by the PanIIT Alumni Reach for India (PARFI) Foundation, the programme offers a two-year ANM nursing course accredited by the State Nursing Registration Council (SNRC) and the State Council for Vocational Training (SCVT).

The programme specifically targets youth from disadvantaged financial and occupational backgrounds, including daily wage earners, farmers, and small business families, many of whom live below the poverty line or in Antyodaya (highest poverty) categories. By combining strong academic preparation, skill-based practical training, and structured financial and placement support, the programme has built a strong track record of success — empowering young women to become confident, independent healthcare professionals contributing meaningfully to their families and communities.

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[1] United Nations Development Programme. (2018). *Leaving no one behind: A policy primer on intersectionality*.
https://www.undp.org/publications/leaving-no-one-behind-policy-primer-intersectionality

[2] UNESCO. (2020). *Education for sustainable development: A roadmap*.
https://unesdoc.unesco.org/ark:/48223/pf0000374802

[3] Kumar, S., & Yadav, V. (2022). Impact of COVID-19 on nursing education in India. *ResearchGate*.
https://www.researchgate.net/publication/361608092_Impact_of_COVID-19_on_Nursing_Education_in_India

Element	Details
Programme Name	**Nursing Kaushal College programme** Focussing on ANM Nursing Vocational Education
Implementing Organisation	PanIIT Alumni Reach for India (PARFI) Foundation
Supported By	HDFC Bank Parivartan
Location	Jharkhand – Chanho, Gumla, and Chaibasa
Target Group	Rural and tribal women from disadvantaged communities, primarily uneducated to secondary education
Financial Background	Below poverty line, Antyodaya category
Occupational Background	Families engaged in daily wages, farming, or small businesses
Other Socio-Economic Indicators	Govt. schooling backgrounds, thatched housing, lack of sanitation facilities
Course Duration	2 years (residential programme)
Accreditation	State Nursing Registration Council (SNRC) and State Council for Vocational Training (SCVT)
Course Components	Theoretical training, practical sessions, clinical attachments, on-the-job training
Financial Model	Collateral-free skill loans facilitated through banks by PARFI, repayable after employment
Placement Support	Assured placement opportunities in leading healthcare organisations across India
Academic Success	99% pass rate in state nursing exams with distinction; multiple students ranked in top 3 out of 5000 students

Element	Details
Average Salary as observed from past data	₹17,720 per month (across batches), leading to up to a 5× increase in family income
Social Impact	Women becoming primary breadwinners, inspiring families and communities to invest in girls' education

Methodology

Purpose and scope of the evaluation

The evaluation examines the progress, effectiveness, and overall impact of the ANM Nursing Vocational Education Programme, implemented by PanIIT Alumni Foundation with support from HDFC Bank's CSR initiative, Parivartan. It assesses the programme's success in achieving its key objectives of improving access to quality nursing education for young tribal women, promoting financial inclusion through skill loans, enhancing employment outcomes, and fostering broader socio-economic empowerment in underserved communities.

The scope of the evaluation focuses on the 2021–2023 cohort of 600 women enrolled across the three Nursing Kaushal Colleges located in Chanho, Gumla, and Chaibasa. The analysis is structured around four key dimensions: relevance, effectiveness and efficiency, impact, and sustainability. It considers the programme's alignment with beneficiary needs and development priorities, the quality and efficiency of training delivery, the socio-economic changes experienced by beneficiaries and their communities, and the long-term potential for sustained outcomes.

A mixed-methods approach guides the evaluation, integrating quantitative methods such as structured surveys and participation metrics with qualitative tools including narrative feedback, case studies, and focus group discussions. While the primary emphasis remains on the 2021–2023 cohort, references to earlier programme phases are included selectively to provide contextual understanding of the model's evolution and contribution.

Focus areas of assessment

- **Skill development and access to education** – Assessing access to quality vocational nursing education for young tribal women from disadvantaged communities.

- **Academic achievement** – Evaluating academic performance and progression through course milestones.

- **Employment and placement outcomes** – Examining access to on-the-job training and sustainable employment opportunities in the healthcare sector.

- **Financial empowerment** – Understanding changes in family income levels and the role of employment in promoting financial independence.

- **Financial inclusion** – Assessing access to banking services and participation in skill loan schemes.

- **Self-confidence and communication skills** – Evaluating improvements in workplace readiness, leadership ability, and self-expression.

- **Shifts in family and community attitudes** – Exploring changes in perceptions towards women's education, employment, and mobility.

- **Aspirations for higher education** – Assessing aspirations for career advancement and further study, such as General Nursing and Midwifery (GNM).

- **Contribution to public healthcare** – Measuring contributions to the healthcare system, particularly in strengthening public health delivery capacity.

- **Systemic healthcare resilience** – Assessing the programme's role in addressing national healthcare workforce gaps, especially in underserved areas.

Stakeholder mapping

A multi-stakeholder approach has been central to the design, implementation, and success of the ANM Nursing Vocational Education Programme. Each stakeholder group brings a distinct perspective and set of contributions, collectively ensuring that the programme remains relevant, effective, and sustainable.

Stakeholder group	Role and contribution
Nurses	Young women from disadvantaged tribal communities; primary focus of the programme's educational and economic outcomes.
Families and communities	Influence education and employment decisions; shifting attitudes indicate broader social impact.
Training institutions	Deliver theoretical and practical training; mentorship and placement support through Nursing Kaushal Colleges.
Healthcare employers	Offer on-the-job training and full-time placement opportunities; provide feedback on skill levels and workplace readiness.
Financial institutions	Facilitate financial inclusion through collateral-free skill loans and bank account support.
Implementation and monitoring teams	Manage programme delivery, oversee quality assurance, monitor progress, and drive contextual adaptations.
Government stakeholders	Provide infrastructure support and policy collaboration through Special Purpose Vehicle (SPV) partnerships.

Our approach and sampling

A mixed-methods approach was adopted to assess the outcomes and effectiveness of the programme, combining quantitative and qualitative methods.

Quantitative methods: Structured surveys to capture participation, academic progress, financial inclusion, and employment data.

Qualitative methods: Narrative feedback, focus group discussions, case studies, and field observations to explore experiences and social change.

Sampling strategy: Stratified sampling covering students, alumni, faculty, and employers across campuses and backgrounds.

Data quality measures: Pre-testing of tools, real-time data checks, and ethical training to ensure accuracy and confidentiality.

Limitations: Potential sampling bias, margin of error in quantitative findings, and subjectivity bias in qualitative insights.

Analytical lens: Holistic evaluation across relevance, effectiveness, impact, and sustainability using a lifecycle approach.

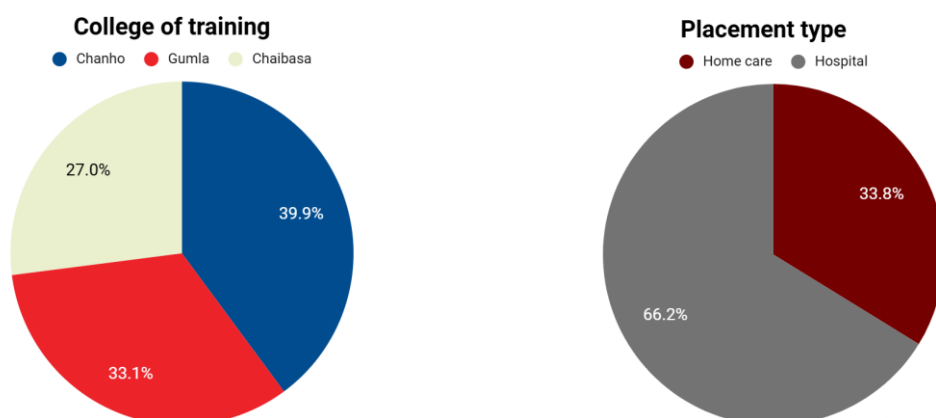| Stakeholder group	Number engaged	Notes
Nursing students / graduates	**148**	Surveyed across three Nursing Kaushal Colleges (Chanho, Gumla, Chaibasa)
Programme team members	**8–10**	Through qualitative interviews and feedback
Employers	**4**	HR and clinical supervisors from the various hospitals
Other stakeholders	**2–3**	Members involved in the project not core part of the programme team

Findings and results

Setting the context: backgrounds of the nurses

The Nursing Kaushal College programme primarily serves young women from marginalised and low-income communities in Jharkhand. Most beneficiaries come from families engaged in daily wage labour, farming, or small businesses, with limited access to stable incomes or essential services such as sanitation and secure housing. Educationally, they are typically first-generation learners, having completed secondary education through government schools, but faced significant barriers to pursuing higher studies due to financial constraints, geographic isolation, and sociocultural expectations.

Motivated by the opportunity to achieve financial independence, support their families, and build careers in the growing healthcare sector, these young women viewed the programme as a critical pathway to a better future. Without such an opportunity, many reported they would likely have remained confined to informal, low-paying work within their communities.
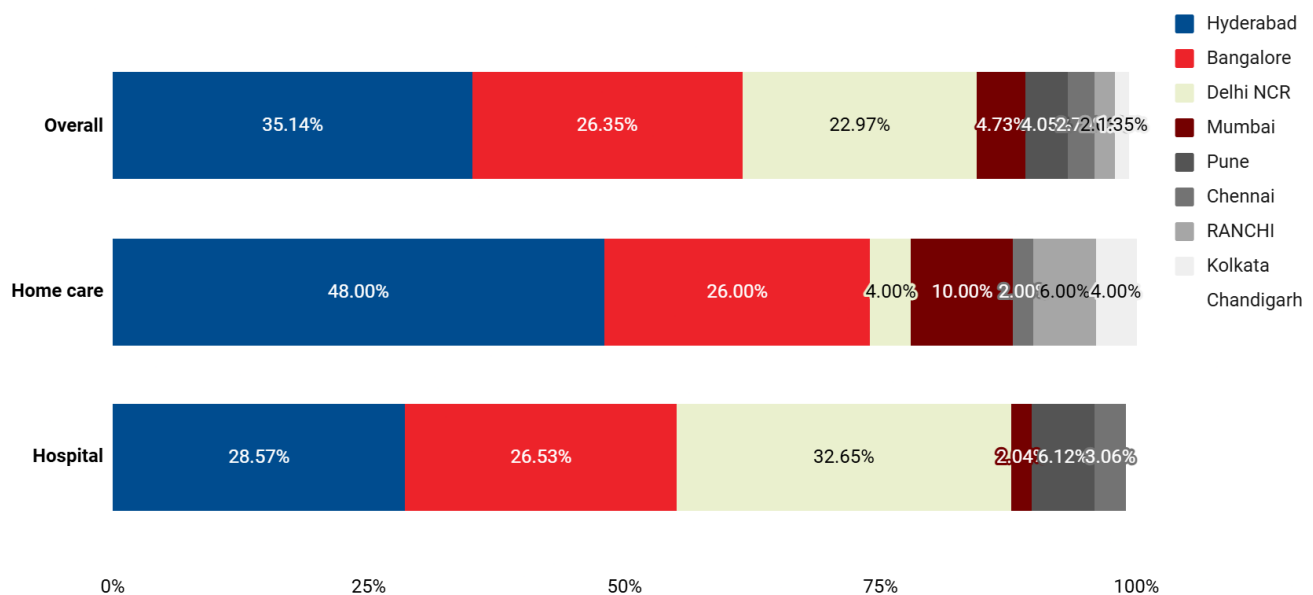
Below are some details of the **148 nurses** who formed the sample for this study:

The nurses completed their training in the following manner: Chanho (40%), Gumla (33%), and Chaibasa (27%). Prior to joining the programme, **the majority of participants (86%) had completed Class 12, while 14% had pursued a bachelor's degree or diploma.**

College of training
● Chanho ● Gumla ○ Chaibasa
27.0%
39.9%
33.1%

Placement type
● Home care ● Hospital
33.8%
66.2%

Following the completion of their training, 66% of students were placed in hospital settings, and 34% were placed in home care roles. **Placement locations were spread across metropolitan cities, with Hyderabad (35%), Bangalore (26%), and Delhi NCR (23%)** emerging as the most common destinations.

Placement locations and type

Legend:
- Hyderabad
- Bangalore
- Delhi NCR
- Mumbai
- Pune
- Chennai
- RANCHI
- Kolkata
- Chandigarh

Category	Hyderabad	Bangalore	Delhi NCR	Mumbai	Pune	Chennai	RANCHI	Kolkata	Chandigarh
Overall	35.14%	26.35%	22.97%	4.73%	4.05%	2.72%	1.35%		
Home care	48.00%	26.00%	4.00%	10.00%	2.00%	6.00%	4.00%		
Hospital	28.57%	26.53%	32.65%	2.04%	6.12%	3.06%			

In terms of motivations for enrolment, **aspirations of self and family featured most strongly**, followed by the **promise of financial security and stability**. The prestige associated with the medical profession and a desire to contribute to community service were also important drivers, while **proximity to home was a relatively lower priority.**

Together, these trends reflect a cohort of young women who were academically qualified but lacked accessible pathways into formal employment. The willingness to migrate for work, combined with the focus on long-term aspirations and financial stability, highlights both the ambition and the resilience of the students. The programme served as a critical enabler, bridging the gap between education and livelihood for a population otherwise at risk of limited economic mobility.

Shaping journeys: overall experience and programme relevance

A significant majority of participants (86%) reported that the programme effectively addressed their specific needs, with over half (55%) stating it helped them well and nearly a third (32%) stating it fully met all their needs. Only a small proportion (13%) felt that the programme helped them only moderately or partially.

Effectiveness and helpfulness of the programme

● Helped a little ● Helped moderately ● Helped well
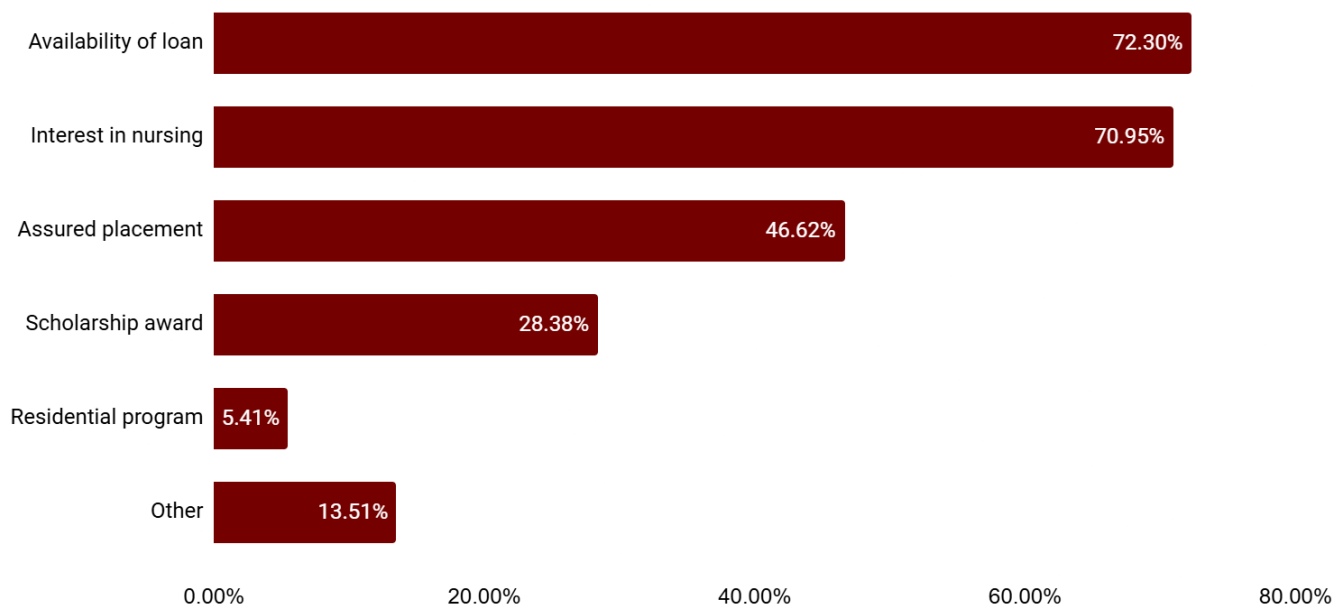● Helped fully and met all my needs

9.5%
31.8%
54.7%
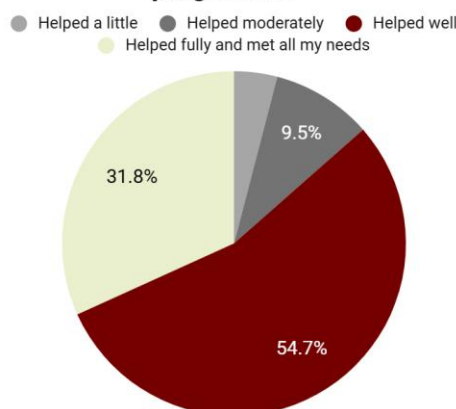
During discussions, many participants indicated that, in the absence of the Nursing Kaushal College programme, equivalent-quality nursing education opportunities were either unavailable or unaffordable in their vicinity, limiting their access to formal skilling pathways. For a significant number of participants, the availability of a structured, financially accessible nursing programme played a decisive role in shaping their career choice, with many noting that they might not have pursued nursing otherwise.

> **"Without this opportunity, I would probably have stayed back to help my mother at home," shared one nurse from Chanho.**

All respondents (100%) confirmed that they received placement opportunities through the programme, with half placed at Cloud Nine Hospitals and others distributed across institutions such as Care First Home Care (12%), Apollo Home Health Care (11%), and Fernandez Hospital (11%).

In terms of academic progression, nearly 95% of participants agreed or strongly agreed that the programme enhanced their avenues for pursuing higher education. The decision to enrol was strongly influenced by the availability of skill loans (72%), interest in nursing (71%), and the assurance of placement (47%).

Key reasons for joining the programme

Reason	Percentage
Availability of loan	72.30%
Interest in nursing	70.95%
Assured placement	46.62%
Scholarship award	28.38%
Residential program	5.41%
Other	13.51%

These findings suggest that the programme was successful in aligning with the aspirations and needs of the students, providing not only vocational training but also clear pathways to employment and further education. Financial accessibility through loan support, combined with structured placement processes, played a critical role in enabling participation and securing outcomes for marginalised youth.
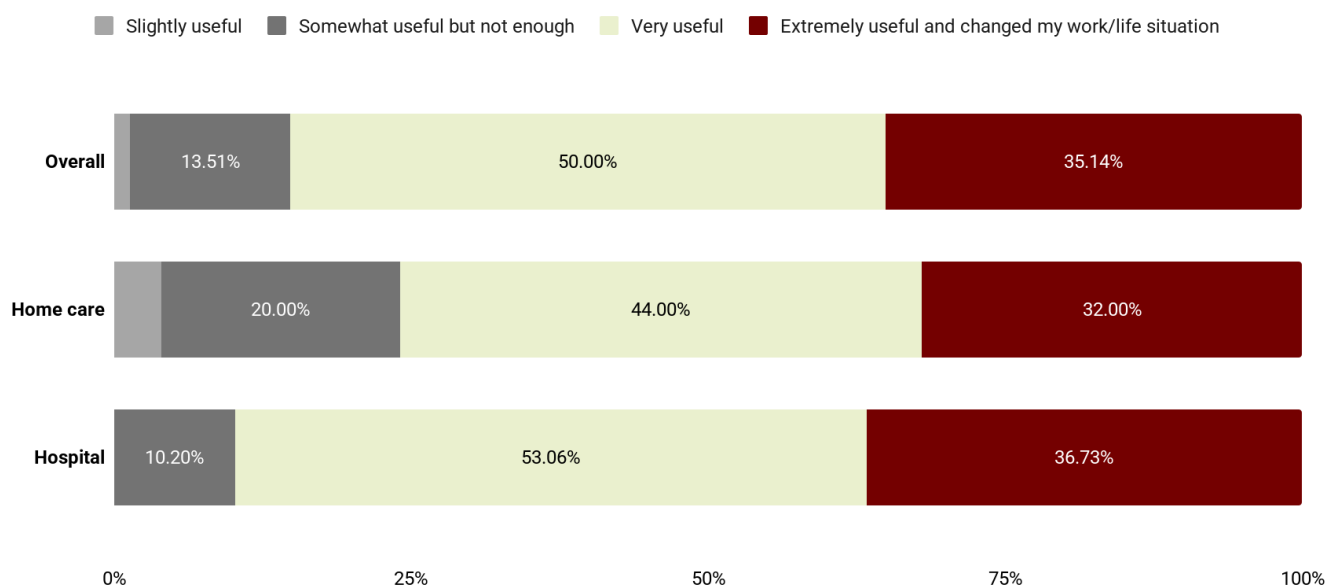
> **Nearly 86% of enrolled students came from below-poverty-line or extremely disadvantaged backgrounds, primarily from farming or daily wage families.**

Building skills for success: technical training and workplace readiness

Participants largely reported the skills gained through the Nursing Kaushal College programme to be **highly useful**. Half (50%) rated the skills as very useful, and 35% stated that they were extremely useful and had changed their work or life situation. Only a small proportion found the skills somewhat useful but insufficient (14%) or slightly useful (1%). A closer examination revealed minor differences across placement types: among those placed in hospitals, 90% rated their skills as very or extremely useful, compared to 76% of those placed in home care roles.

> **85% of participants rated the technical skills they gained as either very useful or life-changing for their careers.**

Usefulness of training and by placement type

Slightly useful | Somewhat useful but not enough | Very useful | Extremely useful and changed my work/life situation

Overall: 13.51% | 50.00% | 35.14%

Home care: 20.00% | 44.00% | 32.00%

Hospital: 10.20% | 53.06% | 36.73%

0%   25%   50%   75%   100%

In addition to technical nursing skills, the programme placed emphasis on the development of **soft skills, including communication, teamwork, professionalism, and confidence-building**. Students reported significant improvements in their ability to interact with colleagues and patients, often highlighting a marked shift from initial shyness to greater self-assurance post-placement. T**raining methods included the use of simulation laboratories, 3D models, and practical exercises to enhance technical proficiency. English language training and life skills modules were also embedded in the curriculum to support readiness for diverse workplace environments.**

During discussions, many nurses shared instances where they were able to apply their learning directly to real-world settings, particularly during ward rounds, clinical attachments, and patient care activities. These experiences were cited as crucial in bridging the gap between theoretical knowledge and professional practice.

Despite the overall positive feedback, several gaps were also noted. Some participants, particularly those placed in southern states, faced challenges due to language barriers, as English and local languages were commonly used for communication. Additionally, limited training in basic computer operations and digital literacy was reported as a hurdle, especially for navigating hospital systems and documentation processes. Participants also identified the need for stronger preparation in certain workplace readiness areas, such as handling administrative responsibilities and understanding professional hierarchies within hospitals.

> **"My seniors often appreciate that I know procedures better than others — it's because our teachers made us practise every small thing again and again,"** said a graduate now working in Delhi NCR.

Together, these findings suggest that the programme has succeeded in equipping students with core clinical and soft skills necessary for healthcare employment, while also highlighting areas where further strengthening could enhance long-term workplace adaptability and career progression.

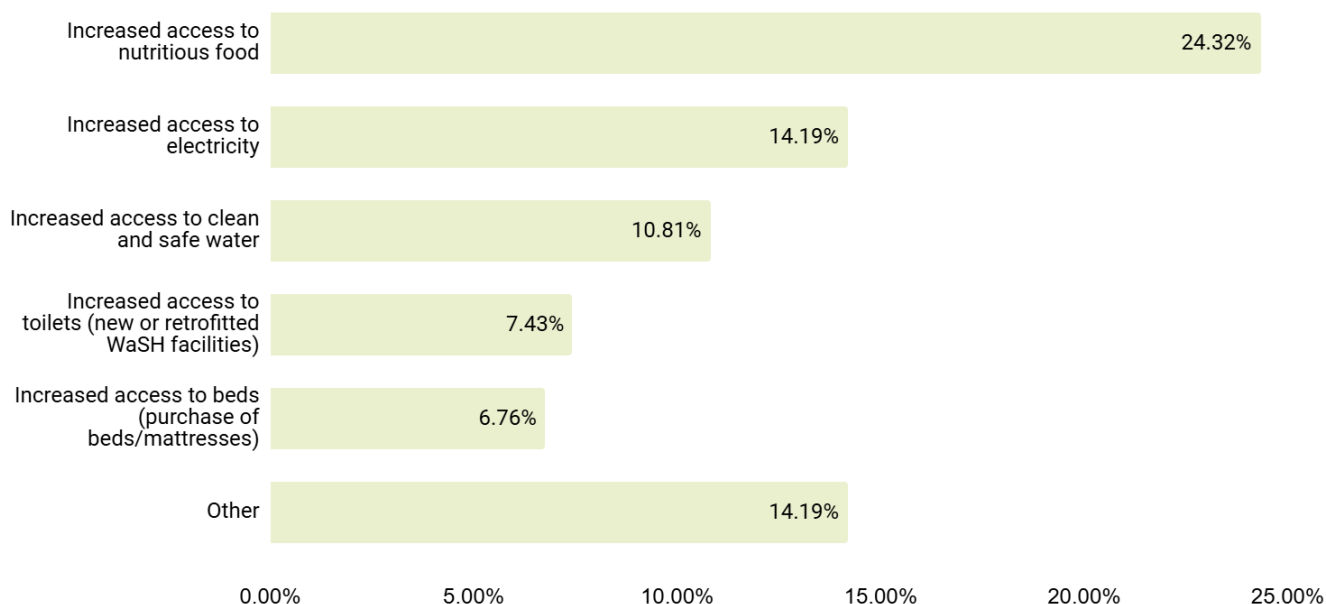**Creating economic pathways: employment outcomes and financial inclusion**

After placement, nearly half of the respondents (49%) reported focusing primarily on the repayment of their educational loans. Other financial contributions made by the graduates included the purchase of mobile phones (14%), vehicles (4%), and televisions (1%). While only a few students reported purchases such as houses (less than 1%) or availing loans for other assets (1%), a notable portion (37%) contributed to broader family needs such as medical expenses, home renovations, educational support for siblings, and other household improvements.

Contribution towards assets for the household
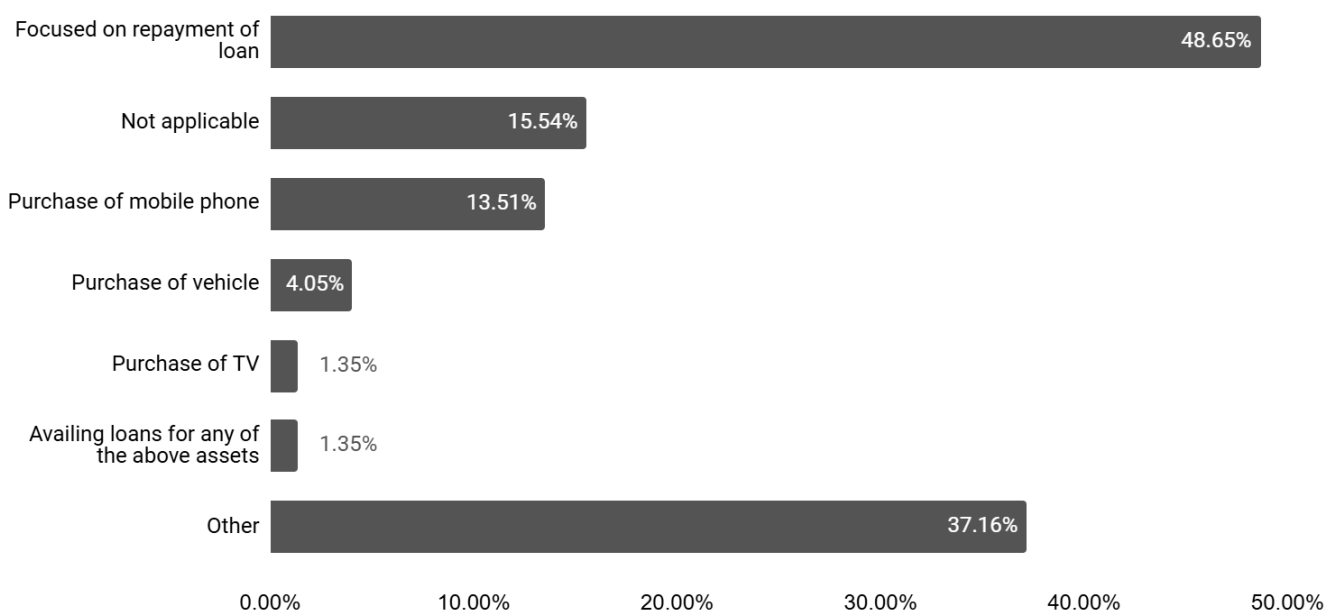
In terms of improving access to basic necessities, 24% of participants reported increased access to nutritious food, and around 14% contributed towards setting up steady electricity connections or clean water access at home. Smaller proportions reported supporting access to beds (7%) and improved sanitation facilities (7%). Around 14% contributed in other areas such as household expenses, education support for family members, and general infrastructure improvements.

Contribution towards household expenses

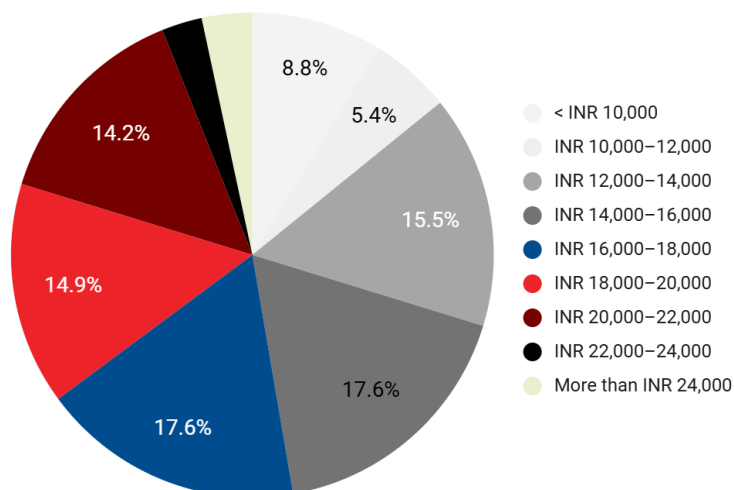| Category	Percentage
Increased access to nutritious food	24.32%
Increased access to electricity	14.19%
Increased access to clean and safe water	10.81%
Increased access to toilets (new or retrofitted WaSH facilities)	7.43%
Increased access to beds (purchase of beds/mattresses)	6.76%
Other	14.19%

> **"I paid off my loan faster by working extra shifts — now I am saving to buy my own scooter," shared a nurse from Hyderabad.**

Overall, the data suggest that the programme has had a substantial and positive impact on meeting the immediate educational and livelihood needs of the participants. Graduates have used their earnings not only to manage loan repayments but also to make tangible contributions towards their households' living standards. While large asset acquisitions remain limited, many graduates have begun to invest in smaller but meaningful improvements, reflecting the early stages of upward financial mobility and increased agency within their families.

The average monthly income across respondents was INR 15,747, with hospital-placed graduates reporting slightly higher average earnings (INR 16,214) compared to those placed in home care roles (INR 14,832). Around 17% of participants earned between INR 14,000–16,000 per month, with a similar proportion in the INR 16,000–18,000 range.

Income of surveyed nurses

Legend:
- < INR 10,000
- INR 10,000–12,000
- INR 12,000–14,000
- INR 14,000–16,000
- INR 16,000–18,000
- INR 18,000–20,000
- INR 20,000–22,000
- INR 22,000–24,000
- More than INR 24,000

Pie chart values: 8.8%, 5.4%, 15.5%, 17.6%, 17.6%, 14.9%, 14.2%

The programme also contributed significantly to financial inclusion. Before enrolling, only 79% of participants had an existing bank account; following enrolment, 92% had opened accounts, largely for loan disbursement and management purposes. Notably, nearly 90% of participants reported that their salaries were being directly credited into these accounts, suggesting strengthened familiarity and practice of formal banking services. The availability of a skill loan emerged as a major factor influencing enrolment (72%), alongside the aspiration for a stable nursing career.

Analysis of household income data indicates that **approximately 45–50% of the graduates are sole earners in their families, with their salaries constituting the entire reported household income**. An additional 30–35% of participants are primary contributors, where their earnings form the major share of the household income. <u>Together, nearly 80–85% of graduates are now either sole or primary earners within their families</u>, highlighting the programme's role in facilitating financial empowerment and shifting household economic dynamics.

> **The average monthly salary for nurses sampled stood at ₹15,747, with hospital-based nurses earning slightly higher incomes than those placed in home care settings**

Observational findings from the field further reinforced these patterns. Many participants highlighted that becoming the primary earners in their families not only supported immediate financial needs but also shifted family attitudes towards girls' education and employment. Several participants described supporting their siblings' education, contributing to home renovations, and providing for healthcare needs, underscoring the wider household-level impact of the programme.

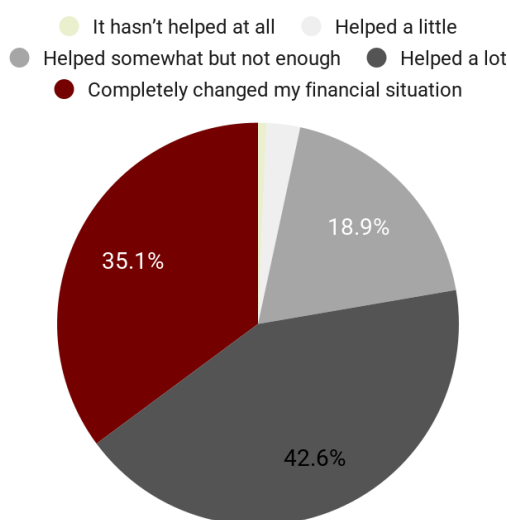**Empowering change: mobility, agency, and community perceptions**

Beyond economic measures, this section delves into how the programme influenced beneficiaries' confidence, mobility, family decision-making power, and how their achievements have shifted perceptions within their families and communities.

The Nursing Kaushal College programme has driven notable shifts not just in the professional lives of its graduates, but in their personal, familial, and community environments as well. Data from the survey

reveal that the programme has been critical in fostering financial independence, enhancing mobility, building self-confidence, and challenging traditional norms around women's education and employment.

A significant proportion of respondents (78%) reported that the programme had either "helped a lot" (43%) or "completely changed" (35%) their financial situations. Prior to enrolment, many participants would likely have remained engaged in household work, manual labour, or even been married early. In fact, without the programme, responses indicated that a considerable number would have either been married, working in low-income jobs such as farming, or restricted to household duties, limiting their social and economic prospects.

Effect on financial situation

- It hasn't helped at all
- Helped a little
- Helped somewhat but not enough
- Helped a lot
- Completely changed my financial situation

35.1% 18.9% 42.6%

When asked whether the programme prepared them for the future and made them more independent, **96% affirmed positively, with 49% stating that they felt "completely ready and confident" to navigate future challenges.** Moreover, over three-quarters of respondents (approximately 80%) found the programme activities highly suitable to their specific needs and local contexts, showing thoughtful programme design aligned with beneficiary realities.

Importantly, the programme contributed to greater personal mobility and social agency. Many nurses reported moving to metropolitan cities for work, a step that required not only logistical arrangements but also a shift in self-confidence and family support structures. Families that initially hesitated were now proud of their daughters' achievements, with many supporting decisions to delay marriage, pursue career growth, or invest in further education. Several participants shared that their success had encouraged younger siblings and peers in their communities to also aspire for higher education and formal employment, indicating a ripple effect of empowerment.

> **Nearly half of the respondents reported delaying marriage decisions and increasing their personal mobility after completing the programme.**

Qualitative insights add further richness to these findings. Mobilisation teams highlighted the grassroots-level engagement required to convince families and communities of the value of girls' education and employment. Employers praised the professionalism and adaptability of the programme graduates,

noting that they not only met technical requirements but also exhibited high levels of confidence and teamwork. Bank officials and repayment teams spoke about the girls' proactive loan repayments and financial literacy, signalling the development of strong financial decision-making skills.

Taken together, these findings underline that the Nursing Kaushal College programme has fostered deep, systemic change: enabling tribal women to reimagine their futures, claim greater control over their lives, and gradually shift community perceptions towards valuing education, independence, and women's economic participation.

> **"Earlier, my parents would not allow me to travel alone. Now they proudly tell others that I am working in a different city," said a nurse employed in Bangalore.**

Shaping ambitions: aspirations, challenges, and the road ahead

The programme has not only opened immediate pathways to employment but also broadened the horizons of students' professional and personal ambitions. Participants were asked about their definitions of professional growth in nursing over a two, five, and ten-year horizon. A significant share of the responses indicated aspirations of upward mobility within the healthcare system: **about 30% of participants hoped to switch jobs to work at larger hospitals, while 27% aimed to secure employment in government hospitals, known for offering greater job security and benefits**. Smaller proportions aspired to become head nurses or specialists in specific wards, although the majority (66%) mentioned "other" goals, often referring to pursuing higher education or moving into leadership roles.

> **Around 26% of participants are actively saving to pursue GNM or higher nursing education, often balancing full-time jobs alongside their studies.**

Higher education, particularly pursuing a General Nursing and Midwifery (GNM) course, emerged as a common aspiration among respondents. About **26% had concrete plans in place to pursue GNM, with many already enrolled or actively saving for course fees**. Strategies ranged from setting aside fixed monthly savings—anywhere from ₹2,000 to ₹15,000—to combining part-time work with study to manage financial demands. This pursuit of further education, despite the financial pressures of loan repayment and limited family support in some cases, signals **a strong drive for upward mobility and professional advancement.**

Participants also shared insights into challenges they currently face. **Some nurses reported feeling that, despite their skills and confidence, they were restricted to basic duties, particularly when compared to their counterparts with GNM or BSc qualifications.** Language barriers in placements outside their home state, especially in southern India, and limited computer literacy also emerged as challenges for workplace integration. These gaps highlight areas for potential strengthening of the curriculum, including more robust English language training, basic computer literacy modules, and stronger career progression counselling.

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Suggestions for programme improvement included expanding the curriculum to offer GNM directly through the Nursing Kaushal Colleges, enhancing English and local language support, and further improving the residential facilities. Students also expressed a desire for more structured soft skills training to better prepare for workplace realities, including managing shifts, navigating hospital hierarchies, and planning for long-term career growth.

Together, these findings reflect not just a successful placement-focused programme, but the beginning of long-term professional journeys that many students are actively shaping for themselves. The aspirations and feedback shared provide valuable inputs for the evolution of the Nursing Kaushal College model, ensuring it continues to respond to the dynamic needs of young, ambitious healthcare professionals.

> **"I dream of working in a government hospital one day, but first, I need to complete GNM. I am saving ₹5,000 every month to make it happen," said a participant from Gumla.**

Stories of change from the field

During her practical training at Rainbow Children's Hospital, one of the Nursing Kaushal College students had the opportunity to apply the clinical skills and knowledge she had acquired through the ANM Nursing Vocational Education Programme. On what initially appeared to be a routine day, a senior doctor arrived in the ward and requested a nurse to accompany her during patient rounds. Despite the presence of several staff members, including GNM- and BSc-qualified nurses, many hesitated to step forward.

Reflecting on the moment, the student shared, *"I saw everyone looking around, unsure. I just remembered what our teachers always said – if you are confident in your training, you should step forward."* Drawing upon the confidence instilled through her education, she volunteered without hesitation.

Throughout the ward round, she answered the doctor's questions about each patient with assurance, clarity, and technical precision. *"Every question the doctor asked, I could answer,"* she recalled. *"I felt proud because I realised how much I had learned."* Her ability to communicate effectively and her thorough understanding of patient care impressed the doctor greatly. Recognising her competence, the doctor personally requested that the student accompany her on all future ward rounds.

> *"When the doctor asked me to join her every day, it felt like a big achievement,"* the student said. *"It made me believe even more in myself and in the training we received."*

This moment not only affirmed the quality of education and training provided by the Nursing Kaushal College but also marked a significant milestone in the student's personal and professional development. Stepping forward when others hesitated demonstrated not just technical ability, but leadership, presence of mind, and a growing sense of self-belief — attributes the programme strives to nurture in every student.

Final reflections, conclusions, and recommendations

The ANM Nursing Vocational Education Programme has demonstrated significant success in bridging the gaps of education, employment, and empowerment for tribal women from disadvantaged communities in Jharkhand. The programme not only provided technical nursing skills and employment opportunities, but also contributed to broader shifts in mobility, decision-making agency, and societal perceptions of women's roles. It addressed both immediate livelihood needs and laid the foundation for longer-term career aspirations, such as higher education through GNM or BSc Nursing courses.

Graduates have leveraged their new skills to meaningfully contribute to their families' finances, invest in personal growth, and inspire others in their communities. The financial inclusion model through skill loans has shown strong repayment trends, reinforcing graduates' sense of ownership and responsibility. While challenges remain — particularly around workplace advancement opportunities, language barriers, and balancing employment with further education — the programme's systemic impact is evident.

Conclusions

- **Holistic empowerment**: The programme successfully tackled multi-dimensional exclusion, supporting financial, social, and personal empowerment of tribal women through a market-aligned, accessible nursing education model.
- **Strong programme design and delivery**: The combination of technical training, soft skill development, financial inclusion, and placement support proved effective in improving livelihood outcomes and setting up pathways for long-term growth.
- **Challenges to future progression**: Graduates continue to face barriers such as limited professional advancement compared to GNM/BSc-qualified nurses, language gaps in southern placements, and the need to balance work with saving for higher education.
- **Potential for systemic impact**: The model has potential to serve as a replicable and scalable solution for low HDI states, contributing to healthcare capacity building and gender equity in workforce participation.

Recommendations

Programme strengthening

- Expand and formalise English language, local language, and basic computer training modules to enhance workplace readiness across diverse placement geographies.
- Build structured guidance and counselling support for graduates aspiring to pursue higher education (GNM, BSc Nursing).

Graduate career pathways

- Strengthen partnerships with hospital chains and healthcare employers to create clearer pathways for career progression beyond entry-level ANM roles.
- Explore modular upskilling or bridge courses that allow working graduates to accumulate credits towards advanced nursing qualifications.

Annexures

Background and context for the project

Jharkhand, carved out of Bihar in the year 2000 after decades of tribal mobilisation and demands for autonomy, remains a region marked by deeply entrenched inequalities. Despite political recognition of tribal rights through the formation of a separate state, systemic issues around caste-based discrimination, economic marginalisation, and gender inequity persist[4]. In Jharkhand, Scheduled Tribes (STs) constitute approximately 26.2% of the population, yet continue to experience lower literacy rates, limited access to healthcare, and fewer employment opportunities compared to the general population. According to the Multidimensional Poverty Index (2014-15), 42.16% of Jharkhand's population is multidimensionally poor, a figure significantly higher than the national average[5].

Education remains a critical barrier to social and economic mobility in the state, particularly for young women from tribal communities. Literacy rates among ST women in Jharkhand stand at just 46.2%, compared to the overall literacy rate of 66.4%[6]. Access to higher education is even more limited, with only 18% gross enrolment among Scheduled Tribes, compared to the national average of 27.1%[7]. Factors such as financial constraints, sociocultural expectations, language barriers, and geographic isolation further deepen these inequalities. Generations of marginalisation have fostered underconfidence among young tribal women, conditioning them to prioritise family needs over personal ambitions and limiting their capacity for independent decision-making.

In addition, financial exclusion remains a major obstacle. Poor credit absorption in Jharkhand points to structural barriers in accessing banking and financial services, with the gap between bank debits and credits fluctuating between 113% and 157% over the past decade. Without access to credit, families struggle to invest in education, particularly for girls, reinforcing cycles of poverty and dependence. Against this backdrop, healthcare emerges as a sector offering both social legitimacy and financial opportunity for women[8]. The COVID-19 pandemic further exposed critical gaps in India's healthcare system, including a shortage of trained nurses, making healthcare-related education even more urgent and relevant[9] [10].

It is within this complex socio-economic and cultural environment that the ANM Nursing Vocational Education Programme was conceived. The programme seeks not just to offer technical training, but to dismantle structural barriers and enable young tribal women to dream of, and achieve, economic

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independence. By combining nursing education, financial support mechanisms, and job placements, the programme is designed to create sustainable pathways out of poverty[11], while also contributing to broader societal change by challenging caste, class, and gender norms[12].

Sample of assessment tools

Nurses

- How has your experience of the Nursing Kaushal College programme been? What has been the contribution of the programme in your life?
- In your opinion, is the course curriculum aligned to the technical knowledge and skills required for the workplace?
- Did the course focus on the development of soft skills (such as communication skills, confidence, teamwork, and professionalism)?
- In what ways have you been able to apply your classroom learnings in real-world settings?
- Did the programme address all your specific training and career needs?
- Has your mobility or confidence to relocate for work improved since enrolling?
- Has the programme helped delay marriage or strengthened family support for your career?
- Would you have pursued higher education or employment in the absence of the programme?
- What are your aspirations for professional growth over the next two to ten years?
- Are you saving towards pursuing GNM or other higher qualifications?
- Did you face any challenges during the course or after placement? (such as language barriers, lack of recognition compared to GNM/BSc nurses, etc.)

Programme team

- What is the vision and focus of the Nursing Kaushal College programme?
- How are students mobilised and selected?
- How are student skills aligned with market needs?
- What is the role of the government and key success factors for partnerships?
- How does the skills-based loan model work and how sustainable is it?
- What sets the programme apart from others in the region?
- What has been the overall impact and what are future plans?

Employers

- How did your organisation partner with the Nursing Kaushal College?
- How many students have been placed or trained through your organisation?
- How would you assess the students' skills, knowledge, and job readiness?
- Is the curriculum aligned to industry needs?
- What impact have you seen among the girls employed?

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