

SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH SRI DEVARAJ URS MEDICAL COLLEGE

Tamaka, Kolar





THE TIMES OF INDIA

Online Newspaper Clipping Service Dated, Wednesday, 22nd March - 2017

Pg.No.06

Students to be shown films on ill-effects of ragging

Circular issued to V-Cs; films uploaded on UGC website

TANU KULKARNI BENGALURU

In order to sensitise students and curb the menace of ragging in higher education institutions, the University Grants Commission (UGC) has urged the heads of all institutions to ensure that students are shown four short films and a documentary on

the ill-effects of ragging. The UGC had got the films made for spreading awareness on the problem.

In a circular issued to Vice-Chancellors of all universities, institutions and Sandhu, UGC secretary, has urged colleges to screen the films during orientation and other programmes. The films have been uploaded on the UGC website.

The same circular also reiterates that if any college fails to take up adequate steps to prevent ragging or fails to punish the perpetrators, it will face action as per the UGC Act. All institutions.

besides having regulations to curb the menace of ragging in their institutions, are also expected to have a monitoring mechanism to ensure compliance.

Ravinandan B.B., State regulatory bodies, Jaspal S. vice-president, All-India Democratic Students' Organisation, welcomed the move. However, he said that to tackle the root cause of ragging, students and colleges should start an ethical and cultural movement. "There is a need to ensure that the syllabus is tweaked and reoriented to ensure that it is sensitive about people lower economic and social backgrounds."

INDIA, DEPARTMENT OF SPACE LLITE CENTRE (ISAC) NGALURU-560017

5084370 Fax: +91-080-2520 5283/84

March 20, 2017

AC E-PROCUREMENT SERVER

sement in Print Media vide No.



Health is right, not charity

The Union Cabinet has given its approval to the National Health Policy 2017. A new health policy was long overdue as the present one is at least 15 years old. The NHP 2017, has several positives to it. For one, it proposes increasing public health expenditure to 2.5% of the GDP from the current 1.3%. This is still far short of the 5% of GDP recommended by the World Health Organisation. Given the magnitude of India's health concerns, one wonders how far the proposed increase in public health expenditure will go in improving public health in the country. The new health policy prioritises primary healthcare; more than two-thirds of the expenditure will be on primary care. It also envisages increasing public access to quality healthcare through provision of free drugs, free diagnostics and free emergency and essential healthcare services in public hospitals. It is well known that expenditure on health drives many Indian families into severe debt. That can be expected to reduce with the implementation of the new policy. Non-communicable diseases, which account for the bulk of India's illness-related expenditure and fatalities, will get more attention under the new health policy. In the pipeline is a new comprehensive healthcare package to cover cardiovascular diseases, diabetes, cancers as well as mental health, palliative and rehabilitative care at the primary healthcare level.

Pg.No.10

Still, the NHP 2017, is disappointing. It appears to be a rehashed version of the 2002 policy. The proposal to raise public health expenditure to 2.5% of the GDP figured in the old policy too. The 2017 policy is also a



weaker version of the 2015 draft. The 2015 draft promised that public health expenditure approximating 2.5% of GDP would be implemented by end-2017. The 2017 policy defers that deadline to 2025. Many of the targets that NHP 2017 sets out to achieve are not new. Both NHP 2002 and 2017 set the target for maternal mortality ratio at 100. Thee NHP 2002 had set the deadline at 2010. The maternal mortality ratio (MMR) target was not achieved. Indeed, in 2015-16, India's MMR was 167. The NHP 2017, has now set the deadline at 2020. Will these and other targets be achieved this time around?

Much will depend on the political will to implement the policy. In this regard, the NHP 2017, does not bode well.

The policy lays bare the government's irresolute commitment. Instead of making health a fundamental right, as the 2015 draft promised, it advocated an "assurance-based approach." Assurances that are not justiciable often end up being empty promises. The people of this country should not have to depend on the government's goodwill for access to health services. This should be a right they are entitled to.

ರ್ಯಾಗಿಂಗ್ ತಡೆ ಅರಿವಿಗಾಗಿ ಯುಜಿಸಿ ಸಾಕ್ಷಚಿತ್ರ

ಬೆಂಗಳೂರು: ಕಾಲೇಜುಗಳಲ್ಲಿ ನಡೆಯುತ್ತಿರುವ ರ್ಯಾಗಿಂಗ್ ತಡೆಗೆ ವಿದ್ಯಾರ್ಥಿಗಳಲ್ಲಿ ಅರಿವು ಮೂಡಿಸಲು ವಿಶ್ವವಿದ್ಯಾಲಯ ಧನಸಹಾಯ ಆಯೋಗ (ಯುಜಿಸಿ) ಎರಡು ಸಾಕ್ಷ್ಯಚಿತ್ರ ನಿರ್ಮಾಣ ಮಾಡಿದೆ. ಈ ಚಿತ್ರಗಳನ್ನು ಕಾಲೇಜಿನಲ್ಲಿ ತೋರಿಸುವ ಮೂಲಕ ರ್ಯಾಗಿಂಗ್ ಬಗ್ಗೆ ಜಾಗೃತಿ ಮೂಡಿಸುವಂತೆ ಎಲ್ಲ ವಿದ್ಯಾಸಂಸ್ಥೆಗಳಿಗೆ ಸೂಚನೆ ನೀಡಿದೆ. ರ್ಯಾಗಿಂಗ್ ಕ್ರಿಮಿನಲ್ ಅಪರಾಧವಾಗಿದೆ. ವಿದ್ಯಾಸಂಸ್ಥೆಗಳಲ್ಲಿ ರ್ಯಾಗಿಂಗ್

ನಿಯಂತ್ರಿಸುವ ಉದ್ದೇಶದಿಂದ ಯುಜಿಸಿ ಸಾಕಷ್ಟು ಕ್ರಮಗಳನ್ನು ಅನುಸರಿಸುತ್ತಿದೆ. ನಿಯಂತ್ರಣ ವ್ಯವಸ್ಥೆ ಹೆಚ್ಚಿಸುವಹಾಗೂ ವಿದ್ಯಾರ್ಥಿಗಳಲ್ಲಿ ಅರಿವು ಮೂಡಿಸುವುದು ಅನಿವಾರ್ಯವಾಗಿದೆ. ಹೀಗಾಗಿ ಯುಜಿಸಿ ಎರಡು ಸಾಕ್ಷ್ಯಚಿತ್ರಗಳನ್ನು ಬಿಡುಗಡೆ ಮಾಡಿದೆ. ಇದನ್ನು ಯುಜಿಸಿ ವೆಬ್ ಸೈಟ್ ನಲ್ಲಿ http://www.ugc.ac.in/ ಅಪ್ ಲೋಡ್ ಮಾಡಿದ್ದು, ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ತೋರಿಸುವಂತೆ ಕಾಲೇಜುಗಳಿಗೆ ಸೂಚಿಸಿದೆ.