

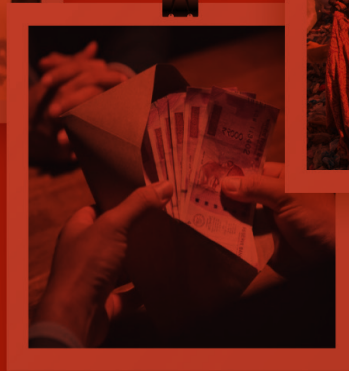
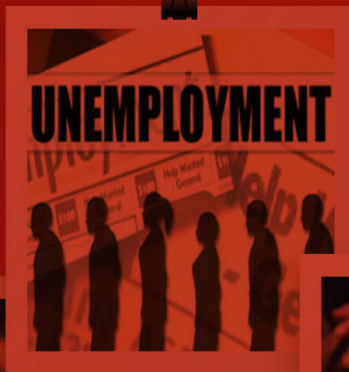
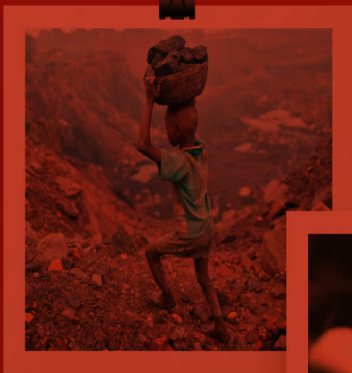


Drishti IAS Presents...

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SOCIAL ISSUES

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Drishti IAS, 641, Mukherjee Nagar,
Opp. Signature View Apartment,
New Delhi

Drishti IAS, 21
Pusa Road, Karol Bagh
New Delhi - 05

Drishti IAS, Tashkent Marg,
Civil Lines, Prayagraj,
Uttar Pradesh

Drishti IAS, Tonk Road,
Vasundhara Colony,
Jaipur, Rajasthan

e-mail: englishsupport@groupdrishti.com, Website: www.drishtias.com

Contact: 011430665089, 7669806814, 8010440440

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Recognition of Transgender Persons in Indian Prisons

Why in News

Recently, the Union Home Ministry sent an **advisory to Heads of Prisons in the States/UTs** to ensure privacy, dignity of the third gender inmates.

- According to a **National Crime Records Bureau**, there were 70 transgender prisoners in jails across the country in 2020.
- The advisory was issued in light of the **Transgender Persons (Protection of Rights) Act, 2019**, which came into effect from January 2020.

Key Points

- **Infrastructure in Prisons:**
 - Separate enclosures or wards and separate toilets and shower facilities for transmen and transwomen to preserve the right to privacy and dignity of the inmates.
- **Respect Self-identity:**
 - The self-identity of transgender persons must be respected at all times while conducting admission procedures, medical examination, frisking, clothing, requisitioning of a police escort, treatment and care inside prisons.
 - **Prisons to facilitate the process of acquiring the transgender identity certificate** under the transgender persons law if such a request is made.
- **Search Protocol:**
 - Searches should be carried out by a **person of their preferred gender** or by a trained medical professional or a paramedic trained in conducting searches.
 - The person **conducting the search must ensure the safety**, privacy and dignity of the person being searched.
- **Admission in Prison:**
 - The prison admission register may be suitably revised to include **"transgender" as a category other than male and female gender**.
 - A similar provision may be made in the **Prison Management System in maintaining electronic records**.

Major Initiatives Related to Transgender

- **Transgender Persons Act, 2019:**
 - The Act defines a transgender person as one whose gender does not match the gender assigned at birth. It includes transmen and trans-women, persons with intersex variations, gender-queers, and persons with socio-cultural identities, such as kinnar and hijra.
- **Judgements of the Supreme Court:**
 - **National Legal Services Authority (NALSA) v. Union of India, 2014:** The SC declared transgender people to be a 'third gender'.
 - **Read down the Provisions of Section 377 of the Indian Penal Code (2018):** The SC decriminalised same-sex relationships.
- **Transgender Persons (Protection of Rights) Rules, 2020:**
 - The Central Government made the rules under the powers conferred by the Transgender Persons (Protection of Rights) Act, 2019.
 - **National Portal for Transgender Persons** was launched under in consonance with the Transgender Persons (Protection of Rights) Rules, 2020.
- **Scheme of 'Shelter Home for Transgender Persons:**
 - To provide safe and secure shelter to transgender persons in need, the Ministry of Social Justice and Empowerment is setting up 'Garima Greh' shelter homes for them.

NEAT Initiative

Why in News

Recently, the **Ministry of Human Resource Development (MHRD)** has announced a new **National Educational Alliance for Technology (NEAT 3.0)** to use **technology for better learning outcomes in Higher Education**.

Key Points

- **Model of NEAT Scheme:** It is based on a **Public-Private Partnership model** between the Government and the **Education Technology (Ed-Tech) companies of India**.
- **Objective:** The objectives of NEAT are to bring the best technological solutions in education pedagogy on a **single platform for the convenience of Economically and Socially weaker sections of society**.

Note:



- **Target Areas:** Technology solutions using **Artificial Intelligence** for customised learning or e-content in niche areas having highly employable skills are being identified for showcasing on the portal.
- **Modus Operandi:** Under this, the government plans to **distribute free coupons** for an array of courses offered by ed-tech companies.
- **Implementing Agency:** All India Council for Technical Education (AICTE).

All India Council for Technical Education (AICTE)

- It was set up in November 1945 as a **national-level apex advisory body**.
- Its purpose was to conduct a survey on the facilities available for technical education and to promote development in the country in a coordinated and integrated manner.
- According to the **National Policy of Education (1986)**, AICTE is vested with:
 - Statutory authority for planning, formulation, and maintenance of norms & standards,
 - Quality assurance through accreditation,
 - Funding in priority areas, monitoring, and evaluation,
 - Maintaining parity of certification & awards,
 - The management of technical education in the country.

Ed-Tech

- **About:** Edtech is the practice of introducing **IT tools into the classroom** to create a more engaging, inclusive and individualized learning experience.
- **Intended Benefits of Ed-Tech:** Technology holds promise and has incredible potential. It can help in:
 - Enabling greater personalisation of education
 - Enhancing educational productivity by improving rates of learning,
 - Reducing costs of instructional material and service delivery at scale
 - Better utilisation of teacher/instructor time.
- **National Education Policy 2020:** India's new **National Education Policy (NEP) 2020** is responsive to the clarion call to integrate technology at every level of instruction.
 - It envisions the establishment of an autonomous body, the **National Education Technology Forum**

(NETF), to spearhead efforts towards providing a strategic thrust to the deployment and use of technology.

➤ Related Initiatives:

- **Digital Infrastructure for Knowledge Sharing (DIKSHA).**
- **PM eVidya.**
- Swayam Prabha TV Channel
- **SWAYAM portal**

Chakmas and Hajongs Communities

Why in News

Recently, the **National Human Rights Commission (NHRC)** in its order directed Ministry of Home Affairs and Arunachal Pradesh to submit action taken report within six weeks against alleged **racial profiling and relocation of the Chakmas and Hajongs from the State**.

- Also both the authorities were directed to **"ensure that human rights of the Chakmas and Hajongs are protected by all the ways"**.
- Members of the two communities have allegedly been victims of **hate crime, police atrocities and denial of rights and beneficiary programmes**.

Key Points

➤ Background:

- In 2015, the **Supreme Court directed the State to grant them citizenship**, but this had not yet been implemented.
 - In a judgment in 1996, the Court had stated that the **"life and personal liberty of every Chakma residing within the State shall be protected"**.
- In light of these orders and given that **most of the Chakma/Hajong community members were born in the State** and have been living peacefully, the Arunachal Pradesh Chief Minister's announcement, in August 2021, that they would be **relocated outside the State** and that steps would be taken for a "census" of the communities was clearly unwarranted.
- After that **Chakma Development Foundation of India (CDFI)** requested urgent intervention of the NHRC against racial profiling of 65,000 Chakma

Note:



and Hajong tribals of Arunachal Pradesh through illegal census which was scheduled to commence from **31st December, 2021** (later plan of census was dropped) for their **deportation / expulsion/ relocation from the State**.

- **Racial profiling** is government or police activity that involves using people's racial and cultural characteristics to identify people to investigate.

➤ **Issues with the Special Census:**

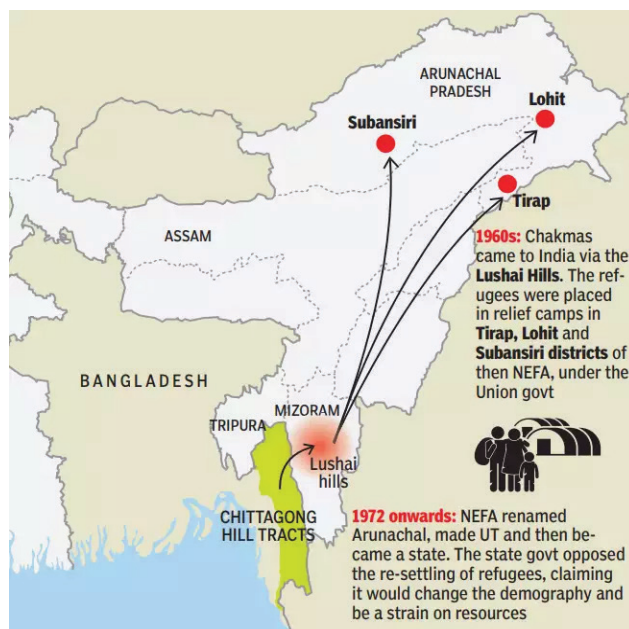
- Chakma organisations said the census was nothing but **racial profiling of the two communities** because of their ethnic origin and **violated Article 14 of the Constitution of India and Article 1 of the International Convention on Elimination of Racial Discrimination ratified by India**.
- Article 14 says that no person shall be denied treatment of equality before the law or the equal protection of the laws within the territory of India.
- The **United Nation General Assembly** in October 1966 proclaimed 21st March as the International Day for the Elimination of Racial Discrimination, to be commemorated annually.

➤ **Chakmas and Hajongs:**

- Mizoram and Tripura have a sizeable population of the **Buddhist Chakmas** while the **Hindu Hajongs mostly inhabit the Garo Hills of Meghalaya** and adjoining areas of Assam.
- The Chakmas and Hajongs of Arunachal Pradesh are migrants from the Chittagong Hill Tracts of erstwhile **East Pakistan, now Bangladesh**.
- Displaced by the Kaptai dam on the Karnaphuli River in the 1960s, they sought asylum in India and were settled in relief camps in the southern and south-eastern parts of Arunachal Pradesh from 1964 to 1969.
 - A majority of them live in the **Changlang district** of the State (**Arunachal Pradesh**) today.

➤ **Citizenship Status:**

- Out of the 65,000 Chakmas and Hajongs, about 60,500 are citizens by birth under Section 3 of the **Citizenship Act, 1955**, after having been born before 1st July 1987, or as descendants of those who were born before this date.
 - The applications of the remaining 4,500 surviving migrants following the 1996 **Supreme Court order** have not been processed to date.



- The **Citizenship (Amendment) Act of 2019**, which amended two sections of the 1955 Act, has nothing to do with the Chakma-Hajongs since they were permanently settled by the Union of India in the 1960s.
- And since 95% of the migrants were born in the **North-East Frontier Agency or Arunachal Pradesh**, the **Inner Line Permit** mandatory under the Bengal Eastern Frontier Regulation of 1873 for outsiders seeking to visit the State, also does not apply to them.

SC on Inheritance of Daughters

Why in News

Recently, the **Supreme Court (SC)** has ruled that daughters will have equal rights to their father's property even prior to the enactment of the **Hindu Succession Act (HSA) of 1956**.

- The case involved a **dispute over the property of a person who died in 1949** leaving behind a daughter who also died issueless in 1967.
- Earlier, the **trial court held that since the person had died prior to the enforcement of HSA, 1956 therefore the petitioner and her other sisters were not the heirs** as on the date of his death and was not entitled to partition of share in the suit properties. Later, the **High Court, too, dismissed the appeal against the trial court**.

Note:



Key Points

- **Daughters Inheritance:** It ruled that the **property of a man who had died** without executing a will and is **survived only by a daughter will devolve upon the daughter** and not others such as his brother.
 - Earlier in 2020, the SC has already **expanded the Hindu women's right** to be the coparcener (joint legal heir) and inherit ancestral property on terms equal to male heirs.
- **Ancient Texts & Judicial Pronouncements:** The SC referred to ancient texts (smritis), **commentaries by various renowned learned persons** and even **judicial pronouncements which have recognised the rights of several female heirs**, the wives and the daughter's being the foremost of them.
 - Tracing the sources of customary Hindu law on inheritance, **the SC discussed Mitakshara law.**
 - SC also looked into **Vyavastha Chandrika**, a digest of Hindu Law by Shyama Charan Sarkar Vidya Bhushan which quoted 'Vrihaspati' as saying 'the **wife is pronounced successor to the wealth of her husband**; in her default, the daughter. As a son, so does the daughter of a man proceed from his several limbs.
 - The SC **also noted that the book quoted Manu as saying** "the son of a man is even as himself, and the daughter is equal to the son. How then can any other inherit his property, notwithstanding the survival of her, who is, as it were, himself".
- **Old Law:** Right of a widow or daughter to inherit the self-acquired property or share received in partition of a coparcenary property of a Hindu male dying intestate is **well recognised not only under the old customary Hindu Law.**
 - If a property of a male Hindu dying intestate is a self-acquired property or obtained in partition of a coparcenary or a family property, the same would devolve by inheritance and not by survivorship, and a **daughter of such a male Hindu would be entitled to inherit such property** in preference to other collaterals".
- **Property After Woman's Death:** The court also said that if a female Hindu dies intestate without leaving any issue, then the **property inherited by her from her father or mother would go to the heirs of her father** whereas the property inherited from her husband or father-in-law would go to the heirs of the husband.

- In case a **female Hindu dies leaving behind her husband or any issue**, then **Section 15(1)(a) of the HSA 1956 will come into operation** and the properties left behind including the properties which she inherited from her parents would devolve simultaneously upon her husband and her issues.

Land Rights and Women in India

- **Related Data:** Property in India is largely inclined to be passed on to male heirs. This in turn deprives women of agency, financial independence and entrepreneurship. According to the **National Family Health Survey-5**, **43% of women respondents reported owning house/land alone or jointly**, but doubts remain about women's ability to actually access and control property.
 - In fact, a 2020 University of Manchester working paper found **barely 16% of women in rural landowning households own land.**
- **Patriarchy:** In deep **patriarchal mores and rural-agrarian settings, property, which is seen as a primary source of wealth**, is largely inclined to be passed on to male heirs.
- **State Laws:** Inheritance laws for agricultural land remain a minefield with conflicting central personal laws and state laws.
 - In this regard, states such as Punjab, Haryana, Uttar Pradesh (UP) and even Delhi **have regressive inheritance provisions.**
 - In fact, **Haryana twice tried to take away the progressive rights given to women through HSA 1956**, while in **UP since 2016 married daughters aren't considered primary heirs.**
- **Ground-level Resistance:** There is also a lot of **ground-level resistance to registering land for women in several north Indian states.** Thus, women's empowerment and property rights remain an unfinished project.

Hindu Succession Act, 1956

- **About:**
 - The **Mitakshara school of Hindu law codified as the Hindu Succession Act, 1956** governed succession and inheritance of property but only recognised males as legal heirs.
 - It applied to everyone who is not a **Muslim, Christian, Parsi or Jew by religion. Buddhists, Sikhs, Jains and followers of Arya Samaj, Brahmo Samaj**, are also considered Hindus for this law.

- In a Hindu Undivided Family, **several legal heirs through generations can exist jointly**.
- Traditionally, only male descendants of a common ancestor along with their mothers, wives and unmarried daughters are considered a joint Hindu family. The legal heirs hold the family property jointly.
- **Hindu Succession (Amendment) Act, 2005:**
 - The 1956 Act was amended in September 2005 and **women were recognised as coparceners for property partitions arising from 2005**.
 - Section 6 of the Act was amended to make a daughter of a coparcener also a coparcener by birth "in her own right in the same manner as the son".
 - It **also gave the daughter the same rights and liabilities** "in the coparcenary property as she would have had if she had been a son".
 - The law **applies to ancestral property and to intestate succession** in personal property, where succession happens as per law and not through a will.

Oxfam Report: Inequality Kills

Why in News

Recently, the **Oxfam report** titled "Inequality Kills" was released, the report **pointed out a stark income divide worsened by the Covid pandemic**, globally and in India.

Key Points

- **Magnitude of Growing Inequities:** Widening economic, gender, and racial inequalities—as well as the inequality that exists between countries—are tearing our world apart.
 - The wealth of the **world's 10 richest men has doubled** since the pandemic began.
 - The incomes of **99% of humanity are worse off because of Covid-19**.
 - Inequality **contributes to the death of at least one person every four seconds**.
- **Economic Violence:** A kind of economic violence is perpetrated when structural policy choices are made for the richest and most powerful people. This affects the poorest people, women and girls, and racialized groups most.
- **Unequal Access to Healthcare:** Healthcare of good quality is a human right, but is too often treated as a luxury for rich people.
- **Gender-Based Violence:** It is rooted in patriarchy and sexist economic systems. For example, sex-selective abortions.
- **Poverty-Induced Hunger:** Hunger is one of the ways in which poverty kills, and it is faced by billions of ordinary people all over the world each day.
- **Inequality of Climate Change Crisis:** The emissions of the richest people are driving this Climate Change crisis, with the CO₂ emissions of 20 of the richest billionaires estimated on average to be 8,000 times that of the billion poorest people.
- **Vaccine Apartheid:** Rich countries may back their pharmaceutical monopoly billionaires and hoard vaccines to protect their populations, but in so doing they push their own people toward risk from the mutations that vaccine apartheid is creating.
 - Vaccine apartheid as a concept calls attention to the effects of inequitable vaccine distribution policies on historically subordinated peoples.

Indian Scenario

- **Decline in Social Security Expenditure:**
 - A Covid continued to ravage India, the country's **healthcare budget saw a 10% decline** from RE (Revised Estimates) of 2020-21.
 - There was a **6% cut in allocation for education**.
 - The **budgetary allocation for social security schemes declined from 1.5% of the total Union budget to 0.6%**.
- **Growing Inequalities:** According to the report, the **income of 84% of households in the country declined in 2021**, but at the same time, the **number of Indian billionaires grew from 102 to 142**.
 - **Growing Rich:** During the pandemic, the wealth of Indian billionaires increased from Rs 23.14 lakh crore to Rs 53.16 lakh crore.
 - India has the third-highest number of billionaires in the world, just behind China and the United States.
 - There is a 39% increase in the number of billionaires in India in 2021.
 - **Growing Poor:** More than 4.6 crore Indians are estimated to have fallen into extreme poverty in

Note:



2020. This is nearly half of the global new poor according to the United Nations.

- Also, in the same year, the share of the bottom 50% of the population in national wealth was a mere 6%.
- The unemployment in India has also increased.
- **Blow to Gender Parity:** Women collectively lost Rs 59.11 lakh crore in earnings in 2020, with 1.3 crores fewer women in work now than in 2019.
- **Increasing Fiscal Deficit:** Lowering **corporate taxes from 30% to 22%** to attract investment last year (2020) resulted in a loss of Rs 1.5 lakh crore, which contributed to the increase in India's **fiscal deficit**.
- **Unequal Federalism:** Despite the country's federal structure, the revenue resources remained concentrated in the Centre's hands.
 - However, the management of the pandemic was left to the states – who were not equipped to handle it with its financial or human resources.

Special Marriage Act 1954

Why in News

Recently, the law that governs inter-faith marriages in the country, the **Special Marriage Act (SMA), 1954**, is being challenged in the Supreme Court.

- In 2021, petitions were filed to strike down several of its provisions.

The Special Marriage Act (SMA), 1954

- It is the legislation made to validate and register interreligious and inter-caste marriages in India.
- It allows two individuals to **solemnise their marriage through a civil contract**.
- No religious formalities are needed to be carried out under the Act.
- This Act includes **Hindus, Muslims, Christians, Sikhs, Jains, and Buddhists marriages**.
- This Act applies not only to Indian citizens who belong to different castes and religions but also to Indian nationals who live abroad.

About the Current Petition

- **Section 5** of the SMA requires a **person marrying** under this law to give a notice of intended marriage.

- **Section 6(2)** says it should be **affixed at a conspicuous place at the office of the marriage officer**.
- **Section 7(1)** allows any person to object to the marriage within 30 days of the publication of the notice, failing which a marriage can be solemnised under **Section 7(2)**.
- Due to these provisions breaching personal liberties, several inter-faith couples approached the Court, **challenging Sections 6 and 7 of the Act**.

Key Points

- **About Interfaith Marriages:**
 - The matrimonial relationship developed between two individuals having different religious faiths.
 - Although marrying into a different religion is a matter of choice for an adult, there are certain issues regarding the same.
- **Issues with Interfaith Marriages:**
 - Interfaith marriages are believed to be a **forced conversion of one of the spouses (mostly women)**.
 - As per the Muslim Personal law, in order to get married to a non-Muslim, **conversion of religion is the only way**.
 - Hindu religion allows **only monogamy** and those **who want to marry a second time take another course**.
 - There is no provision regarding **caste determination of children born out of such marriages**.
 - The Special Marriage Act, 1954 is **not compatible with backwardness of the society**.
 - There is debate over the validity of **Article 226 in the context of annulling the interfaith marriage by the high court**.
 - **Article 226:** Power of high courts to issue certain **writs**.

PM-POSHAN Scheme

Why in News?

Recently, the central government requested state governments/union territory administrations to **explore the possibility of introducing millets under the PM POSHAN Scheme** preferably in the districts where eating millets is a culturally accepted food habit.

Note:



- **NITI Aayog** has also been advocating the need to introduce millets in the mid-day meal programme (now PM POSHAN Scheme), moving away from rice and wheat.

What are the Benefits of Millets?

- Millets or nutri-cereals, which include **Jowar, Bajra, and Ragi**, are rich in minerals and B-complex vitamins, as well as proteins and antioxidants, making them an ideal choice for improving the nutritional outcome of children.
- **Multidimensional benefits** associated with millets can address the issues related to **nutrition security, food systems security, and farmers' welfare**.
- Further, many unique features linked with millets makes them a suitable crop which is resilient to India's varied agro-climatic conditions.
- India pushed a resolution to declare **2023 as the international year of millets** which has been adopted by the United Nations General Assembly.

What is the PM Poshan Scheme?

- In September 2021, the Union Cabinet approved the **Pradhan Mantri Poshan Shakti Nirman or PM-POSHAN** for providing one hot cooked meal in **Government and Government-aided schools** with the financial outlay of **Rs 1.31 trillion**.
- The scheme **replaced the national programme for mid-day meal in schools** or Mid-day Meal Scheme.
- It has been launched for an initial period of **five years (2021-22 to 2025-26)**.

What are the Features of the PM Poshan Scheme?

- **Coverage:**
 - Primary (1-5) and upper primary (6-8) schoolchildren are currently entitled to 100 grams and 150 grams of food grains per working day each, to ensure a minimum of 700 calories.
 - It also covers **students of balvatikas (children in the 3-5 year age group)** from pre-primary classes.
- **Nutritional Gardens:**
 - Use of locally-grown nutritional food items will be encouraged from **"school nutrition gardens"** for boosting the local economic growth, and will also include involvement of **Farmers Producer**

Organizations (FPO) and Women Self Help Groups in the implementation of the scheme.

➤ Supplementary Nutrition:

- The scheme has a provision for **supplementary nutrition for children** in **aspirational districts** and those with high prevalence of **anaemia**.
 - It **does away with the restriction** on the part of the Centre to provide funds only for wheat, rice, pulses and vegetables.
 - Currently, if a state decides to add any component like milk or eggs to the menu, the Centre does not bear the additional cost. Now that restriction has been lifted.

➤ Tithi Bhojan Concept:

- TithiBhojan is a **community participation programme** in which people provide special food to children on special occasions/festivals.

➤ Direct Benefit Transfer (DBT):

- The Centre has directed the states and the UTs to switch to **Direct Benefit Transfer (DBT) system** for providing compensation to the cooks and helpers working under the scheme.
- This is to ensure no leakages at the level of district administration and other authorities.

➤ Nutrition Expert:

- A nutrition expert is to be appointed in each school whose responsibility is to ensure that health aspects such as Body Mass Index (BMI), weight and haemoglobin levels are addressed.

➤ Social Audit of the Scheme:

- A **social audit of the scheme** has also been **mandated** for each school in each state to study the implementation of the scheme, which was so far not being done by all states.

World Neglected Tropical Diseases Day

Why in News?

Neglected tropical disease day is observed **every year on 30th January**. It was declared in the **74th World Health Assembly** (2021).

- The proposal to recognise the day was **floated by the United Arab Emirates**. It was adopted unanimously by the delegates.

Note:



- The **World Health Assembly** is the decision-making body of the **World Health Organization (WHO)**.

What are Neglected Tropical Diseases (NTDs)?

- NTDs are a group of infections that are most common among marginalized communities in the developing regions of Africa, Asia and the Americas.
- They are caused by a variety of **pathogens** such as **viruses, bacteria, protozoa and parasitic worms**.
 - NTDs are especially **common in tropical areas** where people do **not have access to clean water or safe ways** to dispose of human waste.
- These diseases **generally receive less funding for research and treatment** than malaises like **tuberculosis, HIV-AIDS and malaria**.
- Examples of NTDs are: **snakebite envenomation, scabies, yaws, trachoma, Leishmaniasis and Chagas disease** etc.

Anaemia Mukh Bharat

Why in the News?

Recently, the Union Minister of State for Health and Family Welfare provided **information on Anaemia Mukh Bharat (AMB) strategy**.

- In **2018**, the Government of India **launched the AMB strategy** with the target to reduce anaemia in the vulnerable age groups such as women, children and adolescents.
- AMB is based on a life cycle approach, providing preventive and curative mechanisms through a **6X6X6 strategy** including **six target beneficiaries, six interventions and six institutional mechanisms** for all stakeholders to implement the strategy.

What is Anaemia?

- It is a condition in which the **number of red blood cells or their oxygen-carrying capacity is insufficient** to meet physiologic needs, which vary by age, sex, altitude, smoking, and pregnancy status.
- Iron deficiency is the most common cause of anaemia, although other conditions, such as **folate, vitamin B12 and vitamin A deficiencies, chronic inflammation, parasitic infections**, and inherited disorders can all cause anaemia.

- In its severe form, it is **associated with fatigue, weakness, dizziness and drowsiness**. Pregnant women and children are particularly vulnerable.
- According to the **National Family Health Survey 2019-20**, Indian women and children are overwhelmingly anaemic.
 - Under phase I, 22 states and UTs were surveyed and in a majority of these states and UTs, more than half the children and women were found to be anaemic.
- According to the **World Health Organization (WHO)**, women in the reproductive age group and having haemoglobin levels lower than **12 grams per decilitre (g / dL)**, as well as children under five with haemoglobin levels lower than **11.0 g / dL** are considered anaemic.

What are the Highlights of AMB Strategy?



Expanding Scope of NCW

Why in News?

Recently, the **30th Foundation Day (31st January)** of the **National Commission for Women (NCW)** was celebrated.

Note:



- According to the Prime Minister, given the evolving needs of women in the country, the scope of NCW must be broadened.

What is the need to expand the scope of the NCW?

- **Development of New India:**
 - The **Atmanirbhar Bharat** (self-reliant India) campaign has shown the link between the ability of women with the development of the country.
 - This change is visible as about 70% beneficiaries of **Pradhan Mantri MUDRA Yojana** are women.
 - The country has seen a threefold increase in the number of **women self-help groups** in the last 6-7 years.
 - Similarly, in more than 60 thousand **startups** that have emerged after 2016, 45% have at least one woman director.
- **Old Thinking in Society:**
 - Industries from textile to dairy have progressed due to women's skills and power.
 - India's economy relies on **Micro, Small and Medium Enterprises** and there is a need to promote women entrepreneurs in the country.
 - However, people with **old thinking** are of the view that the women's roles are **restricted to domestic work**.
- **Increasing Crime Against Women:**
 - In 2021, the NCW had informed that there was a rise of **46%** in complaints of crimes against women in the first eight months of 2021 over the corresponding period of preceding year.
 - Crimes that women were subjected to: **Domestic violence, Harassment of, married women or dowry harassment, Sexual harassment at workplace, Rape and attempt to rape, Cyber crimes**.

Rice Fortification

Why in News?

The Minister of Consumer Affairs, Food and Public Distribution informed the Rajya Sabha that the government approved the **Centrally Sponsored Pilot Scheme** on "**Fortification of Rice & its Distribution under Public Distribution System**" for a period of 3 years beginning in 2019-20 with total outlay of Rs. 174.64 Cr.

What is the Scheme?

- **About:**
 - To address anemia and micro-nutrient deficiency in the country, the Government of India approved this **scheme for a period of 3 years in 2019-20**.
 - Under the Scheme, **FCI (Food Corporation of India)** has been asked to come up with a comprehensive plan for procurement and distribution of fortified rice in all the Districts of the country under **Integrated Child Development Services (ICDS) & Mid-Day Meal (MDM) Scheme** from 2021-2022.
 - The mid-day meal scheme is now known as **PM POSHAN**.
 - Special focus remains on supplying fortified rice to the 112 specially identified **Aspirational Districts** of the country.
- **Objectives the Scheme:**
 - **Distribution of Fortified Rice through Public Distribution System**, to cater 15 Districts in the country - preferably one district per State in the initial phase of Implementation.
 - **Coverage of NFSA (National Food Security Act)** beneficiaries under PDS with Fortified Rice in the selected Districts.
 - **Facilitate cross learning and sharing of best practices** among States/UTs and DoF&PD (Department of Food and Public Distribution).
 - To evaluate the provision, **coverage and Utilization of Fortified Rice by the target population** as well as the efficiency/effectiveness of the consumption of fortified rice in reducing the targeted micronutrient deficiencies in different age and gender groups.

What is Food Fortification and its Need?

- **Fortification:**
 - Fortification is the **addition of key vitamins and minerals such as iron, iodine, zinc, Vitamin A & D to staple foods such as rice, milk and salt to improve their nutritional content**.
 - These nutrients may or may not have been originally present in the food before processing.
- **Fortification of Rice:**
 - According to the Food Ministry, fortification of rice is a **cost-effective and complementary strategy to increase vitamin and mineral content in diets**.

Note:



- According to FSSAI norms, 1 kg fortified rice will contain iron (28 mg-42.5 mg), folic acid (75-125 microgram) and Vitamin B-12 (0.75-1.25 microgram).

- In addition, rice may also be fortified with micronutrients, singly or in combination, with zinc, Vitamin A, Vitamin B1, Vitamin B2, Vitamin B3 and Vitamin B6.

➤ **Need of Fortification:**

- India has very high levels of malnutrition among women and children. According to the Food Ministry, every second woman in the country is anemic and every third child is stunted.
- India has **slipped to 101st position in the Global Hunger Index (GHI) 2021** of 116 countries, from its 2020 position of 94th.
- The deficiency of micronutrients or micronutrient malnutrition, **also known as "hidden hunger"**, is a serious health risk.
- **Rice is one of India's staple foods**, consumed by about two-thirds of the population. Per capita rice consumption in India is 6.8 kg per month. Therefore, fortifying rice with micronutrients is an option to supplement the diet of the poor.

SAMRIDH Initiative

Why in News?

Atal Innovation Mission (AIM), **NITI Aayog**, and the **US Agency for International Development (USAID)** announced a new partnership under the **Sustainable Access to Markets and Resources for Innovative Delivery of Healthcare (SAMRIDH)** initiative.

- The collaboration will focus on **innovations across the healthcare landscape with the common goal to mount an effective response** to the ongoing third wave of **Covid-19** and build health system preparedness for future infectious disease outbreaks and health emergencies.
- The **Planning Commission** was replaced by a new **Think Tank – NITI Aayog** on 1st January, 2015 with emphasis on 'Bottom – Up' approach to envisage the vision of **Maximum Governance, Minimum Government**, echoing the spirit of 'Cooperative Federalism'.
- **AIM** is a flagship initiative set up by the NITI Aayog to **promote a culture of innovation and entrepreneurship** in the country.

What is the SAMRIDH Initiative?

➤ **About:**

- In 2020 the Indian government, academia, and the private sector developed the **innovative SAMRIDH blended finance facility** to combine **public and philanthropic funds with commercial capital** to create and rapidly scale market-based health solutions.

- **Blended finance** is an approach towards financing where catalytic funding (e.g grants and concessional capital) from public and philanthropic sources is utilized to mobilize additional private sector investment to realize social goals and outcomes.

- It will improve **access to affordable and quality healthcare for vulnerable** populations in tier-2 and tier-3 cities, and rural and tribal regions.

- This initiative is implemented **by a Technical Support Unit** managed by **IPE Global (a company)**.

➤ **Objectives:**

- **Bridge supply-side gaps in healthcare facilities** to respond to health emergencies in the immediate, medium, and long term.
- Accelerate scale-up and **adoption of innovative and market-based health solutions**.
- **Mobilize resources** to support high impact health solutions and build sustainable healthcare systems.
- **Promote local and comprehensive solutions** at the community and facility level for vulnerable populations.

➤ **Significance:**

- AIM and SAMRIDH will **leverage philanthropic capital, and public sector resources to offset barriers for commercial investments in small and medium health enterprises** to invest in and scale healthcare solutions.

How is it different from the SAMRIDH Programme?

- The **Ministry of Electronics & Information Technology (MeitY)** launched the '**Start-up Accelerators of MeitY for Product Innovation, Development and growth (SAMRIDH)**' programme in August 2021.
- It was launched to **create a conducive platform to Indian Software Product start-ups to enhance their products** and secure investments for scaling their business.

- The new partnership announced will **enhance SAMRIDH's efforts to reach vulnerable populations**, leveraging AIM's expertise in innovation and entrepreneurship.



Identify and support a minimum of 35 to 40 healthcare innovators (over 3 years) by enabling access to affordable capital



Mobilize a capital pool of \$100 million+ from private sector and bilateral organizations to support inclusive business models



Strengthen comprehensive healthcare services focused at the vulnerable 40% of the population with a high disease burden



Reduce the out-of-pocket expenditure (OOPE) for lower economic and underserved communities

Operation AAHT

Why in News?

Recently, the **Railway Protection Force (RPF)** has launched a nationwide operation to curb human trafficking.

- As part of “**Operation AAHT**”, special teams will be deployed on all long-distance trains/routes with a focus on rescuing victims, particularly women and children, from the clutches of traffickers.
- The **National Crime Records Bureau** registers about 2,200 cases of Human Trafficking cases on an average each year.

What is Operation AAHT?

- The Indian Railways, which transported over 23 million passengers each day (pre-pandemic), is the largest, fastest and most reliable carrier for suspects who trafficked scores of women and children.
- Under **Operation AAHT**, the infrastructure and intelligence network of the force could be utilised to **collect, collate and analyse clues on victims, source, route, destination, popular trains used by suspects, the identity of carriers/agents, kingpins** etc and shared with other law-enforcing agencies.
- Under this, the RPF could act as a **bridge cutting across States** to assist the local police in the mission to curb the menace.
- Also, **cyber cells** would start patrolling the web/social media to look for digital footprints of Human Trafficking and the focus would be more on trains originating from districts bordering Nepal, Bangladesh and Myanmar.

HUMAN TRAFFICKING in INDIA

HUMAN TRAFFICKING

Involves recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion/deception, for the purpose of exploitation.

NCRB 2018:

5264

Cases reported

64%

Females

48%

Below 18



MOST SUSCEPTIBLE

To fall victim to such malpractices are the **economically disadvantaged**, and people belonging to the **SC, ST, AND OBC CATEGORIES**

CAUSES

Poverty, social or cultural practice, and migration, porous nature of borders, corrupt Government officials, the involvement of international organised criminal groups or networks etc.



HUBS



AFTER EFFECTS

Mental and Physical ailments such as depression, anxiety, PTSD, HIV, AIDS, STDs, TB



RELEVANT LAWS

- Article 23 and 24 of the Constitution of India.
- Sections in IPC such as 366A, 366B, 370 and 374.
- The Juvenile Justice Act
- Information Technology (IT) Act
- Immoral Traffic Act
- Prevention of Child Labour Act
- Bonded Labour (Abolition) Act

CHALLENGES

- Inadequate understanding & bad implementation of laws
- No regulation of social media
- Inadequate data

PM CARES Scheme for Children

Why in News?

Recently, the Centre has extended the **PM Cares for Children Scheme** till 28th February 2022, which was earlier valid till 31st December 2021.

What is the 'PM-CARES for Children' Scheme?

- **About:**

Note:





Government stands with children **who lost their parents due to COVID-19**



Such children to **get a monthly stipend** once they **turn 18 and a fund of 10 lakh when they turn 23 from PM CARES**



Free education to be ensured for children who lost their parents to COVID-19



Children will be assisted to **get an education loan for higher education & PM CARES will pay interest on the loan**



Children will **get free health insurance of 5 lakh under Ayushman Bharat till 18 years** & premium will be paid by PM CARES



Children represent the future of the country and we will do everything to support and protect the children: **PM Narendra Modi**



It is our duty, as a society, to care for our children and instil hope for a bright future: **PM Narendra Modi**

- The scheme was **launched on 29th May, 2021** with the aim to support **children who lost both or surviving parent(s)**, legal guardian/adoptive parents or single adoptive parent to **Covid-19**.
 - The status of children in need of care and protection included orphans (10,094), lost either parent (1,36,910) and abandoned (488) taking the total to 1,47,492.
 - In the **gender-wise break-up**, out of the 1,47,492 children, there are 76,508 boys, 70,980 girls and four transgender.
- The objective is to **ensure comprehensive care and protection of children** in a sustained manner, enable their wellbeing through health insurance, empower them through education and equip them for self-sufficient existence with financial support on **reaching 23 years of age**.
- **Features of the Scheme:**
 - **Corpus of Rs. 10 Lakh:**
 - The scheme offers a **corpus of Rs. 10 lakh to each of these children** from the **PM CARES fund**.
 - This corpus will be used to give a **monthly stipend from 18 years of their age**, for the next five years and on reaching the age of 23 years, he or she will get the corpus amount as one lump-sum for personal and professional use.
 - **Education to the Children:**
 - The **education expenses of younger children** are supported by way of admission to **Kendriya Vidyalayas** and private schools up to higher secondary level.

- These children are also supported **during their higher education** through either a scholarship equivalent to the tuition fees or educational loans where the interest on the loan will be paid by the PM-CARES fund.

○ **Health Insurance:**

- All children will be enrolled as a beneficiary under **Ayushman Bharat Scheme** with a health insurance cover of Rs. 5 lakh.
- The premium amount will be paid by PM-CARES till a child turns 18.

What is the PM-CARES Fund?

- The government has set up the **Prime Minister's Citizen Assistance and Relief in Emergency Situations Fund (PM-CARES Fund)** to deal with any kind of emergency or distress situation like posed by the Covid-19 pandemic.
- The Fund is a **public charitable trust** with the Prime Minister as its Chairman. Other Members include Defence Minister, Home Minister and Finance Minister.
- The Fund enables micro-donations as a result of which a large number of people will be able to contribute with the smallest of denominations.
- It will **strengthen disaster management capacities** and encourage research on protecting citizens.
- Contribution to PM - CARES Fund Qualifies as **CSR (Corporate Social Responsibility) Expenditure**.

What are the other Children Related Initiatives Taken by the Government During Covid?

- **Bal Swaraj Covid-Care:**
 - The **National Commission for Protection of Child Rights (NCPCR)** has devised an online tracking portal "**Bal Swaraj (Covid-Care)**" for children in need of care and protection.
 - This has been created with a **purpose for online tracking and digital real time monitoring mechanism** of children who are in need of care and protection.
- **PM e-VIDYA:**
 - On 17th May, 2020, a comprehensive initiative called PM e-VIDYA was initiated as part of **Atma Nirbhar Bharat Abhiyan** which unifies all efforts related to digital/online/on-air education to enable multi-mode access to education.

Note:



- It was launched under the **One Nation One Digital Platform** with the objective of **protecting the education of children during the Covid-19 pandemic**.
- **Manodarpan:**
 - It is aimed to **provide psychosocial support to students**, family members and teachers for their mental health and well-being during the times of **Covid-19**.

Leprosy

Why in News?

According to the latest report by the **Leprosy Mission Trust India**, the **Covid-19 pandemic** and its ensuing recommendations on **social distancing and lockdowns** caused a fall of **62.5% in the detection of active leprosy cases** between April and September 2020 in four States — **Andhra Pradesh, Odisha, Bihar and Madhya Pradesh**.

- The **second wave** has put brakes on the **Leprosy Case Detection Campaign** and the scope for getting healthcare and disability management services in institutional setup reduced.
- Further, the pandemic highlighted that the '**vulnerable population**' is not a homogenous entity. Their vulnerability is sometimes a complex intersection of **different social variables: poverty, disability, stigma, exclusion, etc.**

What is Leprosy?

- **Bacterial Infection:** Leprosy is a **chronic, progressive bacterial infection**. It is caused by a bacterium called **Mycobacterium Leprae**, which is an acid-fast rod-shaped bacillus.
 - It is also known as **Hansen's Disease**.
- **One of Oldest Disease:** It is **one of the oldest diseases** in recorded history, afflicting humanity since time immemorial.
 - A written account of Leprosy dates as far back as **600 B.C.**
 - It was **well recognized in the oldest civilizations of China, Egypt and India** thousands of years ago.
- **Areas of Infection:** Skin, Peripheral nerves, Upper respiratory tract and Lining of the nose.
 - It is a disease that **leaves a terrifying image in its wake of mutilation, rejection, and exclusion** from society.

- **Mode of Transmission:** Mainly by breathing airborne droplets from the affected individuals. It can be contacted at any age.
- **Symptoms:**
 - Red patches on the skin.
 - Skin Lesion
 - Numbness in arms, hands, and legs.
 - Ulcers on the soles of feet.
 - Muscle Weakness and excessive weight loss.
- **Long Incubation Period:** It usually takes about **3-5 years for symptoms to appear after coming into contact with Leprosy causing bacteria**.
 - The long incubation period makes it difficult for doctors to determine when and where the person got infected.
- **Cure:** Leprosy is curable with the **combination of drugs known as Multi-Drug Therapy (MDT)**.

What are Steps

Taken by India for its Eradication?

- The Government of India started the **National Leprosy Control Programme in 1955**. It was only in the 1970s that a definite cure was identified in the form of **MultiDrug Therapy**.
- The 1st Phase of the **World Bank supported National Leprosy Elimination Project** started from 1993-94.
- The **National Leprosy Eradication Programme** is being continued with Government of India funds from January 2005 onwards.
- The **National Health Policy 2002**, Government of India had set the goal of elimination of leprosy i.e. to reduce the no. of cases to **< 1/10,000 population** by the year 2005.
- The **National Leprosy Eradication Programme achieved the goal of elimination of leprosy** as a public health problem, defined as less than 1 case per 10,000 Population, at the National Level in the month of December, 2005.
 - **World Health Organisation Global Leprosy strategy document for 2016–2020** calls for promoting inter-sectoral collaboration within countries.
- In 2017, **SPARSH Leprosy Awareness Campaign** was launched to promote awareness and address the issues of stigma and discrimination.
 - The measures included in the campaign like **contact tracing, examination, treatment, and**

Note:



chemoprophylaxis are expected to bring down the number of Leprosy cases.

- The special emphasis on **women, children and those with disabilities** are expected to flush out more hidden cases.
- In addition to continuing to administer MDT to patients, **new preventive approaches such as Chemoprophylaxis and immunoprophylaxis** are being considered to break the chain of transmission and reach zero disease status.
- In **2018 the Supreme Court directed states and the Central government** to roll out awareness programmes about leprosy.
 - The court said campaigns should utilise positive images and stories of those who had been cured.
- In 2019, Lok Sabha passed a bill seeking to **remove Leprosy as a ground for divorce**.
- In commemoration of the **150th birth anniversary of Mahatma Gandhi on 2nd October 2019**, the NLEP has prepared the comprehensive plan to reduce the grade of disability to less than one case per million people by October 2019.

Bonafide Plea of Juvenility

Why in News?

Recently, the **Supreme Court**, while dismissing an appeal challenging the decision of the Punjab and Haryana High Court, held that **a plea of juvenility has to be raised in a bonafide and truthful manner**.

- The Court said that **if a document of dubious nature is relied on to seek juvenility, the accused cannot be treated to be juvenile** keeping in view that the law is a beneficial legislation.
- Juvenile offenders (age below 18 years) are given protection under the **Juvenile Justice (Care and Protection of Children) Act, 2000 (JJ Act)**.
- Under **Section 7 A of the JJ Act**, an accused person can raise the '**claim of juvenility**' before "**any court, at any stage, even after the final disposal of the case**".

How the Juvenile

Justice System Evolved in India?

- **Definition of Juvenile Justice System:** The juvenile justice system concerns children who have conflicted with the law and need care and protection.

- In India, a person **below the age of 18 years is considered a juvenile**.
- Minor is a person who has not attained the age of full legal responsibility and the **juvenile is a minor who has committed some offence or needs care and protection**.
- In India, any child **below the age of 7 years** can not be convicted of any crime because of the **doctrine of Doli incapax** which means incapable of forming intent to commit a crime.
- **Main Objective of the Juvenile Justice System:** To rehabilitate young offenders and **give them a second chance**.
 - The main reason for this protection is that **children's brains are not fully developed** and they **do not have a complete sense of wrong and right**.
 - When parents have **poor parenting skills, abusive home, violence in the home**, a single parent who left their children for a long time unsupervised.
 - The influence of **news, movies, web series, social media, and lack of education** are also reasons why children indulge in criminal activities.
- After the independence of India, the constitution provided some provisions under the **fundamental rights and Directive principles of state policy** to protect and develop children.
- **Children Act, 1960:** This act prohibited the imprisonment of children in any circumstances and provided care, welfare, training, education, maintenance, protection, and rehabilitation.
- **Juvenile Justice Act, 1986:** The Juvenile justice act 1986 came into force to provide uniformity of the Children Act and set the standard for protection of juveniles as per the **1959 United Nations declaration of the child**.
 - In 1959, the United Nations General Assembly adopted the Declaration of the Rights of the Child.
- **Juvenile Justice (care and protection of children) Act, 2000:** The Government of India repealed the Juvenile Justice Act (JJA) and came up with a new Act, the **Juvenile Justice (care and protection of children) Act, 2000**.
 - It had much better terminology such as '**conflict with the law**' and '**need care and protection**'.
 - Juveniles who have a conflict with law are handled by the juvenile justice board and juveniles who need care and protection are handled by the child welfare committee.

Note:



- In 2006 Amendment was made in the Juvenile Act to make clear that juvenility is considered from the date when a crime is committed.
- **Juvenile Justice (care and protection of children) Act, 2015:** It replaced the Juvenile Act 2000.
 - This act was passed by the parliament after much controversy and protest. It has introduced many changes in existing law.
 - This act **allows juveniles involved in the heinous crimes age group between 16-18 are treated as adults.**
 - Making the juvenile justice system more responsive and according to the changing circumstances of society.
 - The Act gives a clear definition of orphaned, abandoned, surrendered children and provides an organized system for them.
- **Juvenile Justice (care and Protection) Amendment Act 2021:** Recently, Parliament passed the **Juvenile Justice (care and Protection) Amendment Act 2021.**
 - The amendment provides strength to the provision of protection and adoption of children.
 - There are many adoption cases pending before the court and to make proceedings of the court faster now the power is transferred to the district magistrate.
 - Amendment provides that the district magistrate has the authority to issue such adoption orders.

International Day of Persons with Disabilities

Why in News

Every year on **3rd December**, International Day of Persons with Disabilities is observed.

- Earlier, the **draft norms for ensuring accessibility** for the differently abled at airports has been released by the Ministry of Civil Aviation.

Key Points

- **Background:**
 - The annual observance of this day **began in 1992** after it was proclaimed by the **United Nations General Assembly** resolution 47/3.

Disability

- A disability is a **condition or function judged to be significantly impaired** relative to the usual standard of an individual of their group.
- The term is often **used to refer to individual functioning**, including physical impairment, sensory impairment, cognitive impairment, intellectual impairment, mental illness, and various types of chronic disease.
- This usage has been **described by some disabled people** as being associated with a medical model of disability.

- In 2006, the **Convention on the Rights of Persons with Disabilities (CRPD)** was also adopted.
- It aims at **working towards creating equal opportunities for persons** with disabilities through the implementation of the **2030 agenda for sustainable development.**
- **About:**
 - The day is observed to **promote the rights and well-being of people** with disabilities at every level of society and development.
 - It also **aims to raise awareness of the situations** of persons with disabilities in all aspects of political, social, economic and cultural life.
- **Data related to Persons with Disabilities:**
 - **According to the World Health Organization (WHO), more than 1 billion people experience disability**, and this figure is predicted to rise, due in part to population ageing and an increase in the prevalence of non-communicable diseases.
 - As per the **National Statistics Office** report on disability released last year (2020), about **2.2% of India's population lives** with some kind of physical or mental disability.
- **Theme for 2021:**
 - 'Leadership and participation of persons with disabilities toward an inclusive, accessible, and sustainable post-Covid-19 world'.
- **Related Initiatives:**
 - **Global:**
 - **World Programme of Action (WPA):** It is a **global strategy to enhance disability prevention**, rehabilitation and equalization of opportunities, which pertains to full participation of persons with disabilities in social life and national

Note:



development. The WPA also **emphasizes the need to approach disability** from a human rights perspective.

- **India's:**
 - **Unique Disability Identification (UDID) Portal**
 - **Accessible India Campaign**
 - **DeenDayal Disabled Rehabilitation Scheme**
 - **Assistance to Disabled Persons for Purchase/fitting of Aids and Appliances (ADIP)**

Related Observances

- **4th January:** World Braille Day
- **21st March:** World Down Syndrome Day
- **2nd April:** **World Autism Day**
- **23rd September:** International Day of Sign Languages
- **10th December:** **Human Rights Day**

SMILE Scheme

Why in News

Recently, the Ministry of Social Justice and Empowerment has formulated a scheme **SMILE - Support for Marginalized Individuals for Livelihood and Enterprise**.

- It includes a sub-scheme - '**Central Sector Scheme** for Comprehensive Rehabilitation of persons engaged in the act of Begging.
- Currently, a pilot project of it is ongoing in 7 cities namely Delhi, Bangalore, Hyderabad, Indore, Lucknow, Nagpur and Patna.

Key Points

- **About:**
 - It is a new Scheme after the **merger of existing Schemes for Beggars and Transgenders**.
 - Scheme provides for the **use of the existing shelter homes** available with the State/UT Governments and Urban local bodies for rehabilitation of the persons engaged in the act of Begging.
 - In case of non-availability of existing shelter homes, **new dedicated shelter homes** are to be set up by the implementing agencies.
- **Focus:**
 - The focus of the scheme is extensively on **rehabilitation, provision of medical facilities, counseling, basic documentation, education, skill development, economic linkages** and so on.

- It is estimated that an approximate **60,000 poorest persons would be benefited** under this scheme for leading a life of dignity.

Implementation:

- It will be implemented with the support of State/UT Governments/Local Urban Bodies, Voluntary Organizations, Community Based Organizations (CBOs), institutions and others.

Scheme for Comprehensive Rehabilitation of Beggars:

- It will be a **comprehensive scheme for persons engaged in the act of begging**.
- The scheme has been implemented **in the selected cities on pilot basis having large concentrations** of the Beggar community.
- During the year 2019-20, this Ministry had released an amount of Rs. **1 Crore to National Institute of Social Defence (NISD)** and Rs. 70 Lakh to **National Backward Classes Finance & Development Corporation (NBCFDC)** for skill development programmes for beggars.

Status of Beggars in India:

- According to the **Census 2011**, the **total number of beggars in India is 4,13,670** (including 2,21,673 males and 1,91,997 females) and the number has increased from the last census.
- **West Bengal tops the chart followed by Uttar Pradesh and Bihar** at number two and three respectively. Lakshadweep merely has two vagrants according to the 2011 census.
- Recently, the **Supreme Court** has agreed to examine a plea for **decriminalising begging** which has been made an offense in various states under Prevention of Begging Act.

National Backward Classes

Finance & Development Corporation

- It is a **Government of India Undertaking** under the aegis of Ministry of Social Justice and Empowerment.
- It was incorporated **under Section 25 of the Companies Act 1956** on 13th January 1992 as a Company not for profit.
- Its objective is to **promote economic and developmental activities** for the benefit of Backward Classes and to assist the poorer section of these classes in skill development and self-employment ventures.

Note:



National Institute of Social Defence

- The NISD is an **Autonomous Body** and is registered under **Societies Act XXI of 1860** with the Government of National Capital Territory (NCT), Delhi.
- It is a **central advisory body** for the Ministry of Social Justice and Empowerment.
- It is the **nodal training and research institute** in the field of social defence.
- The institute currently **focuses on human resource development** in the areas of drug abuse prevention, welfare of senior citizens, beggary prevention, transgender and other social defence issues.
- The **mandate of the institute is to provide inputs for the social defence programmes** of the Government of India through training, research & documentation.

Main Bhi Digital 3.0 Campaign

Why in News

Recently, the **Ministry of Housing and Urban Affairs (MoHUA)** and Ministry of Electronics & Information Technology (MeitY) launched '**Main Bhi Digital 3.0**' Campaign under **PM SVANidhi (Prime Minister Street Vendor's AtmaNirbhar Nidhi) Scheme**.

Key Points

- **About:**
 - It is a special Campaign for **Digital Onboarding and Training (DOaT) for Street Vendors (SVs)**.
 - It is aimed at **digital onboarding of SVs** who have already been provided loans under **PM SVANidhi Scheme**.
 - Lending Institutions (LIs) have been instructed to **issue a durable QR Code & Unified Payments Interface (UPI) ID at the time of disbursement** and train the beneficiaries in conduct of **digital transactions**.
 - An Integrated IT Platform has been developed for implementation of this Scheme. SVs can **apply for loans directly through PM SVANidhi Portal**.
- **PM SVANidhi Scheme:**
 - **About:**
 - It was announced as a part of the **Economic Stimulus-II** under the **Atmanirbhar Bharat Abhiyan**.

- It has been implemented since 1st June 2020, for providing **affordable working capital loans to street vendors** to resume their livelihoods that have been adversely affected due to **Covid-19 lockdowns**, with a sanctioned budget of Rs. 700 crore.

○ Aims:

- To benefit **over 50 lakh street vendors** who had been vending on or before 24th March 2020, in urban areas including those from surrounding peri-urban/rural areas.
- To **promote digital transactions through cash-back incentives** up to an amount of **Rs. 1,200 per annum**.
 - As of 31st January 2021, the PM SVANidhi scheme has disbursed loans to **13.82 Lakh beneficiaries** amounting to **Rs 1,363.88 Crores**.

○ Features:

- The vendors can avail a **working capital loan of up to Rs. 10,000**, which is repayable in monthly installments in the tenure of one year.
- On timely/early repayment of the loan, an **interest subsidy of 7% per annum will be credited** to the bank accounts of beneficiaries through **Direct Benefit Transfer** on a quarterly basis.
- There will be **no penalty on early repayment of the loan**. The vendors can avail the facility of the enhanced credit limit on timely/early repayment of the loan.

○ Challenges:

- Several banks are seeking applications on **stamp papers worth between Rs. 100 and Rs. 500**.
- There have also been instances of banks **seeking PAN cards and even checking the CIBIL or Credit score of applicants** or state authorities asking for voter ID cards, which many migrant vendors do not carry with them.
 - **CIBIL** score is an evaluation of one's credit history and determines their eligibility for a loan.
- There have also been complaints of **harassment by police and municipal officials**.

Other Initiatives for Street Vendors:

- **Pradhan Mantri Jeevan Jyoti Bima Yojana.**
- **Pradhan Mantri Suraksha Bima Yojana.**
- **Jan-Dhan Yojana.**

Note:



- **Building and Other Construction Workers Act 1996.**
- **Pradhan Mantri Shram Yogi Maandhan Yojana.**
- **Pradhan Mantri Matru Vandana Yojana.**

Pradhan Mantri Shram Yogi Maan-Dhan Pension Scheme

Why in News

According to the Ministry of Labour & Employment, nearly 46 lakh Unorganised Workers (UW) have been registered under the **Pradhan Mantri Shram Yogi Maandhan (PM-SYM) pension scheme**.

Unorganised Workers

- UWs are **mostly engaged as** rickshaw pullers, street vendors, **mid-day meal** workers, head loaders, brick kiln workers, cobblers, rag pickers, domestic workers, washer men, home-based workers, own account workers, agricultural workers, construction workers, beedi workers, handloom workers, leather workers, audio-visual workers or in similar other occupations.
- There are estimated **45 crore such unorganised workers in the country**.

Key Points

- **About:**
 - PM-SYM is a **Central Sector Scheme** administered by the Ministry of Labour and Employment and implemented through Life Insurance Corporation of India and Community Service Centers (CSCs).
 - **LIC (Life Insurance Corporation)** is the Pension Fund Manager and responsible for Pension pay out.
- **Eligibility:**
 - Should be an Unorganised Worker (UW).
 - Monthly Income Rs 15000 or below.
 - Entry age between 18 and 40 years.
 - Should possess a mobile phone, savings bank account and Aadhaar number.
 - Should not be covered under **New Pension Scheme (NPS)**, **Employees' State Insurance Corporation (ESIC) scheme** or **Employees' Provident Fund Organisation (EPFO)**.

- Should not be an income tax payer.

➤ Salient Features:

- **Minimum Assured Pension:**
 - Each subscriber shall receive a minimum assured pension of **Rs 3000/- per month after attaining the age of 60 years**.
- **Family Pension:**
 - During the receipt of pension, if the subscriber dies, **the spouse of the beneficiary shall be entitled to receive 50% of the pension received by the beneficiary as family pension**. Family pension is applicable only to spouses.
 - If a beneficiary has given regular contribution and died due to any cause (before age of 60 years), his/her spouse will be entitled to join and continue the scheme subsequently by payment of regular contribution or exit the scheme as per provisions of exit and withdrawal.
- **Contribution:**
 - The subscriber's **contributions shall be made through 'auto-debit' facility** from his/ her savings bank account/Jan-Dhan account.
 - PM-SYM functions on a **50:50 basis** where prescribed age-specific contribution shall be made by the beneficiary and the matching contribution by the Central Government.

Fourth Edition of State Health Index

Why in News

NITI Aayog has released the **fourth edition** of the **State Health Index for 2019–20**.

- The report, titled **"Healthy States, Progressive India"**, ranks states and Union Territories on their year-on-year incremental performance in health outcomes as well as their overall status.
- Earlier, the **Global Health Security (GHS) Index 2021**, developed in partnership by the Nuclear Threat Initiative (NTI) and the Johns Hopkins Center was released. India, with a score of 42.8 (out of 100) has slipped by 0.8 points since 2019.

Key Points

- **About:**

Note:



- The State Health Index is **an annual tool to assess the performance of states and UTs**, which has been compiled and published **since 2017**.
- It is a weighted composite index **based on 24 indicators** grouped under the domains of 'Health Outcomes', 'Governance and Information', and 'Key Inputs/Processes'.

- **Health Outcomes:**

- It **includes parameters** such as neonatal mortality rate, under-5 mortality rate, sex ratio at birth.

- **Governance and Information:**

- It **includes parameters** such as institutional deliveries, average occupancy of senior officers in key posts earmarked for health.

- **Key Inputs/Processes:**

- It **consists of proportion of shortfall in health care providers** to what is recommended, functional medical facilities, birth and death registration and tuberculosis treatment success rate.

➤ **Developed By:**

- **NITI Aayog**, with technical assistance from the **World Bank**, and in close consultation with the **Ministry of Health and Family Welfare (MoHFW)**.

➤ **Focus of the Fourth Edition:**

- Round IV of the report focuses on measuring and highlighting the overall performance and incremental improvement of states and UTs over the period 2018–19 to 2019–20.

➤ **Ranking of States:**

- To ensure comparison among similar entities, the ranking is **categorized as:**
 - **Larger States:**
 - In terms of annual incremental performance, **Uttar Pradesh, Assam and Telangana** are the top three ranking states.
 - **Smaller States:**
 - **Mizoram and Meghalaya** registered the maximum annual incremental progress.
 - **Union Territories:**
 - **Delhi, followed by Jammu and Kashmir**, showed the best incremental performance.
 - **Overall:**
 - The top-ranking states were **Kerala and Tamil Nadu** among the 'Larger States', **Mizoram**

and **Tripura** among the 'Smaller States', and Dadra and Nagar Haveli and Daman and Diu (DH&DD) and Chandigarh among the UTs.

SCORECARD

Top 5

Rank	2018–19*	2019–20*
1	Kerala	Kerala
2	Andhra Pradesh	Tamil Nadu
3	Tamil Nadu	Telangana
4	Himachal Pradesh	Andhra Pradesh
5	Maharashtra	Maharashtra

Bottom 4**

Rank	2018–19*	2019–20*
1	UP	UP
2	Bihar	Bihar
3	MP	MP
4	Jharkhand	Rajasthan

*According to Reference Year
 **In ascending order (Lowest first)
 Source: NITI Aayog Fourth Health Index

➤ **Significance of the Index:**

- **Policymaking:**

- States use it in their **policy making and resource allocation**.
 - This report is an example of both competitive and cooperative federalism.

- **Healthy Competition:**

- The index **encourages healthy competition and cross-learning among States and UTs**.
 - The aim is to **nudge states/UTs towards building robust health systems** and improving service delivery.

- **Helpful in Achieving SDGs:**

- The exercise is expected to **help drive state and union territories' efforts** towards the achievement of health-related **Sustainable Development Goals (SDGs)** including those related to **Universal Health Coverage (UHC)** and other health outcomes.

- **Role in National Health Mission:**

- The importance of this annual tool is reemphasized by MoHFW's decision to link the index to incentives under the **National Health Mission**.

Raising Legal Age of Marriage for Women

Why in News

Recently, the Union Cabinet cleared a proposal to

Note:



bring **uniformity in the marriageable age of men and women**.

- By amending the **Prohibition of Child Marriage Act (PCMA), 2006 and other personal law**, the legal age of marriage of women will be **raised from 18 to 21 years**.
- The decision is based on the recommendation of a four-member task force led **by former Samata Party chief Jaya Jaitly**.

Note:

- The task force was set up to **re-examine the age of marriage and its correlation to health and social indices** such as infant mortality, maternal mortality, and nutrition levels among mothers and children.

Key Points

➤ **About Legal Framework of Minimum Age for Marriage:**

○ **Background:**

- In India, the minimum age of marriage was prescribed for the first time by the law known as the Sarda Act, 1929. It was later renamed as the **Child Marriage Restraint Act (CMRA), 1929**.
- In 1978, the law was amended to raise the minimum age of marriage to 18 years for girls and 21 years for boys.
- This position remains the same even in the new law called the **Prohibition of Child Marriages Act (PCMA), 2006**, which replaced the CMRA, 1929.

○ **Marriage Minimum Age For Different Religion:**

- For Hindus, **The Hindu Marriage Act, 1955** sets 18 years as the minimum age for the bride and 21 years as the minimum age for the groom.
- In **Islam**, the marriage of a **minor who has attained puberty** is considered valid.
- The **Special Marriage Act, 1954** and the **Prohibition of Child Marriage Act, 2006** also prescribe 18 and 21 years as the minimum age of consent for marriage for women and men, respectively.
- For the new age of marriage to be implemented, these laws are expected to be amended.

➤ **Pros of Raising Minimum Age for Marriage For Women:**

- **Women and Child Welfare:** The poverty of the mother plays the greatest role of all by far — both in relation to her undernourishment and that of her child.

- An early age of marriage, and consequent early pregnancies, also **have impacts on nutritional levels of mothers and their children**, and their overall health and mental wellbeing

- **Women's Empowerment And Gender Parity:** The mother's age at childbearing affects educational level, living conditions, health conditions, decision-making power of women.

- **Tackling Child Marriage:** India is home to the largest number of underage marriages in the world. The law will help to curb the menace of Child Marriage.

➤ **Cons of raising Minimum Age for Marriage For Women**

- **Difficulty in Fighting Child Marriage:** The implementation of the child marriage law is difficult.

- The evidence suggests that when the law is used, it is mostly to penalise young adults for self-arranged marriages.

- The law to prevent child marriage does not work very well.

- While child marriage has declined, it has been marginal: from 27% in 2015-16 to 23% in 2019-20, according to **National Family Health Survey (NFHS) 5**.

- 70% of early marriages take place in deprived communities such as **Scheduled Castes and Scheduled Tribes**, and the law will simply push these marriages underground instead of preventing them.

- **Criminalisation of a Large Number of Marriages:** The change will leave the vast majority of Indian women who marry before they are 21 without the legal protections that the institution of marriage otherwise provides, and make their families criminalisable.

- **Lack of Education is a Bigger Problem:** According to the **State of the World Report 2020 by UNFPA**, in India, 51% of young women with no education and 47% of those with only a primary education had married by age 18.

- Further, a study by the **International Centre for Research on Women** has found that girls out of school are 3.4 times more likely to be married or have their marriage already fixed than girls who are still in school.

Note:



Nutrition Smart Village Initiative

Why in News

A programme on “**Nutrition Smart Village**” will be initiated to strengthen the **Poshan Abhiyan**.

- It will be part of the **Azadi Ka Amrit Mahotsav**, to commemorate the 75th year of Independence of India.

Key Points

- **About:**
 - The initiative is **in line with the Prime Minister’s call to adopt and transform 75 villages**.
 - A total of 75 villages **will be adopted by All India Coordinated Research Project (AICRP) centres and Indian Council of Agricultural Research -Central Institute for Women in Agriculture (ICAR-CIWA)**.
- **Objective:**
 - To **promote nutritional awareness, education and behavioural change** in rural areas involving farm women and school children.
 - **Harnessing traditional knowledge** through the local recipe to overcome **malnutrition**.
 - Implementing **nutrition-sensitive agriculture** through homestead agriculture and Nutri-garden.
- **Poshan Abhiyan:**
 - **About:**
 - Also called **National Nutrition Mission**, was launched on the occasion of the **International Women’s Day** on 8th March, 2018.
 - The Abhiyan targets to **reduce Stunting, undernutrition, Anemia** (among young children, women and adolescent girls) and reduce low birth weight by 2%, 2%, 3% and 2% per annum respectively.
 - It also targets to **bring down stunting among children** in the age group 0-6 years from 38.4% to 25% by 2022.
 - **Poshan 2.0:**
 - Recently, the **Ministry for Women and Child Development** inaugurated **Poshan 2.0** and urged all **Aspirational Districts** to establish a **Poshan Vatika (nutrition garden)** during the **Nutrition Month (Poshan Mah)** (from 1st September, 2021).

➤ Scenario of Malnutrition in India:

- Despite decades of investment to tackle this malaise, **India’s child malnutrition rates** are still one of the most alarming in the world.
 - The **Global Hunger Index (2021)** — which is calculated on the basis of total undernourishment of the population, child stunting, wasting and child mortality — places India at the **101st spot among 116 countries**.
- The bane of child and maternal malnutrition is **responsible for 15% of India’s total disease burden**.
- According to the data from the **fifth round of National Family Health Survey (NFHS) (2019-2021)** from the 22 states surveyed so far, only 9 showed a decline in the number of stunted children, 10 in wasted children and six in underweight children.
- Research suggests that USD 1 spent on nutritional interventions in India could generate USD (34.1 to 38.6) in public economic returns three times more than the global average.
- Studies reveal that **India loses up to 4% of its Gross Domestic Product (GDP) and up to 8% of its productivity** due to child malnutrition.

HPV Vaccine Reducing Cervical Cancer

Why in News

Recently, new research has found that the **Human papillomavirus (HPV) vaccine (Cervarix)** **reduces the risk of Cervical Cancer** significantly in women.

- The results are important because the vaccine was introduced in the 2000s and studies confirming that it is effective against cancer have come up only recently.

Key Points

- **Findings:**
 - The Human papillomavirus (HPV) vaccine **reduced cervical cancer cases by 87% among women in the U.K. who received the vaccine when they were 12 or 13 years old**.
 - It **reduced the risk by 34% in women who were aged 16-18 years** when they were offered the jab.
 - Over a **period of 11 years (since 2006)**, the vaccine **prevented around 450 cervical cancers** and around 17,200 cases of precancerous conditions.

Note:



➤ **Cervical Cancer:**

- It is a type of cancer that occurs **in the cells of the cervix** - the lower part of the uterus that connects to the vagina.
- Various strains of the **Human papillomavirus (HPV)** **play a role in causing most cervical cancer**.
- When exposed to HPV, the body's immune system typically prevents the virus from doing harm. In a small percentage of people, **however, the virus survives for years, contributing to the process that causes** some cervical cells to become cancer cells.
- The **HPV vaccine (Cervarix)** protects against two of the cancer-causing strains, which are HPV 16 and 18.

➤ **Human papillomavirus:**

- Human papillomavirus (HPV) is the **most common viral infection of the reproductive tract**.
- There are **more than 100 types of HPV**.
 - More than 40 types of HPV are **spread through direct sexual contact**.
 - Out of these 40, **two cause genital warts**, while **about a dozen of HPV cause different types of cancer** including cervical, anal, oropharyngeal, penile, vulvar and vaginal.

➤ **Types of HPV Vaccines:**

- **Quadrivalent vaccine (Gardasil):** It protects against **four types of HPV (HPV 16, 18, 6 and 11)**. The latter two strains cause genital warts.
- **Bivalent vaccine (Cervarix):** It protects against **HPV 16 and 18 only**.
- **Non valent vaccine (Gardasil 9):** It protects against **nine strains of HPV**.
 - These vaccines prevent cervical cancer in women and girls who have not yet been exposed to the virus.

➤ **Indian Scenario:**

- India is home to 16-17% of the world's population, **globally 27% of total cervical cancer cases are from here**.
- Further, in India about **77% cases of cervical cancer are caused by HPV 16 and 18**.
- In India, **bivalent and quadrivalent HPV vaccines were licensed in 2008** and a **non valent vaccine was licensed in 2018**.
- Officially, the HPV vaccine has **not been recommended for boys and males in India**.

Cancer

- It is a large group of diseases **that can start in almost any organ or tissue of the body** when abnormal cells grow uncontrollably, go beyond their usual boundaries to invade adjoining parts of the body and/or spread to other organs. The latter process is called metastasizing and **is a major cause of death from cancer**.
- A **neoplasm and malignant tumor** are other common names for cancer.
- Lung, prostate, colorectal, stomach and liver cancer are the most common types of cancer in men, while breast, colorectal, lung, cervical and thyroid cancer are the most common among women.
- **World Cancer Day** is organized by the **Union for International Cancer Control (UICC)** and celebrated each year on **4th February**.
- **Related Indian Initiatives:**
 - **National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)**.
 - **National Cancer Grid (NCG)**.

Protocol to Prevent Human Trafficking: SCO

Why in News

Recently, the **Shanghai Cooperation Organisation (SCO)**, in its 19th meet (of Prosecutors General) held in New Delhi, adopted a **protocol to strengthen cooperation in preventing and combating growing menace of human trafficking**, especially women and children.

- The **current chair of SCO is Tajikistan**.

SCO

- It was **founded at a summit in Shanghai in 2001** by the presidents of **Russia, China, the Kyrgyz Republic, Kazakhstan, Tajikistan and Uzbekistan**.
- Presently, it comprises **nine member states** namely India, Kazakhstan, China, the Kyrgyz Republic, Pakistan, the Russian Federation, Tajikistan, Uzbekistan and Iran.
 - India was made an observer at the SCO in 2005.
 - **India and Pakistan became its permanent members in 2017**.

- It is headquartered in **Beijing, China**.
- **RATS (Regional Anti-Terrorist Structure)** is a permanent organ of the SCO, headquartered in Tashkent, Uzbekistan.
- The **summit is held annually** and chairmanship goes to the member states for a year on rotation basis.

Key Points

- **Human Trafficking:**
 - Human trafficking involves recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, for the purpose of exploitation.
 - Exploitation include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude, or the removal of organs.
- **About the Protocol:**
 - Calls for **continuation of exchange of national legislation** to combat the menace of trafficking in persons.
 - Seeks to provide **protection and assistance to victims** of trafficking within their competence.
 - Calls for **developing cooperation between the educational organisations of the SCO member states** in the field of advanced training of prosecutors, whose competence include combating trafficking in persons especially, women and children.
- **Relevant Laws in India:**
 - **Immoral Traffic (Prevention) Act 1956** is the premier legislation to deal with this issue.
 - **Article 23 and 24** (Right Against Exploitation) of the Constitution of India.
 - **25 sections in IPC** such as 366A, 366B, 370 and 374.
 - The **Juvenile Justice Act** and the **Information Technology (IT) Act** and also the **Prevention of Child Labour Act**, the **Bonded Labour (Abolition) Act**, among others.
- **India's Efforts in Combating Human Trafficking:**
 - In July 2021, the Ministry of Women and Child Development released **Draft anti-trafficking Bill**, the Trafficking in Persons (Prevention, Care and Rehabilitation) Bill, 2021.
 - India has ratified the **United Nations Convention on Transnational Organised Crime (the Palermo**

Convention) which among others has a Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children.

- India has ratified the **SAARC Convention** on Preventing and Combating Trafficking in Women and Children for Prostitution.
- **Anti-Trafficking Nodal Cell was set up in the Ministry of Home Affairs (MHA) in 2006** to act as a focal point for communicating various decisions and follow up on action taken by the State Governments to combat the crime of Human Trafficking.
- **Judicial Colloquium:** In order to train and sensitize the trial court judicial officers, Judicial Colloquium on human trafficking are held at the High court level.
- Ministry of Home Affairs under a Comprehensive Scheme '**Strengthening Law Enforcement Response in India against Trafficking in Persons**' through Training and Capacity Building, has released fund for establishment of Anti Human Trafficking Units for 270 districts of the country.
- The **Ujjawala scheme was launched in 2007** to put an end to the trafficking of children and women. The objective of the scheme is to prevent, rescue, rehabilitate, reintegrate, and repatriate victims trafficked for commercial sexual exploitation.
- Various initiatives such as "**SwadharGreh Scheme**", "**Sakhi**", "**Universalization of Women Helpline**", provide for a supportive institutional framework and mechanism for **addressing concerns of women affected by violence**.

Issue of Mental health

Why in News

Recently, the **Supreme Court** has said the judiciary should not treat the mental health of a person with a **one-size-fits-all approach**, upholding the need for judges to be sensitive to the gravity of mental health issues.

- SC noted that **an individual copes with a threat** — both physical and emotional, expressing (or refraining to express) love, loss, sorrow and happiness, varies greatly in view of the **multi-faceted nature of the human mind and emotions**.
- **World Mental Health Day** is observed on 10th October every year.

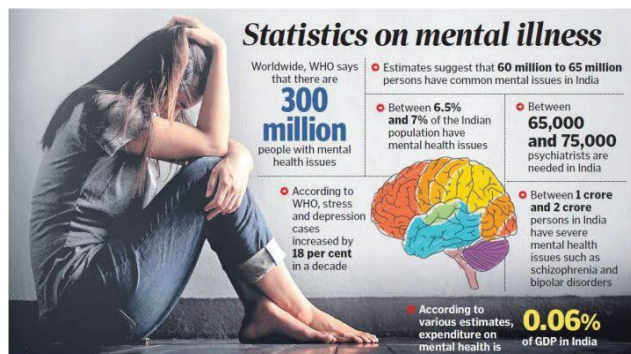
Note:



Key Points

➤ About:

- According to the **World Health Organization (WHO)**, mental health is 'a **state of well-being** in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.'
- **Like Physical health, Mental health is also important** at every stage of life, from childhood and adolescence through adulthood.



➤ Challenges:

- **High Public Health Burden:** An estimated **150 million people across India** are in need of mental health care interventions, according to India's latest **National Mental Health Survey 2015-16**.
- **Lack of Resources: Low proportion of the mental health workforce** in India (per 100,000 population) include psychiatrists (0.3), nurses (0.12), psychologists (0.07) and social workers (0.07).
 - **Low financial resource allocation** of just over a percent of **Gross Domestic Product** on healthcare has created impediments in public access to affordable mental healthcare.
- **Other Challenges: Poor awareness about the symptoms of mental illness**, social stigma and abandonment of mentally ill, especially old and destitute, leads to social isolation and reluctance on part of family members to seek treatment for the patient.
 - This has resulted in a massive **treatment gap**, which further worsens the present mental illness of a person.
- **Post-Treatment gap:** There is **need for proper rehabilitation** of the mentally ill persons post his/her treatment which is currently not present.

- **Rise in Severity:** Mental health problems tend to **increase during economic downturns**, therefore special attention is needed during times of economic distress.

➤ Steps Taken by the Government:

- **Constitutional Provision:** SC has held healthcare to be a fundamental right under **Article 21** of the Constitution.
- **National Mental Health Program (NMHP):** To address the huge burden of mental disorders and shortage of qualified professionals in the field of mental health, the government has been implementing the **National Mental Health Program (NMHP) since 1982**.
 - The Program was **re-strategize in 2003** to include two schemes, viz. Modernization of State Mental Hospitals and Up-gradation of Psychiatric Wings of Medical Colleges/General Hospitals.
- **Mental Health Care Act 2017:** It guarantees **every affected person access to mental healthcare** and treatment from services run or funded by the government.
 - It has significantly reduced the scope for the use of Section 309 IPC and made the attempt to commit suicide punishable only as an exception.
- **Kiran Helpline:** In 2020, the Ministry of Social Justice and Empowerment launched a **24/7 toll-free helpline 'Kiran'** to provide support to people facing anxiety, stress, depression, suicidal thoughts and other mental health concerns.

Health Insurance for India's Missing Middle

Why in News

Recently, **NITI Aayog** has released a comprehensive report titled **Health Insurance for India's Missing Middle**.

- The report brings out the **gaps in the health insurance coverage** across the Indian population and **offers solutions** to address the situation.

Key Points

➤ Importance of Health Insurance:

- Health insurance is a mechanism of pooling the high level of **Out of Pocket expenditure (OOPE)**

Note:



in India to provide greater financial protection against health shocks.

- Pre-payment through health insurance emerges as an **important tool for risk-pooling and safeguarding** against catastrophic (and often impoverishing) expenditure from health shocks.
- Moreover, pre-paid pooled funds can also improve the **efficiency of healthcare provision**.

➤ **Health Insurance: Need And Landscape:**

- **Achieving Universal Health Coverage:** Expansion of health insurance coverage is a vital step, and a pathway in India's effort to achieve **Universal Health Coverage (UHC)**.
 - Low Government expenditure on health has constrained the capacity and quality of healthcare services in the public sector.
 - It diverts the majority of individuals – about two-thirds – to seek treatment in the costlier private sector.
- **High Out-of-Pocket Expenditure:** India's health sector is characterized by low Government expenditure on health, high **out-of-pocket expenditure (OOPE)**, and low financial protection for adverse health events.
 - The private sector is characterized by high OOPE, leading to low financial protection.
- **Missing Middle:** According to the report, **at least 30% of the population**, or 40 crore individuals (referred as the missing middle in this report) are devoid of any financial protection for health.
 - The **Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)** and various State Government extension schemes, provide comprehensive hospitalization cover to the **bottom 50% of the population**.

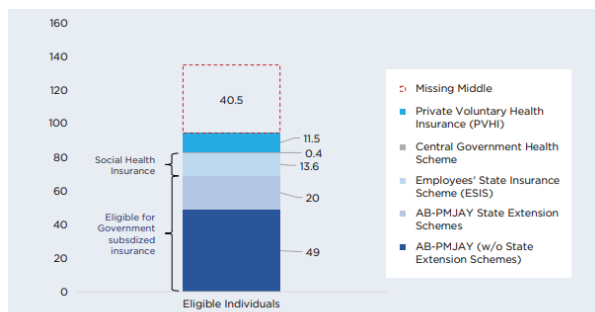


Figure 4: Number of individuals eligible or covered, by health insurance scheme type

- Around the top **20% of the population** – 25 crore individuals – are covered through social

health insurance, and private voluntary health insurance.

○ **Existing Health Insurance, But not Suitable For The Missing Middle:**

- In the absence of a low-cost health insurance product, the missing middle remains uncovered despite the ability to pay nominal premiums.
- Affordable contributory products such as **Employees' State Insurance Corporation (ESIC)**, and Government subsidized insurance including AB-PMJAY are closed products.
 - They are not available to the general population due to the risk of adverse selection.

➤ **Recommended Insurance Models:** The report has recommended **three models** for increasing the health insurance coverage in the country:

- **Creation of a Large and Diversified Risk Pool:** The success of a private voluntary contributory health insurance product requires creation of a large and diversified risk pool.
 - For this to happen the Government should build consumer awareness of health insurance through **Information Education Communication campaigns**.
- **Developing a Modified, Standardized Health Insurance Product:** The cost of health insurance i.e., the premium needs to come down, in line with the affordability of the missing middle.
 - **For example**, Aarogya Sanjeevani can be made affordable.
 - Aarogya Sanjeevani is a standardised health insurance product launched by the **Insurance Regulatory Development Authority of India (IRDAI)** in April 2020.
- **Government Subsidized Health Insurance:** This model can be **utilized for segments of the missing middle** which remain uncovered, due to limited ability to pay for the voluntary contributory models outlined above.
 - In the medium-term, once the supply-side and utilization of PMJAY is strengthened, their infrastructure can be leveraged to allow voluntary contributions to the missing middle.
 - Government can provide public data and infrastructure as a public good to reduce operational and distribution costs of insurers.

Note:



Impact of Stubble Burning on Respiratory Health

Why in News

A study was conducted in Punjab that showed **pollution from stubble burning significantly reduced lung function** and was particularly harmful to women in rural Punjab.

- The study was conducted in **two phases**: The first was in **October 2018** and again the following summer from **March to April 2019**.

Key Points

➤ High PM2.5 levels:

- The concentration of **PM2.5** (Particulate Matter-2.5) was found to **increase more than twice between the two phases**, from 100 g/m³ to 250 g/m³.
 - PM2.5 refers to particles that have a diameter **less than 2.5 micrometres** (more than 100 times thinner than a human hair) and remain suspended for longer.
 - It causes respiratory problems and also reduces visibility. It is an endocrine disruptor that can affect insulin secretion and insulin sensitivity, thus contributing to diabetes.
- Incidentally **these are around 10-15 times the WHO (World Health Organisation) prescribed air quality standards** though the permissible standards by India's **Central Pollution Control Board (CPCB)** are higher.
 - **WHO**: The annual average concentrations of PM2.5 should not exceed 5 µg/m³, while 24-hour average exposures should not exceed 15 µg/m³ more than 3 - 4 days per year.
 - **CPCB**: The annual average concentrations of PM2.5 should not exceed 40 µg/m³, while 24-hour average exposures should not exceed 60 µg/m³ more than 3 - 4 days per year.

➤ Impact:

- A **two to three-fold increase was noted in most of the respiratory symptoms** including wheezing, breathlessness on exertion, skin rashes, itchiness of eyes etc. across **all age groups (10-60 years)**.
 - The **highest number of respiratory complaints were reported by the elderly population (>40-60)**.

- There was **decline in lung function** with an increase in PM2.5 concentration.
 - A **10-14% decline in lung function in men** and **nearly 15-18% decline in women** across all age categories was noted.

Stubble Burning

➤ About:

- Stubble (parali) burning is **the act of setting fire to crop residue to remove them from the field to sow the next crop**.
- In order to plant the next **winter crop (Rabi crop)**, farmers in Haryana and Punjab have to move in a very short interval and if they are late, due to short winters these days, they might face considerable losses. Therefore, burning is the cheapest and fastest way to get rid of the stubble.
- It begins around October and peaks in November, coinciding with the withdrawal of **southwest monsoon**.

➤ Effects of Stubble Burning:

○ Pollution:

- Emits large amounts of **toxic pollutants in the atmosphere which contain harmful gases** like methane (CH₄), Carbon Monoxide (CO), Volatile Organic Compound (VOC) and carcinogenic polycyclic aromatic hydrocarbons.
- These pollutants disperse in the surroundings, may undergo a physical and chemical transformation and eventually adversely affect human health by causing a **thick blanket of smog**.

○ Soil Fertility:

- Burning husk on the ground **destroys the nutrients in the soil**, making it less fertile.

○ Heat Penetration:

- Heat generated by stubble burning **penetrates into the soil, leading to the loss of moisture** and useful microbes.

➤ Alternatives to Stubble Burning:

- **In-Situ Treatment of Stubble**: For example crop residue management by zero-tiller machine and Use of bio-decomposers.
- **Ex-Situ (off site) Treatment**: For example use of rice straw as cattle fodder.
- **Use of Technology**- For example **Turbo Happy Seeder (THS) machine**, which can uproot the stubble and

Note:



also sow seeds in the area cleared. The stubble can then be used as mulch for the field.

- **Changing Cropping Pattern:** It is the deeper and more fundamental solution.
- **Bio Enzyme-PUSA:** The Indian Agriculture Research Institute has devised a radical solution for stubble burning in the form of a bio-enzyme called PUSA.
 - It leads to an increase in organic carbon and soil health while significantly reducing the fertiliser expense for the next cropping cycle.

➤ Other Action Plan:

- The State Governments of Punjab, National Capital Region (NCR) States and Government of National Capital Territory of Delhi (GNCTD) have developed **detailed monitorable action plans** based on the framework by the Commission for Air Quality Management (CAQM) to tackle the problem of air pollution.

THE YEAR'S DOUBLE BLACK MARKS

North India has two seasons when crop stubble is burnt – in April-May after the wheat harvest and in October following the paddy harvest. It is particularly noticeable in the north because wheat sowing follows on the heels of paddy harvest, requiring the fields to be cleared and ploughed without delay



<ul style="list-style-type: none"> ➤ 5.5 kg nitrogen, 2.3 kg phosphorus, 25 kg potassium and 1.2 kg sulphur lost when one tonne of straw is burnt ➤ 3 kg of particulate matter, 60 kg CO, 1,460 kg CO₂, 199 kg ash and 2 kg SO₂ released by burning a tonne of straw ➤ Heat from burning straw penetrates 1 cm into the soil ➤ Burning reduces bacterial 	<p>and fungal populations immediately and substantially only in the top 2.5 cm of the soil</p> <ul style="list-style-type: none"> ➤ Repeated burning permanently reduces bacterial population by more than half ➤ Farmers know of pollution, heat stress and fertility loss due to stubble burning, but have problems availing subsidies for expensive farm 	<p>equipment that can plough back stubble into soil</p> <ul style="list-style-type: none"> ➤ Combine harvesters leave 10-inch crop stubble that is difficult to plough back ➤ Many farmers wish to give up paddy because of stubble problem and heavy dependence on water in generally parched regions
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Global Drug Policy Index 2021

Why in News

Recently, the inaugural **Global Drug Policy Index** was released by the **Harm Reduction Consortium**.

- It is a **data-driven global analysis of drug policies** and their implementation which comes at a time when the Indian government is reviewing the provisions of the **Narcotics Drugs and Psychotropic substances act 1985**.

- The **Harm Reduction Consortium** is a **global consortium of networks** aiming to challenge the global **"war on drugs"**, scale up access to harm reduction services, and advocate for increased resources for harm reduction.

Key Points

- **About the Index:** It is a unique tool that documents, measures and compares national-level drug policies.
 - It provides each country with a score and ranking that shows how much their drug policies and their implementation align with the **United Nations principles of human rights, health and development**.
 - The Index provides an essential accountability and evaluation mechanism in the field of drug policy.
 - It evaluates the performance of 30 countries covering all regions of the world.

RANKINGS OF SELECTED COUNTRIES

RANK	COUNTRY	SCORE
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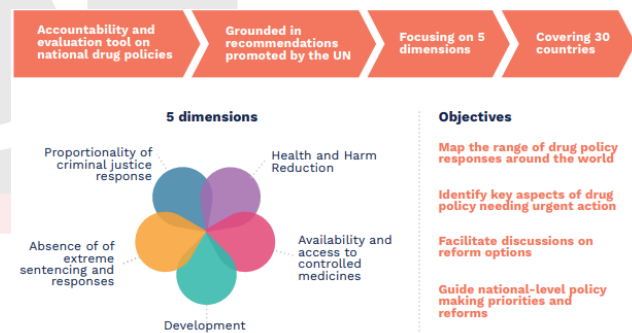
TOP 5

1	Norway	74/100
2	New Zealand	71/100
3	Portugal	70/100
4	UK	69/100
5	Australia	65/100

18	India	46/100
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BOTTOM 5

26	Mexico	35/100
27	Kenya	34/100
28	Indonesia	29/100
29	Uganda	28/100
30	Brazil	26/100



➤ Major Findings:

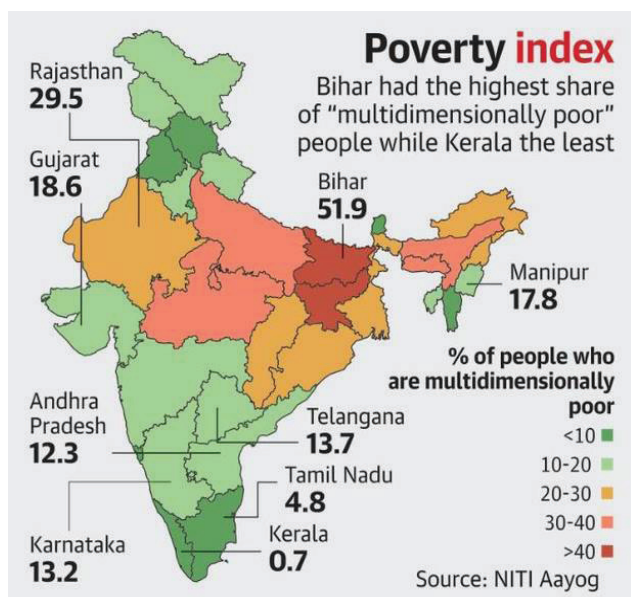
- The **global dominance of drug policies based on repression and punishment** has led to low scores overall, with a median score of just 48/100, and the top-ranking country (Norway) only reaching 74/100.
- Standards and expectations from civil society experts on drug policy **implementation vary from country to country**.
- **Inequality is deeply seated** in global drug policies, with the top-ranking 5 countries scoring 3 times as much as the lowest-ranking 5 countries.
 - This is in part due to the colonial legacy of the 'war on drugs' approach.

- Drug policies disproportionately **affect people marginalised** on the basis of their gender, ethnicity, sexual orientation and socio-economic status.
 - There are **wide disparities between state policies** and how they are implemented on the ground.
 - With a few exceptions, the **meaningful participation** of civil society and affected communities in drug policy processes **remains severely limited**.
- **India's Performance:**
- **Ranking:**
 - India's rank is 18 out of 30 countries. It has an overall score of 46/100.
 - **Scores:**
 - Using extreme sentencing and responses, it has a score of 63/100.
 - Health and harm reduction, 49/100.
 - Proportionality of criminal justice response, 38/100.
 - Availability and access of internationally controlled substances for the relief of pain and suffering, 33/100.

National Multidimensional Poverty Index: NITI Aayog

Why in News

Recently, **NITI Aayog** has released the **Multi-dimensional Poverty Index (MPI)**.



- Earlier, **Global Multidimensional Poverty Index 2021** was released by the **United Nations Development Programme (UNDP)** and the Oxford Poverty & Human Development Initiative (OPHI).

Key Points

- **About:**
- The MPI **seeks to measure poverty** across its multiple dimensions and in effect complements existing poverty statistics based on per capita consumption expenditure.
 - According to **Global MPI 2021**, India's rank is 66 out of 109 countries. The National MPI is aimed at **deconstructing the Global MPI** and creating a globally aligned and yet customised India MPI for drawing up comprehensive Reform Action Plans with the larger goal of improving India's position in the Global MPI rankings.
 - It has **three equally weighted dimensions** – health, education, and standard of living.
 - These three dimensions are **represented by 12 indicators** such as nutrition, school attendance, years of schooling, drinking water, sanitation, housing, bank accounts among others.
- **Methodology & Data:**
- The national MPI measure **uses the globally accepted and robust methodology** developed by the **Oxford Poverty and Human Development Initiative (OPHI)** and the **UNDP**.
 - This baseline report of the **national MPI measure** is based on the reference period of 2015-16 of the **National Family Health Survey (NFHS-4)**.
 - **NFHS-4** data has been used to derive an idea of baseline multidimensional poverty **to know the situation on ground before the full rollout of various central government schemes**.
 - **NFHS-4 precedes the full roll out of (central government's) flagship schemes** on housing, drinking water, sanitation, electricity, cooking fuel, financial inclusion, and other major efforts towards improving school attendance, nutrition, mother and child health, etc.
 - However, it has to be noted here that the **NFHS-5 data suggests improvement** in access to clean cooking fuel, sanitation, and electricity which translates to reduction in deprivation.

Note:



➤ Findings of the Index:

○ Poverty Levels:

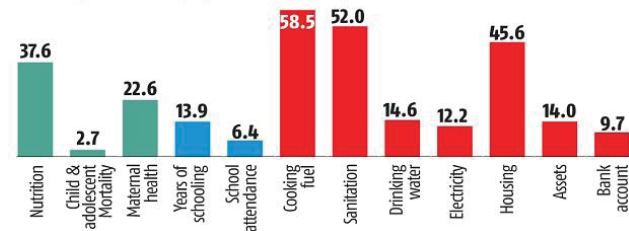
- Bihar has the highest proportion of people of the state's population followed by Jharkhand and Uttar Pradesh who are multidimensionally poor.
- Kerala registered the lowest population poverty levels, followed by Puducherry, Lakshadweep, Goa and Sikkim.

○ Malnourished People:

- Bihar also has the highest number of malnourished people followed by Jharkhand, Madhya Pradesh, Uttar Pradesh, and Chhattisgarh.

THE OTHER INDIA

Percentage of the total population that is deprived in each indicator



➤ Significance of the Index:

○ Contribution towards Instituting Public Policy Tool:

- The development of the Index is an important contribution towards instituting a public policy tool which monitors multidimensional poverty, informs evidence-based and focused interventions, thereby ensuring that no one is left behind.

○ Presents Overall Picture of Poverty:

- This presents an overall picture of poverty in the country, while also enabling closer and more in-depth analyses of areas of interest such as regions – state or districts, and specific sectors and complements the existing monetary poverty statistics.

○ Help Achieving SDGs Goals:

- It is a contribution towards measuring progress towards target 1.2 of the Sustainable Development Goals (SDGs) which aims at reducing “at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions.

Global Nutrition Report, 2021

Why in News

According to the recently released **Global Nutrition**

Report (GNR, 2021), India has made no progress on anaemia and childhood wasting.

Global Nutrition Targets

- In 2012, the **World Health Assembly** (the decision-making body of the World Health Organisation) identified six nutrition targets to be met by 2025. These are:
 - **Reduce stunting** by 40% in children under 5.
 - **Reduce the prevalence of anaemia** by 50% among women in the age group of 19-49 years.
 - Ensure **30% reduction in low-birth weight**.
 - Ensure **no increase in childhood overweight**.
 - **Increase** the rate of exclusive **breastfeeding** in the first six months up to at least 50%
 - Reduce and maintain childhood wasting to less than 5%.

Key Points

➤ Major Findings:

○ Global Nutrition Targets:

- At the current rate of progress, the **global nutrition targets will not be achieved by 2025** globally and in most countries worldwide.

○ Variation in Data Availability:

- There is **substantial variation in data availability and progress towards the global nutrition targets across 194 countries**.
 - Only seven countries are on track to meet four of the six maternal, infant and young child nutrition targets by 2025, while no country is ‘on track’ to halt the rise in adult obesity or achieve a 30% relative reduction in salt/sodium intake.

○ Impact of Covid-19:

- The **Covid-19 pandemic** is **impeding progress** towards achieving the global nutrition targets.
 - An estimated additional **155 million people have been pushed into extreme poverty globally**, while people with diet-related chronic diseases experience worse Covid-19 outcomes.

○ Little Progress in Improving Diets:

- The previous decade has **seen little progress in improving diets**, and a quarter of all deaths among adults are attributable to poor diets.

Note:



- **Greenhouse Gas Emissions Globally:**
 - Food production currently **generates more than a third of all greenhouse gas emissions globally**, and uses substantial and rising amounts of environmental resources.

- **Sustainable Development Goals:**
 - No region is on track to meet the **Sustainable Development Goals** aimed at limiting health and environmental burdens related to diets and the food system.

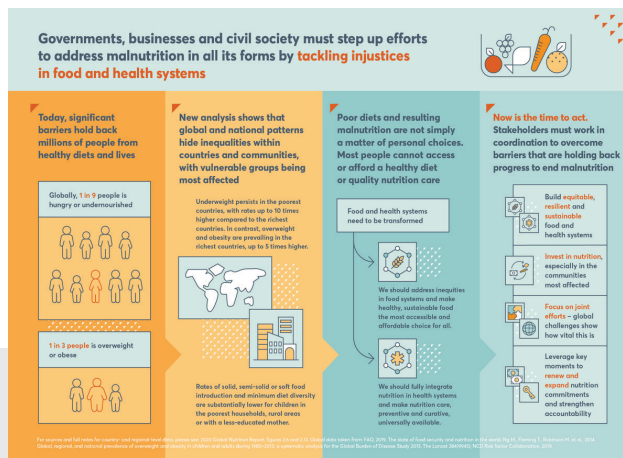
➤ **India Specific Data:**

- **Anaemic Indian Women:**
 - Over **half of Indian women** in the age group 15-49 years are **anaemic**.
 - There has been a rise in **anaemic Indian women** since 2016 from 52.6% to 53% in 2020.
- **Childhood Wasting:**
 - Over 17% of Indian children under 5 years of age are affected.
 - **India is also among 23 countries** that have made no progress or are worsening on reducing 'childhood wasting'.
 - **Wasting refers to** children whose weight is low-for-their height.
- **Child Stunting:**
 - Over 34% of children under 5 years of age are still affected.
 - **India is among 53 countries** 'on course' to meet the target for stunting.
 - Stunting is defined as **low height-for-age**.
- **Childhood Overweight:**
 - The country is **among 105 countries** that are 'on course' to meet the target for 'childhood overweight'.
- **India Meeting Targets:**
 - India is **meeting 7 of the 13 global nutrition targets** which include sodium intake, raised blood pressure (both men and women), obesity (both men and women) and diabetes (both men and women).

➤ **Suggestions:**

- **Increase Finance:**
 - There **needs to be a step-change in efforts and financial investments** to end poor diets and malnutrition.

- **Holistic Approach:**
 - Poor diets and malnutrition should be **addressed holistically and sustainably** to create a healthy future for all.
- **Accountability and Monitoring:**
 - Better data, greater **accountability and systematic monitoring** are key to identify the progress needed.



Global Nutrition Report

- It was conceived following the first **Nutrition for Growth Initiative Summit (N4G)** in 2013.
- The first report was **published in 2014**.
- It acts as a **report card on the world's nutrition**—globally, regionally, and country by country—and on efforts to improve it.
- It is a **multi-stakeholder initiative**, consisting of a Stakeholder Group, Independent Expert Group and Report Secretariat.

Report on 'Health Care Equity in Urban India'

Why in News

According to a recent report, **life expectancy among the poorest is lower by 9.1 years and 6.2 years** among men and women, respectively, compared to the richest in urban areas.

Key Points

- **About the Report:**
 - The report **explores health vulnerabilities and inequalities in cities** in India.

Note:



Health centre count

The map shows the shortfall (%) of primary health centres (PHCs) in urban areas as of July 2020. The shortfall was more than 50% in 14 States/UTs



- It also looks at the availability, accessibility and cost of healthcare facilities, and possibilities in future-proofing services in the next decade.
- It was released recently by Azim Premji University in collaboration with 17 regional NGOs across India.

Findings of the Report:

- **Number of Urban People:**
 - A third of India's people now live in urban areas, with this segment seeing a rapid growth from about 18% (1960) to 34% (in 2019).
 - Close to 30% of people living in urban areas are poor.
- **Chaotic Urban Health Governance:**
 - The report, besides finding disproportionate disease burden on the poor, also pointed to a chaotic urban health governance, where the multiplicity of healthcare providers both within and outside the government without coordination are challenges to urban health governance.
- **Heavy Financial Burden on the Poor:**
 - A heavy financial burden on the poor, and less investment in healthcare by urban local bodies is also a major challenge.

Status of India's Healthcare

- India's healthcare system has been battling various issues, including the low number of institutions and less-than-adequate human resources for quite a while now.
- Essentially, a three-tier structure defined the Indian healthcare system — primary, secondary and tertiary care services.

- The Indian Public Health Standards (IPHS) states that the delivery of primary health care is provided to the rural population through sub-centre, primary health centre (PHC), and community health centre (CHC), while secondary care is delivered through district and sub-district hospitals.
- On the other hand, tertiary care is extended at regional/central level institutions or super specialty hospitals.
- While there is an urgency to focus on all the three levels of primary, secondary and tertiary healthcare, it is imperative that the government look towards improving primary health care as a public good.

Initiatives for Public Health Sector

- **Emergency Response and Health Systems Preparedness Package:**
 - Under the **National Health Mission (NHM)**, technical and financial support is provided to the States/UTs to strengthen the public healthcare system at public healthcare facilities.
- **Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY):**
 - Launched on 23rd September 2018, Ayushman Bharat PM-JAY is the largest Government funded health assurance/insurance scheme in the world.
 - PM-JAY is a centrally sponsored scheme.
- **Pradhan Mantri Swasthya Suraksha Yojana (PMSSY):**
 - PMSSY was announced in 2003 with objectives of correcting regional imbalances in the availability of affordable/reliable tertiary healthcare services and also to augment facilities for quality medical education in the country.

Campaign on SafaiMitra Suraksha Challenge

Why in News

Recently, the **Ministry of Housing and Urban Affairs (MoHUA)** has launched a week-long awareness campaign on **SafaiMitra Suraksha Challenge (SSC)** as part of the 'World Toilet Day' (19th November) celebrations, to run up to the 'Swachh Amrit Diwas'.

- The **Swachh Amrit Diwas** is an award ceremony to recognize the role and efforts of the states, cities, ULBs (Urban Local Bodies) and Cantonment Board

Note:



in **Swachh Survekshan 2021**, and Garbage Free Star Rating certification on 20th November 2021.

World Toilet Day

- In 2013, the **United Nations General Assembly** officially designated 19th November as **World Toilet Day**. It is coordinated by **UN-Water** in collaboration with governments and partners.
- It aims to **break the stigma around sanitation** as the silence around the issue of toilets and sanitation has deadly consequences.
- The **theme for the year 2021** is about **valuing toilets**.

Key Points

- **About:**
 - A total of **246 cities** are participating in **SSC** which is being conducted across the country. The **state capitals, urban local bodies and smart cities** will be eligible to participate.
 - **Cities will be awarded in three sub-categories** – with a population of more than 10 lakhs, 3-10 lakhs and upto 3 lakhs, with a total prize money of Rs. 52 crore.
 - It is one of the government efforts to **combat manual scavenging**.
- **SafaiMitra Suraksha Challenge (SSC):**
 - SSC was **launched on 19th November 2020** on the occasion of World Toilet Day.
 - SSC is aimed to **encourage cities to mechanise their sewer and septic tank cleaning operations** in order to prevent deaths and fatalities of sanitation workers from 'hazardous entry'.
 - The Government launched this "challenge" for all states to **make sewer-cleaning mechanised by April 2021** — if any human needs to enter a sewer line in case of unavoidable emergency, proper gear and oxygen tanks, etc., are to be provided.
- **Initiatives Taken:**
 - Under SSC, **National Safai Karamcharis Finance & Development Corporation (NSKFDC)**, Ministry of Social Justice and Empowerment, supported by MoHUA are **organizing Loan Melas** across the country.
 - The aim is to help Safaimitras avail loans under the **Swachhata Udyami Yojana (SUY)** for procurement of sewer / septic tank cleaning machine / equipment for mechanized cleaning.

- **Skill development training of Safaimitras** have also been conducted through the support of the Ministry of Social Justice and Empowerment via NSKFDC in 115 cities.
- **Call Centre and Helpline number** have been operationalized in 345 cities for safe cleaning of septic tanks/sewers and registering complaints on hazardous cleaning.
- 31 states/UTs have established a **Responsible Sanitation Authority (RSA)** and 210 cities are having the **Sanitation Response Units (SRU)**.
- All 246 participating cities have already notified a **ban on single-use plastic (SUP)**.

Women Participation in STEM

Why in News

Recently, India-Israel Women in **Science, Technology, Engineering and Mathematics (STEM)** conference was held.

- The **need for introducing flexible work times and gender-neutral pays** to enhance women participation in STEM was highlighted.

Key Points

- **Participation of Women in STEM:**
 - About **43% of STEM graduates in India** are women, which is the highest in the world, but their share in STEM jobs in India is a mere 14%.
 - In Indian STEM, the **primary concern** has never been with the **number of women graduates**, but with the proportion of those who ultimately land STEM jobs.
 - S&T has **translated into the economic sphere** and institutions are structured so, Science & Technology (S&T) could **become a changemaker in society** by introducing flexible work times, and gender-neutral pays to enhance women participation in STEM.
 - Greater women's participation in the tech sector will **make women more strong and influential**, giving a boost to their socio-economic situation in the society.
- **Reasons for the Low Participation:**
 - **Stereotypes:** The paucity of women in STEM is **not merely due to skill inadequacy**, but also a result of **assigned stereotypical gender roles**.

Note:



- **Patriarchy:** There are **patriarchal attitudes in hiring practices** or awarding fellowships and grants etc.
- **Society:** Lack of role models, pressures to conform to societal norms and trappings of domesticity.
- **Stress:** Stressors related to marriage, childbirth etc.
- **Household Responsibility:** Responsibility **related to running of households and elder care.**
- **Physical Safety:** Physical safety during the commute to work.
- **Harassment:** Sexual and other types of harassment in workplaces, etc.

➤ **Initiatives to Promote Women Participation:**

- **Vigyan Jyoti Scheme:**
 - It is launched by the **Department of Science & Technology (DST).**
 - It is intended to **create a level-playing field** for the meritorious girls in high school to pursue Science, Technology, Engineering, and Mathematics (STEM) in their higher education.
 - It also **offers exposure for girl students from the rural background** to help to plan their journey from school to a job of their choice in the field of science.
- **GATI Scheme:**
 - The **Gender Advancement for Transforming Institutions (GATI)** will develop a comprehensive Charter and a framework for assessing Gender Equality in STEM.
- **Knowledge Involvement Research Advancement through Nurturing (KIRAN):**
 - Launched in 2014-15, the scheme provides opportunities for women scientists in moving up the academic and administrative ladder.
 - **One of the programmes under the KIRAN scheme** — ‘Women Scientist Scheme’ — provides career opportunities to unemployed women scientists and technologists, especially those who had a break in their career.

Women Related Data: NFHS 5

Why in News

Recently, the latest data from the **National Family Health Survey (NFHS 2019-21)** has been released.

- Earlier in 2020, the **first-phase data of the NFHS-5**

2019-20 was released by the Ministry of Health and Family Welfare, which provided data on various issues related to women in India.

EXCERPTS FROM NFHS SURVEY



WOMEN'S EMPOWERMENT (WOMEN AGE 15-49 YEARS)

	2020-21	2015-16
Participation of married women in household decisions	92%	73.8%
Women who worked in last 12 months and paid in cash	24.9%	21.1%
Women owning a house and/or land (alone or jointly)	22.7%	34.9%
Women having a bank or savings account that they use	72.5%	64.5%
Women having a mobile phone that they themselves use	73.8%	66.6%

NUTRITIONAL STATUS OF ADULTS (AGE 15-49 YEARS)

	2020-21	2015-16
Women whose Body Mass Index (BMI) is below normal	10%	14.9%
Men whose Body Mass Index (BMI) is below normal	9.1%	17.7%
Women who are overweight or obese	41.3%	33.5%
Men who are overweight or obese	38%	24.6%
Average out-of-pocket expenditure per delivery in a public health facility (in Rs)	2,548	8,518
Women who have ever used the internet	63.8%	NA
Men who have ever used the internet	85.2%	NA
Households with any usual member covered under a health insurance/financing scheme	25%	15.7%

Key Points

➤ **Prevalence of Child Marriage:**

- The share of **women aged 20-24** who married before turning 18 has **declined from 27% to 23% in the last five years.**
- **Child marriage** is a key determinant of high fertility, poor maternal and child health, and lower social status of women.

- **West Bengal and Bihar**, with around 41% such women each, had the highest prevalence of girl child marriage.

- The maximum reduction in the proportion of underage marriages was observed in **Rajasthan, Madhya Pradesh, and Haryana.**

➤ **Rampant Anaemia:**

- As many as **57% women aged 15-49 were anaemic in 2019-21**, compared to 53% in 2015-16, while the same for men rose from 22.7% to 25%.
- The most formidable increase—**8.5% was observed for children aged 6-59 months (67.1%).**
- **Among larger states**, West Bengal and Kerala reported the **highest and lowest prevalence**, respectively, of anaemic women.
- **Child anaemia rates worsened** the most in Assam, Mizoram, Chhattisgarh, and Odisha.

➤ **Improving Amenities:**

Note:



- All states, except Manipur, Meghalaya, Assam and Jharkhand, had **over 90% population** with access to improved drinking water sources.
- Bihar, Jharkhand etc states had almost doubled the access since 2015-16, but most **fell below the 75% mark**.
- **Women who own House:**
 - The **number of women who own a house or land in Delhi**, either alone or jointly, has **significantly dipped** over the past five years.
 - While the percentage of women who had a house or land registered in their name in 2015-16 was around 35%, it dipped to 22.7% in 2020-21.
- **Women who have a Bank Account:**
 - It has **gone up 8%** and women who have a mobile phone that they use is **up by 7%**.
- **Access to Internet:**
 - The percentage of women who have **ever used the internet** was around **64%** as compared to 85% men. This data was **not available in the previous survey**.
- **Participation in the Household Participation:**
 - It has gone up from around 74% in 2015-16 to 92% now. The **participation of married women in household decisions** includes health care for self, making major household purchases, and visits to her family or relatives, etc.
- **Out-of-Pocket Expenditure:**
 - It went from Rs 8,518 to Rs 2,548 in five years. Average out-of-pocket expenditure has **seen a significant improvement** in the per delivery in a public health facility.
- **Rise in Obesity:**
 - Obesity among both men and women has risen. While **41.3% of women are now overweight or obese, this figure is 38% for men**.
 - The rise in the percentage of men who are overweight or obese, however, has been faster in men than in women.
- **High Malnutrition:**
 - The share of under-five children who were stunted (too short for age), wasted (low weight for height), or underweight has declined.
 - However, **every third child still suffers** from chronic undernourishment, and every fifth child is acutely malnourished.

- **Stunting:** Meghalaya had the prevalence, followed by Bihar while Rajasthan, Madhya Pradesh, Jharkhand recorded declines of 5-7% since 2015-16.
- **Wasting:** Bihar had the highest prevalence of underweight children, followed closely by Gujarat.

National Family Health Survey (NFHS)

- The **National Family Health Survey (NFHS)** is a large-scale, multi-round survey conducted in a representative sample of households throughout India.
- The **Ministry of Health and Family Welfare (MoHFW)**, Government of India has designated the International Institute for Population Sciences (IIPS) Mumbai, as the nodal agency for providing coordination and technical guidance for the survey.
 - IIPS collaborates with a number of Field Organizations (FO) for survey implementation.
- Each successive round of the NFHS has had two specific goals:
 - To **provide essential data on health and family welfare** needed by the Ministry of Health and Family Welfare and other agencies for policy and programme purposes.
 - To **provide information on important emerging health** and family welfare issues.
- The funding for different rounds of NFHS has been provided by USAID, the Bill and Melinda Gates Foundation, **UNICEF, UNFPA, and MoHFW** (Government of India).

India's Declining Total Fertility Rate

Why in News

Recently, the latest data from the **National Family Health Survey (NFHS 2019-21)** has been released.

- The data shows a **declining trend** regarding **Total Fertility Rate** (TFR: the average number of children per woman).

Key Points

- **About TFR:**
 - **Total fertility rate (TFR)** in simple terms refers to the **total number of children born or likely to be born to a woman in her lifetime** if she were

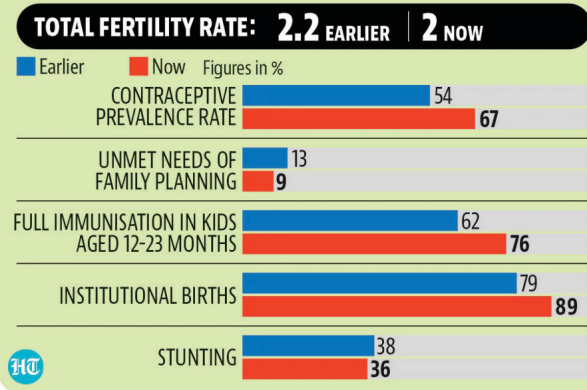
Note:



subject to the prevailing rate of age-specific fertility in the population.

- TFR of about **2.1 children per woman** is called **Replacement-level fertility**. TFR lower than 2.1 children per woman — indicates that a **generation is not producing enough children to replace itself**, eventually leading to an outright reduction in population.
- This value represents the average number of children a woman would need to have to **reproduce herself by bearing a daughter** who survives to childbearing age.

Here's what latest NFHS data shows



Declining Trend of TFR:

- Due to the **sustained family planning programme** spanning decades, the TFR, has declined further from 2.2 reported in 2015-16 to **2.0 at the all-India level**.
 - The **TFR is at 1.6 in urban areas and 2.1 in rural India**.
 - The total fertility rate, was as high as **6 or more in 1950s**
- It is a very huge development because of maternal and child health improvement.

Related Government Initiatives

- **Prime Minister's Appeal:** During his **Independence Day Speech** in 2019, the Prime Minister appealed to the country that population control was a form of patriotism.
- **Mission Parivar Vikas:** The Government has launched Mission Parivar Vikas in 2017 for **substantially increasing access to contraceptives** and family planning services in 146 high fertility districts with TFR of 3 and above in seven high focus states.

- **National Family Planning Indemnity Scheme (NFPIS):** This scheme was launched in the year 2005 under this scheme **clients are insured in the eventualities of death, complication and failure following sterilization**.

- **Compensation scheme for Sterilization Acceptors:** Under the scheme, the Ministry of Health and Family Welfare provides compensation for loss of wages to the beneficiary and also to the service provider (& team) for conducting sterilizations from the year 2014.

Significance of Declining TFR:

- **Population Stabilisation:** TFR of 2 is a "definite indicator" of **stability of population in the long term in the country**. A TFR of 2.1 is something a country wants to achieve.
 - A fall to 2 means India has achieved the goal of population stabilisation.
 - It essentially means that India need not worry too much about a very large population being a challenge to our development.
- **Accelerated Economic Growth:** The younger population profile for the next 2-3 decades will provide an **opportunity for accelerated economic growth**.
 - However, in order to leverage this great opportunity for accelerated development, **India should invest in public health and education with skills**.
- **Delayed Peak Population:** This also means we will possibly still become the most populous country in the world — it was expected somewhere between 2024-2028 — but it will now be delayed.

Internal Displacement

Why in News

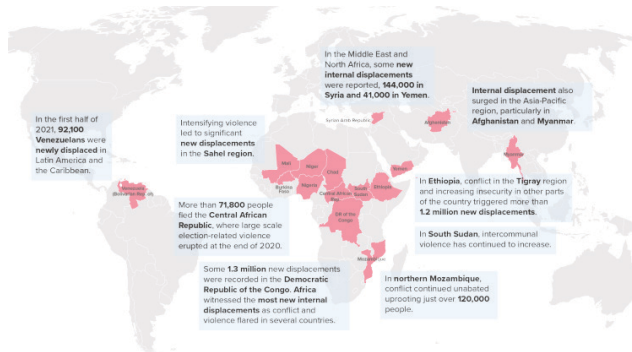
According to a report (**Mid-Year Trends 2021 Report**) by the **United Nations High Commissioner for Refugees (UNHCR)**, nearly **51 million people were internally displaced across 33 countries** due to conflict and violence in the first six months of 2021.

- The **combination of conflict, Covid-19, Poverty, Food insecurity and the Climate emergency** has compounded the humanitarian plight of the displaced, most of whom are hosted in developing regions.

Note:



- **Africa is the region that is most vulnerable** in terms of the numbers of displaced persons.



Key Points

➤ Internal Displacement (Meaning):

- Internal displacement describes the **situation of people who have been forced to leave their homes but have not left their country.**
- **Factors of Displacement:** Millions of people are uprooted from their homes or places of habitual residence each year **in the context of conflict, violence, development projects, disasters and climate change** and remain displaced within their countries' borders.
- **Components:** Internal displacement is based on **two components**:
 - The person's movement is **coerced or involuntary** (to distinguish them from economic and other voluntary migrants);
 - The person stays within **internationally recognised state borders** (to distinguish them from refugees).
- **Difference from Refugee:** According to the **1951 Refugee Convention**, a "refugee" is a person who has been persecuted and forced to leave his native country.
 - A precondition of being considered a refugee is that a **person crosses an international border.**
 - Unlike refugees, internally displaced people are **not the subject of any international convention.**
 - At the international level, **no single agency or organisation** has been designated as the global lead on protection and assistance of internally displaced persons.
 - However, there are **United Nations Guiding Principles on Internal Displacement.**

- **Challenges Faced by Internally Displacement Persons (IDPs):** IDPs can live under threat of **physical attack, sexual- or gender-based violence, and run the risk of being separated from family members.**

- They are frequently deprived of adequate shelter, food and health services, and often lose their property, land or their access to livelihoods.

➤ Internal Displacement in India:

- **Extent:** Estimating the number of IDPs in India is problematic, as regular monitoring is not possible in such a huge country which lacks a central authority responsible for coordinating data from central and state governments.
 - Nearly five million people were displaced in India in 2019 - the highest in the world so far - according to '**The Global Report on Internal Displacement (GRID 2020)**'.
- **Policy Framework:** India has **no national policy and legal institutional framework to deal with either refugees or IDPs.**
 - India **has not ratified the 1951 Convention and 1967 Protocol** and does not permit UNHCR access to most refugee groups.
 - In the absence of a permanent institutional structure to oversee refugee issues, the granting of refugee status has been at the discretion of the political authorities.
- **Factors of Internal Displacement in India:**
 - **Secessionist Movements:** Since independence, north-east India has witnessed two major armed conflicts – the **Naga movement** and **Assam movement**.
 - Jammu & Kashmir's war between state forces and militants, had led to mass exodus of the **Kashmiri Pandits.**
 - **Identity-based Autonomy Movements:** Identity-based autonomy movements, such as in **Bodoland, Punjab, Gorkhaland and Ladakh**, have also led to violence and displacement.
 - **Localized Violence:** Internal displacement has also arisen from **caste disputes** (as in Bihar and Uttar Pradesh), **religious fundamentalism** and the '**son-of-the soil policy** (aggressive denial of residency and employment rights to non-indigenous groups).
 - **Environmental and Development-induced Displacement:** In order to achieve rapid economic

Note:



growth, India has invested in industrial projects, dams, roads, mines, power plants and new cities which have been made possible only through massive acquisition of land and subsequent displacement of people.

Global Girlhood Report 2021: Girls Right in Crisis

Why in News

Recently, an **Non-Governmental Organization (NGO)**, Save the Children released the **Global Girlhood Report 2021: Girls Right in Crisis**.

International Day of the Girl Child

➤ About:

- It is observed annually on **11th October**. It was declared by the **United Nations (UN)**, which was first observed in 2012.
- A resolution to declare **11th October** as the International Day of the Girl Child was adopted by the UN General Assembly on 19th December 2011.
- The day is **dedicated to raising awareness on gender equality** while assuring rights and improving opportunities for girls.

➤ Theme for 2021:

- Digital generation. Our generation.

Key Points

➤ Rate of Child Marriage:

- West and Central Africa **has the highest rate of child marriage** in the world.

➤ Death Due to Child Marriage:

- **Child marriage kills more than 60 girls a day globally**, 26 girls a day in West and Central Africa and **six girls a day** in South Asia.
- South Asia is followed by **East Asia** and the **Pacific** and **Latin American** and the **Caribbean**.
- The deaths are majorly caused from **pregnancy and childbirth** resulting from child marriage.

➤ Effect of Covid on Child Marriage:

- **With school closures, health services under strain or closed**, and more families being pushed into poverty, women and girls face an increased risk of violence during lengthy **lockdowns**.

- **A further 10 million girls are now expected to marry by 2030**, leaving more girls at risk of dying.
- Earlier, according to a report published by ChildLine India **the pandemic and the subsequent lockdown have proved to be new drivers of child marriages** in rural Madhya Pradesh.
- Also some activists and organisations of Karnataka have raised the issue of **increased child marriages in Lockdown** with the Ministry of Women and Child Development.

➤ Suggestions: The report called on the governments to:

○ Help Girls Raising Voices:

- Raise girls' voices by **supporting their right to safe and meaningful participation** in all public decision-making.

○ Focus on Gender Equality:

- Address immediate and ongoing risks of **gender-based violence**, including child marriage, by putting **girls' rights and gender equality at the center of Covid-19** and humanitarian responses, development policy, and broader efforts to build forward better.

○ Guarantee Girls Their Rights:

- Guarantee the rights of all girls, **including those impacted by different forms of inequality and discrimination** by developing inclusive policies and programs. Safe and ethical data collection must also be improved to better understand and respond in real-time to Covid-19's impact on existing economic, climate, and conflict-related crises.

○ Ensure Participation of Female Staffs:

- Ensure the **safe and unrestricted participation of female humanitarian staff in all humanitarian response efforts**, including needs assessments and the design, implementation, and monitoring, and evaluation of all humanitarian services at every level.

○ Join the Generation Equality Movement:

- The movement is working to deliver on the **Global Acceleration Plan for Gender Equality** (launched by Generation Equality Forum), which set a target to prevent nine million child marriages in five years.

Note:



Child Marriages India Specific Data

- **United Nations Children's Fund (UNICEF)** estimates suggest that each year, at least **1.5 million girls under 18 get married in India**, which makes it home to the **largest number of child brides in the world** - accounting for a third of the global total.
 - Nearly 16% of adolescent girls aged 15-19 are currently married.
- While the prevalence of girls getting married before age 18 has **declined from 47% to 27% between 2005-2006 and 2015-2016**.

Antimalarial Drug Resistance

Why in News

In recent years there is increasing evidence of the **Antimalarial Drugs Resistance (AMR)** against **Malaria**.

- It has been noticed while treating with the Drugs (Artemisinin or Chloroquine), either alone or with partner drugs.

Key Points

- **Drug Resistance:**
 - It is simply defined as the ability of disease-causing germs (e.g., bacteria or viruses) to **continue multiplying despite the presence of drugs** that usually kill them.
 - Drug resistance is the **reduction in effectiveness of a medication** to cure a disease or condition.
 - **For example:** With **HIV (Human immunodeficiency virus)**, drug resistance is caused by **mutations** in the virus's genetic structure. These mutations lead to changes in certain HIV proteins and enzymes (e.g., protease enzyme) which helps HIV to replicate.
- **Factors Causing AMR:**
 - **Mutations:**
 - The **mutations in the malarial parasite** have been responsible for artemisinin partial resistance.
 - As many as 1,044 studies conducted globally from 2010-2019 confirmed the Pfk13 mutation.
 - **Inadequate Coverage:**
 - Imperfect coverage of antimalarial drugs, **improper diagnosis, misuse of drugs** and not-so-good mosquito control programmes were

cited by the report as major contributory factors causing resistance against these drugs.

- These failures lead to increased **exposure of the malaria parasites to drugs**, increasing the risk of drug resistance

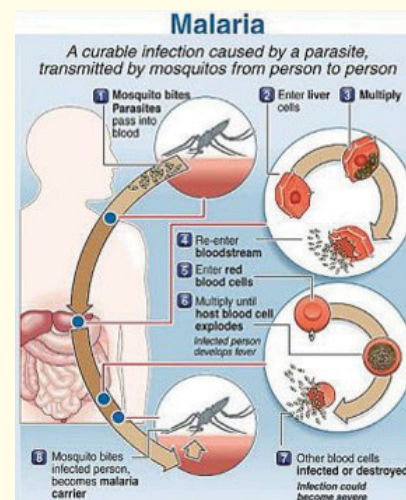
➤ Concern:

- **Chloroquine (CQ)** is the most commonly prescribed drug for P Vivax parasite. A **World Health Organisation (WHO)** report said P vivax resistance to chloroquine had been reported from all WHO regions.
 - Twenty-eight countries, including **India**, showed the **CQ resistance**.
- A widespread resistance scenario could result in a yearly **excess of 22 million treatment failures, 116,000 deaths** and costs including an estimated **USD 130 million** to change treatment policy.

Malaria

➤ About:

- It is a life threatening **mosquito borne blood disease** caused by **plasmodium parasites**, predominantly found in the tropical and subtropical areas of **Africa, South America as well as Asia**.
- The parasites **spread through the bites of infected female Anopheles mosquitoes**.
- When an infected mosquito bites a person, the **parasite is released into the bloodstream**, it then travels to the liver where it matures.



➤ Symptoms:

- Sweating, headache, nausea, vomiting and abdominal pain etc are cited as the symptoms.

Note:



➤ Types:

- **Four types of Parasites** can infect humans: Plasmodium Vivax, P. ovale, P. malariae and P. falciparum.

➤ Indian Scenario:

- India carries **2% of the global malaria case burden** and **2% of global malaria deaths**.
 - India also bears **85.2%** of the malaria burden in **South East Asia**.
- India carries **47% of the global P. vivax malaria burden**, making the country strategically important for **global malaria elimination**, particularly in the South-East Asian region, on the other hand **India** is the only high endemic country which has **reported a decline of 17.6% in 2019 as compared to 2018**.

Ecological Threat Report 2021

Why in News

Recently, the **Institute of Economics and Peace (IEP)**, an international think tank released the **Ecological Threat Report (ETR) 2021**: Understanding ecological threats, resilience and peace.

- This is the **second edition** of the ETR, which **covers 178 independent states** and territories.
- The **ETR includes the most recent and respected scientific research** on population growth, **water stress, food insecurity, droughts, floods, cyclones**, and **rising temperature**.

Key Points

➤ Conflict and Ecological Threats:

- **Around 1.26 billion people across 30 countries** are suffering from both extreme ecological risk and low levels of resilience.
 - These countries are least likely to be able to mitigate and adapt to new ecological threats, leading to mass displacement.
- As many as **13 countries faced extremely high** and **34 others faced high** ecological threats.
- The most vulnerable countries are clustered in the **Middle East and North Africa, sub-Saharan Africa and South Asia**.

- **Ecological degradation and conflict work** in a vicious circle, whereby one degradation of resources leads to conflict and vice versa.
- **Climate change** will have an amplifying effect, causing further ecological degradation and pushing some countries through violent tipping points

➤ Food Risk:

- Global food insecurity has **increased by 44% since 2014**, affecting 30.4 % of the world's population in 2020, and is likely to rise further.
- As a region, **south Asia is the worst-placed**, with water and food risks driving the average ETR score in the region.
- **Covid-19 has amplified food insecurity further** and will likely have a long-lasting negative impact on world hunger due to stagnant economic growth.

➤ Water Risk:

- **By 2040 over 5.4 billion people** will live in countries facing extreme water stress.
 - Lebanon and Jordan are the countries most at risk.
- **Sub-Saharan Africa has the most countries** with the lowest levels of social resilience combined with the highest population growth.
 - 70% of its population suffer from inadequate access to safely managed water, which will be compounded by high population growth.

➤ Rapid Population Growth:

- Eleven countries are projected to **double their population between 2021 and 2050**. They are all in sub-Saharan Africa.
- The three countries with the largest projected increases in population are **Niger, Angola and Somalia**, where the populations will increase by 161, 128 and 113% respectively.

➤ Temperature Anomalies and Natural Disasters:

- From 1990 to 2020, a total of **10,320 natural disasters occurred globally**. **Flooding** has been the **most common natural disaster**, accounting for 42 % of the total disaster count.
- In 2020, **177 countries and territories recorded a warmer average temperature** compared to their historical average temperatures.

➤ Recommendations:

- The report recommended a policy to **combine health, food, water, refugee relief, finance**,

Note:



agricultural and business development into one integrated agency in high-risk areas and empowering local communities.

Internal Displacement in India

According to report titled **The 'Lost at Home'** published last year by the **United Nation Children's Fund (UNICEF)**, more than **five million people were internally displaced in India** due to natural disasters, conflict and violence in 2019, constituting the **highest number of new internal displacements in the world** during the period followed by the Philippines, Bangladesh and China.

- Almost 33 million new displacements were recorded in 2019 - **around 25 million were due to natural disasters** and **8.5 million as consequence of conflict and violence**.

2021 State of the Education Report for India: UNESCO

Why in News

On the Occasion of the **World Teachers' Day (5th October)**, the **United Nations Educational, Scientific and Cultural Organization (UNESCO)** launched its **2021 State of the Education Report (SOER) for India: "No Teacher, No Class"**.

Key Points

- **About:**
 - The findings are largely based on analysis of **Periodic Labour Force Survey (PLFS)** and the **Unified District Information System for Education (UDISE)** data (2018-19).

MOST TEACHER VACANCIES IN UP

- UP (3.3L), Bihar (2.2L) & Bengal (1.1L) have the most vacancies in teaching positions in schools
- Of the 11L vacant posts in the country, 69% are in rural areas, according to a Unesco study
- At 21k, MP has the highest number of single-teacher schools
- 7.7% pre-primary, 4.6% primary, 3.3% upper-primary & 0.8% secondary teachers in India are underqualified



“Pupil-teacher ratios are adverse in secondary schools. Also, there's no info on availability of special education, music, arts and physical education teachers. The need (for teachers) is likely to grow, given the shortages in certain education levels and subjects (and because) about 30% of the current workforce will need to be replaced

—Unesco state of education report

- It aims to **serve as a reference** for enhancing the **implementation of the National Education Policy (NEP)** and towards the realization of the **Sustainable Development Goal (SDG) 4** (target 4c on teachers).

- **Target 4c:** By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing States.

Findings of the Report:

- **Lack of Teachers:**
 - There are nearly **1.2 lakh single-teacher schools** in the country of which an overwhelming **89% are in rural areas**.
 - The report projects that **India needs 11.16 lakh additional teachers** to meet the current shortfall.
- **Performance of States (Women Teachers):**
 - **Tripura has the least number of women teachers**, followed by Assam, Jharkhand and Rajasthan.
 - **Chandigarh leads the chart** followed by Goa, Delhi, Kerala.
- **Increase in Number of Teachers in Private Sector:**
 - The proportion of teachers employed in the private sector **grew from 21% in 2013-14 to 35% in 2018-19**.
 - The **Right to Education Act** stipulates that the **Pupil-Teacher Ratio (PTR)** should be 30:1 in classes 1-5 and 35:1 in higher grades.
- **Lack of Digital Infrastructure:**
 - The **overall availability of computing devices** (desktops or laptops) in schools is 22% for all India, with rural areas seeing much lower provisioning (18%) than urban areas (43%).
 - **Access to the internet in schools** is 19% all over India - only 14% in rural areas compared to 42% in urban areas.
- **Increment in Gross Enrolment Ratio (GER):**
 - For **elementary schools**, it has **increased from 81.6 in 2001 to 93.03** in 2018-19 and stands at 102.1 in 2019-2020.
 - **GER is the number of students enrolled** in a given level of education, regardless of age, expressed as a percentage of the official school-age population corresponding to the same level of education.

Note:



- **Overall retention is 74.6%** for elementary education and 59.6% for secondary education in 2019-20.

➤ **Recommendations:**

- **Increase the number of teachers and improve working conditions** in North Eastern states, rural areas and '**aspirational districts**'.
- **Increase the number of physical education**, music, art, vocational education, early childhood and special education teachers.
- Value the **professional autonomy of teachers**.
- Build **teachers' career pathways**.
- Provide teachers with **meaningful Information and Communication Technology (ICT) training**.
- Develop **teaching governance** through consultative processes, based on mutual accountability.

Nationwide Pneumococcal Conjugate Vaccine Drive

Why in News

Recently, the **Union Health Minister** has launched a **nationwide expansion of Pneumococcal 13-valent Conjugate Vaccine (PCV)** with an aim to **reduce under 5 mortalities** caused due to pneumonia.

- It was launched under the **Universal Immunisation Programme (UIP)** as a part of '**Azadi ka Amrit Mahotsav**'.
- It was for the **first time in the country** that PCV would be available for universal use.

Key Points

- **Pneumococcal Conjugate Vaccine (PCV):**
 - A Pneumococcal Conjugate Vaccine **containing 13 different strains of the bacterium Streptococcus pneumoniae**, used in children and studied in patients with impaired immune system for the prevention of pneumococcal disease.
 - **Conjugate vaccines** are made using a combination of two different components.
- **Pneumococcal Disease:**
 - **About:** It is a **bacterial infection caused by Streptococcus pneumoniae**, sometimes known as pneumococcus.

- **Symptoms:** These **bacteria can cause many types of illnesses**, including pneumonia, which is an infection of the lungs. Pneumococcal bacteria are **one of the most common causes of pneumonia**.
- **Vulnerable Population:** Children under 2 years of age, people with certain medical conditions, adults 65 years or older, and cigarette smokers are at the highest risk.
- **Status in India:** In India, **around 16% of deaths** among children occur due to pneumonia.
 - **Pneumonia is contagious** and can be spread through coughing or sneezing. It can also be spread through fluids, like blood during childbirth, or from contaminated surfaces.

➤ **Universal Immunisation Programme (UIP):**

- **Launch:**
 - The **Immunization Programme in India** was introduced in 1978 as '**Expanded Programme of Immunization (EPI)**' by the Ministry of Health and Family Welfare.
 - In 1985, the Programme was modified as '**Universal Immunization Programme (UIP)**'.
- **Objectives of the Programme:**
 - Rapidly increasing immunization coverage,
 - Improving the quality of services,
 - Establishing a reliable cold chain system to the health facility level,
 - Introducing a district-wise system for monitoring of performance, and
 - Achieving self-sufficiency in vaccine production.
- **Features:**
 - **UIP prevents mortality and morbidity** in children and pregnant women **against 12 vaccine-preventable diseases**. But in the past, it was seen that the increase in immunization coverage had slowed down and it increased at the rate of 1% per year between 2009 and 2013.
 - **Nationally against 10 diseases - Diphtheria**, Pertussis, Tetanus, **Polio**, **Measles**, Rubella, severe form of Childhood **Tuberculosis**, **Rotavirus diarrhea**, **Hepatitis B** and Meningitis & Pneumonia caused by Haemophilus Influenzae type B.
 - **Sub-nationally against 2 diseases** - Pneumococcal Pneumonia and Japanese Encephalitis; of which Pneumococcal Conjugate vaccine has

Note:



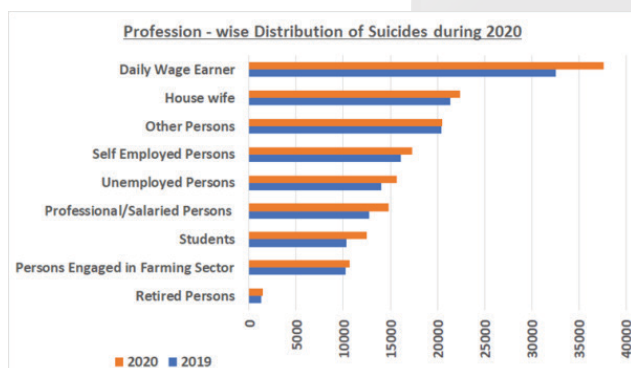
been nationally expanded, while JE vaccine is provided only in endemic districts.

- To accelerate the coverage, **Mission Indradhanush** was envisaged and implemented since 2015 to rapidly increase the full immunization coverage to 90%.
- Recently, the **Intensified Mission Indradhanush (IMI) 3.0 scheme** has been rolled out to cover children and pregnant women who missed routine immunisation during the Covid-19 pandemic.

Accidental Deaths & Suicides in India Report 2020 : NCRB

Why in News

Recently, the **National Crime Records Bureau (NCRB)** released the Accidental Deaths & Suicides in India Report 2020.



Key Points

➤ Suicide Categories:

- The report divides suicides into nine categories — apart from daily wagers, housewives and people working in the farm sector, the deaths are listed under 'professionals/salaried persons', 'students', 'self-employed persons', 'retired persons', and 'others'.
- **NCRB started categorizing daily wagers** in its 'Accidental Deaths & Suicides' data only in 2014.

➤ Number of Suicides:

- Suicides in India rose 10% from 2019 to an all-time high of 1,53,052 in the pandemic year of 2020.
- The share of daily wage earners among those who died by suicide has doubled between 2014 and

2020, followed by 'housewives', self-employed persons, farmers/cultivators and retired persons.

- The **professional/salaried persons** group registered an increase in suicides.
- The unemployed persons group saw an increase in suicides and their proportion went up slightly from 2019.
- **Deaths caused by accidents came down from 2019** and the number is the lowest since 2010.
- The share of **students** in the total suicides has been rising steadily over the years and has now reached the **highest level since 1995**.

➤ State-Wise Analysis:

- The **worst among States continues to be Maharashtra**, with 4,006 suicides in the farm sector, including a 15% increase in farm worker suicides.
- Other States with a poor record include **Karnataka, Andhra Pradesh and Madhya Pradesh**.

➤ Cause-Wise Analysis:

- Among **causes of suicide** that make up at least a percent of such deaths:
 - **Poverty** and **unemployment** registered the biggest increase.
 - **Drug abuse or alcohol addiction**, illness, and family problems come next.
 - Although **students have registered an increase in deaths** by suicide it was likely related to relatively longer-term prospects (perhaps inability to continue education) than exams.

➤ Related Initiatives:

- **Mental Healthcare Act, 2017**: It aims to **provide mental healthcare services** for persons with mental illness.
- **KIRAN**: The **Ministry of Social Justice and Empowerment** has launched a 24/7 toll-free helpline to provide support to people facing anxiety, stress, depression, suicidal thoughts and other mental health concerns.
- **Manodarpan Initiative**: It is an initiative of the **Ministry of Education** under **Atmanirbhar Bharat Abhiyan**. It is aimed to **provide psychosocial support** to students, family members and teachers for their mental health and well-being during the times of **Covid-19**.

Note:



National Crime Records Bureau

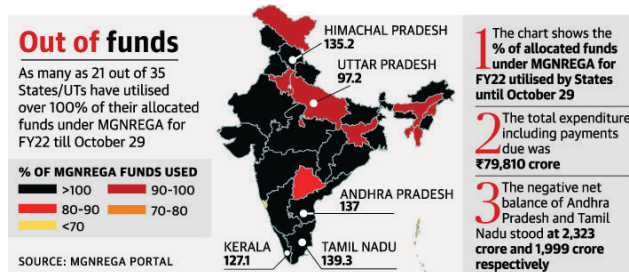
- NCRB, headquartered in New Delhi, was set-up in **1986 under the Ministry of Home Affairs** to function as a repository of information on crime and criminals so as to assist the investigators in linking crime to the perpetrators.
- It was set up based on the recommendations of the **National Police Commission (1977-1981)** and the **MHA's Task Force (1985)**.
- NCRB brings out the **annual comprehensive statistics** of crime across the country ('Crime in India' report).
 - Having been published since 1953, the report **serves as a crucial tool** in understanding the law and order situation across the country.
- The inaugural function of the **2nd CCTNS Hackathon and Cyber Challenge 2020-21** of NCRB was held in New Delhi.

Dearth of Funds in MGNREGA

Why in News

The **Centre's flagship rural employment scheme (MGNREGA)** has run out of funds halfway through the financial year. This means that **payments for MGNREGA workers as well as material costs will be delayed**, unless the States dip into their own funds.

- Earlier, the government **introduced the category-wise wage payment system for SC, ST and others**, as made applicable from this current financial year (2021-22), to accurately reflect on the ground flow of funds to various population groups.



Key Points

- **MGNREGA Scheme:**
 - The **Mahatma Gandhi National Rural Employment Guarantee Act**, earlier known as the National Rural Employment Guarantee Act was passed in 2005

to augment employment generation and social security in India.

- The scheme is a **demand-driven wage employment scheme**, which functions under the **Ministry of Rural Development**.
- **Every adult member of a household** in a rural area with a job card is eligible for a job under the scheme.
- The scheme envisages **providing 100 days of guaranteed wage employment** in a financial year to adult member volunteers for unskilled manual work.
- It **covers all districts of India except the ones** with 100% urban population.
- There is also a provision for **additional 50 days of unskilled wage employment** in drought/natural calamity notified rural areas.
- As per **Section 3(4) of the MGNREGA**, the States may make provisions for providing additional days beyond the period guaranteed under the Act from their own funds.

Issues with MGNREGA:

- **Ridiculously Low Wage Rate:**
 - Currently, the MNREGA wage rates of **at least 17 of the 21 major states** are even lower than the state minimum wage for agriculture. The shortfall is in the range of 2-33% of the minimum wage.
 - The **National Sample Survey Office (NSSO)**, 2017 data shows that the average daily wage for general agricultural labourers is Rs. 264.05 for men, and Rs. 205.32 for women.
 - The **ridiculously low wage rates** have resulted in lack of interest among workers in working for MGNREGA schemes, making way for contractors and middle men to take control locally.
- **Inadequate Financing:**
 - Due to lack of funds, state governments find it difficult to meet the demand for employment under MGNREGA.
- **Delay in Payment of Wages:**
 - Most states have failed to disburse wages within 15 days as mandated by MGNREGA. In addition, workers are not compensated for a delay in payment of wages.

Note:



- This has turned the scheme into a supply-based programme and subsequently, workers had begun to lose interest in working under it.
- A 2016 judgement of the Supreme Court described pending wage payments under MGNREGA as “a clear constitutional breach committed by the State” and “a modern form of begar”.
- **Ineffective Role of PRI:**
 - With very little autonomy, gram panchayats are not able to implement this act in an effective and efficient manner.
- **Large Number of Incomplete works:**
 - There has been a **delay in the completion of works under MGNREGA** and inspection of projects has been irregular. Also, there is an issue of quality of work and asset creation under MGNREGA.
- **Fabrication of Job cards:**
 - There are **several issues related to the existence of fake job cards**, the inclusion of fictitious names, missing entries and delays in making entries in job cards.

Global Food Security Index 2021

Why in News

India is ranked at **71st** position in the **Global Food Security (GFS) Index 2021** of 113 countries.

- Earlier, India was ranked **101st** position in the **Global Hunger Index (GHI) 2021**.

Key Points

- **About the Index:**
 - **Developed by:**
 - The GFS Index was designed and constructed by **London-based Economist Impact** and is sponsored by **Corteva Agriscience**.
 - The 2021 GFSI is the **tenth edition of the index**. It is **published every year**.
 - **Calculation:**
 - It measures the underlying drivers of food security based on the **following factors:**

- **Affordability**
- **Availability**
- **Quality and Safety**
- **Natural Resources and Resilience**
- It considers **58 unique food security indicators** including income and economic inequality - calling attention to systemic gaps and actions needed to accelerate progress toward **United Nations Sustainable Development Goal** of Zero Hunger by 2030.
- **Findings of the Report (India and World):**
 - **Top Rankers:**
 - Ireland, Austria, the UK, Finland, Switzerland, the Netherlands, Canada, Japan, France and the US shared the top rank with the overall GFS score in the range of 77.8 and 80 points on the index.
 - **India's Rank:**
 - **Overall Position:** India held **71st position** with an **overall score of 57.2 points** on the GFS Index 2021 of 113 countries
 - **In Comparison to Neighbouring Countries:** It **fared better than** Pakistan (75th position), Sri Lanka (77th Position), Nepal (79th position) and Bangladesh (84th position). But the country was **way behind China** (34th position).
 - However, over the past 10 years, **India's incremental gains in overall food security score were lagging behind** that of Pakistan, Nepal and Bangladesh.
 - **India's score improved only by 2.7 points to 57.2 in 2021 from 54.5 in 2012** when compared with Pakistan by 9 points (to 54.7 in 2021 from 45.7 in 2012).
 - **Pakistan scored better than India in the food affordability category** and Sri Lanka was even better. On the **remaining 3 factors**, India scored better than Pakistan, Nepal, Bangladesh and Sri Lanka.
- **Concerns:**
 - **Global food security has decreased for the second year in a row after seven years of progress towards the Sustainable Development Goal** of achieving zero hunger by 2030.
 - While countries have made significant strides toward addressing food insecurity in the past ten years,

Note:



food systems remain vulnerable to economic, climatic, and geopolitical shocks.

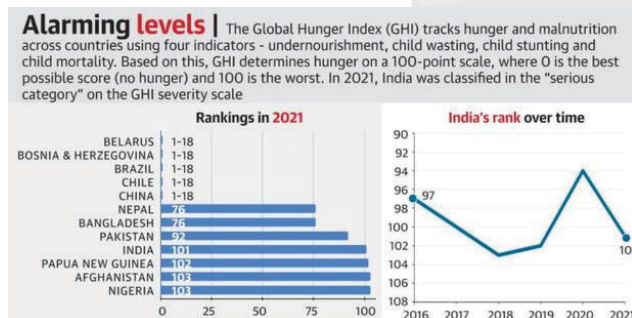
➤ **Suggestions:**

- **Action is imperative at all levels**—local, national, and global—to end hunger and malnourishment and ensure food security for all.
- To **meet these present and emerging future challenges** requires that investments in food security are sustained – from innovation in climate-resilient crop yields to investing in programs to assist the most vulnerable.

Global Hunger Index 2021

Why in News

India has slipped to 101st position in the Global Hunger Index (GHI) 2021 of 116 countries, from its 2020 position of 94th.



Key Points

➤ **About the Global Hunger Index:**

- **Annual Report:** Jointly published by Concern Worldwide and Welthungerhilfe.
 - It was first produced in 2006. It is published every October. The 2021 edition marks the 16th edition of the GHI.
- **Aim:** To comprehensively measure and track hunger at the global, regional, and country levels.
- **Calculation:** It is calculated on the basis of four indicators:
 - **Undernourishment:** Share of the population with insufficient caloric intake.
 - **Child Wasting:** Share of children under age five who have low weight for their height, reflecting acute undernutrition.

- **Child Stunting:** Share of children under age five who have low height for their age, reflecting chronic undernutrition.
- **Child Mortality:** The mortality rate of children under the age of five.

○ **Scoring:**

- Based on the values of the four indicators, the GHI determines hunger on a 100-point scale where **0 is the best possible score (no hunger) and 100 is the worst**.
- Each country's GHI score is classified by severity, from low to extremely alarming.

○ **Data Collection:**

- Undernourishment data are provided by the **Food and Agriculture Organisation** and child mortality data are sourced from the **UN Inter-agency Group for Child Mortality Estimation (UN IGME)**.
- Child wasting and stunting data are drawn from the joint database of **UNICEF**, the **World Health Organization (WHO)** and the **World Bank**, among others.

➤ **Government of India Stand:**

- The **Ministry of Women and Child Development** has **criticised the report** claiming that the methodology used by FAO is **unscientific**.
- According to the Government, the **Global Hunger Index Report 2021** and **FAO report on 'The State of Food Security and Nutrition in the World 2021'** have completely ignored the following facts:
 - They have based their assessment on the results of a **'four question'** opinion poll, which was **conducted telephonically by Gallup**.
 - The scientific measurement of undernourishment would **require measurement of weight and Height**, whereas the methodology involved here is based on a **Gallup poll, based on a pure telephonic estimate of the population**.
 - The report completely **disregards Government's massive effort** to ensure food security of the entire population during the Covid period such as **Pradhan Mantri Garib Kalyan Anna Yojna (PMGKAY)** and **Atmanirbhar Bharat Scheme (ANBS)**.

Note:



Some Related Initiatives by India

- **Eat Right India Movement:** An outreach activity organised by the Food Safety and Standards Authority of India (FSSAI) for citizens to nudge them towards eating right.
- **POSHAN Abhiyan:** Launched by the Ministry of Women and Child Development in 2018, it targets to reduce stunting, undernutrition, anemia (among young children, women and adolescent girls).
- **Pradhan Mantri Matru Vandana Yojana:** A centrally sponsored scheme executed by the Ministry of Women and Child Development, is a maternity benefit programme being implemented in all districts of the country with effect from 1st January, 2017.
- **Food Fortification:** Food Fortification or Food Enrichment is the addition of key vitamins and minerals such as iron, iodine, zinc, Vitamin A & D to staple foods such as rice, milk and salt to improve their nutritional content.
- **National Food Security Act, 2013:** It legally entitled up to 75% of the rural population and 50% of the urban population to receive subsidized food grains under the Targeted Public Distribution System.
- **Mission Indradhanush:** It targets children under 2 years of age and pregnant women for immunization against 12 Vaccine-Preventable Diseases (VPD).
- **Integrated Child Development Services (ICDS) Scheme:** Launched on 2nd October, 1975, the ICDS Scheme offers a package of six services (Supplementary Nutrition, Pre-school non-formal education, Nutrition & health education, Immunization, Health check-up and Referral services) to children in the age group of 0-6 years, pregnant women and lactating mothers.

Assistance to Disabled Persons Scheme

Why in News

Recently, a Samajik Adhikarita Shivar (social empowerment camp) for distribution of aids and assistive devices to **Divyangjan** under the **ADIP (Assistance to Disabled Persons) Scheme** was organised in Punjab.

- **Divyangjan or Divyang:** Earlier, in 2015 the Prime Minister decided that persons with disabilities should no longer be referred to as disabled persons or viklang

(someone with non-functional body parts) instead they will be referred to as Divyangjan or Divyang (**one with a divine body**).

Key Points

- **About:**
 - **Ministry:**
 - **Ministry of Social Justice and Empowerment** is the Nodal ministry
 - It has been in operation since 1981.
 - **Definition:**
 - The scheme follows the definitions of various types of disabilities as given in the **Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) (PWD) Act 1995**.
 - The PWD Act was replaced by the **Right of Persons with Disabilities Act 2016**.
 - **Objective:**
 - To assist the needy disabled persons in procuring durable, sophisticated and scientifically manufactured, modern, standard aids and appliances that can **promote their physical, social and psychological rehabilitation** by reducing the effects of disabilities and enhancing their economic potential.
 - **Grants:**
 - Grants-in-aid are **released to various implementing agencies** (Artificial Limbs Manufacturing Corporation of India, National Institutes, Composite Regional Centres, District Disability Rehabilitation Centres, State Handicapped Development Corporations, **Non-governmental Organizations (NGOs)**, etc.) for purchase and distribution of aids and assistive devices.
 - **Assistance:**
 - Aids/appliances **which do not cost more than Rs. 10,000 are covered under the Scheme** for single disability.
 - However, in **some cases the limit would be raised to Rs. 12,000**. In the case of multiple disabilities, the limit will apply to individual items separately in case more than one aid/appliance is required.
 - **Full cost of aid/appliance is provided if the income is up to Rs. 15,000 per month and 50% of the cost of aid/appliance is provided if the income is between Rs. 15,001 to Rs. 20,000 per month.**

Note:



Tuberculosis

Why in News

Centenary celebration is being observed for the **Bacille Calmette-Guérin (BCG)** vaccine, which is presently the **sole vaccine** available for the prevention of **Tuberculosis (TB)**.

Key Points

➤ About:

- TB is **caused by a bacterium called Mycobacterium tuberculosis**, belonging to the Mycobacteriaceae family consisting of about 200 members.
 - Some of Mycobacteria cause diseases like TB and **Leprosy** in humans and others infect a wide range of animals.
- In humans, TB **most commonly affects the lungs** (pulmonary TB), but it can also affect other organs (extra-pulmonary TB).
- TB is a **very ancient disease** and has been documented to have **existed in Egypt as early as 3000 BC**.
- TB is a **treatable and curable disease**.

➤ Transmission:

- TB is **spread from person to person through the air**. When people with lung TB cough, sneeze or spit, they propel the TB germs into the air.

➤ Symptoms:

- Common symptoms of active lung TB are cough with sputum and blood at times, chest pains, weakness, weight loss, fever and night sweats.

➤ Global Impact of TB:

- In 2019, 87% of new TB cases occurred in the 30 high TB burden countries.
- Eight countries accounted for **two thirds of the new TB cases**:
 - India, Indonesia, China, Philippines, Pakistan, Nigeria, Bangladesh and South Africa.
 - **India reported 1.8 million TB cases** between January and December 2020 as compared to 2.4 million the year before.
- In 2019, **MDR-TB remained a public health crisis** and a health security threat.
 - **MultiDrug Resistant Tuberculosis (MDR-TB)** is a strain of TB that cannot be treated with the

two most powerful first-line treatment anti-TB drugs. **Extensively Drug Resistant Tuberculosis (XDR-TB)** is a form of TB caused by bacteria that are resistant to several of the most effective anti-TB drugs.

➤ BCG Vaccine:

- BCG was developed by two Frenchmen, Albert Calmette and Camille Guérin, **by modifying a strain of Mycobacterium bovis** (that causes TB in cattle). It was **first used in humans in 1921**.
- In **India**, BCG was **first introduced in a limited scale in 1948** and became a **part of the National TB Control Programme** in 1962.
- In addition to its primary use as a vaccine against TB, it **protects against respiratory and bacterial infections of the newborns**, and other mycobacterial diseases like **Leprosy and Buruli's ulcer**.
- It is also used as an **immunotherapy agent** in cancer of the urinary bladder and malignant melanoma.
- **One intriguing fact** about BCG is that it works well in some geographic locations and not so well in others. Generally, **the farther a country is from the equator, the higher is the efficiency**.
 - It has a high efficacy in the UK, Norway, Sweden and Denmark; and little or no efficacy in countries on or near the equator like India, Kenya and Malawi, where the burden of TB is higher.

➤ Related Initiatives:

○ Global Efforts:

- The **WHO (World Health Organisation)** has launched a joint initiative **"Find. Treat. All. #EndTB"** with the **Global Fund** and **Stop TB Partnership**.
- WHO also releases the **Global Tuberculosis Report**.

○ India's Efforts:

- **National Strategic Plan (NSP)** for Tuberculosis Elimination (2017-2025), **The Nikshay Ecosystem** (National TB information system), **Nikshay Poshan Yojana (NPY-** financial support), **TB Harega Desh Jeetega Campaign**.
- Currently, two vaccines **VPM (Vaccine Projekt Management) 1002** and **MIP (Mycobacterium Indicus Pranii)** have been developed and identified for TB, and are under **Phase-3 clinical trial**.

Note:



Poshan 2.0

Why in News

Recently, the **Ministry for Women and Child Development** inaugurated **Poshan 2.0** and urged all **Aspirational Districts** to establish a **Poshan Vatika (nutrition garden)** during the **Nutrition Month (Poshan Mah)** from 1st September.

- A month-long celebration of the **POSHAN Abhiyan** mission places special attention on **Severe Acute Malnourished (SAM)** children.

Key Points

➤ About:

- It is an umbrella scheme covering the **Integrated Child Development Services (ICDS)** (Anganwadi Services, Poshan Abhiyan, Scheme For Adolescent Girls, National Creche Scheme).
- It was announced in **Union Budget 2021-22** by merging **supplementary nutrition programmes and the POSHAN Abhiyan**.
- It was launched to strengthen nutritional content, delivery, outreach and outcome, with renewed focus on **developing practices that nurture health, wellness and immunity to disease and malnutrition** in the country.

➤ Poshan Maah:

- Month of September is celebrated as **POSHAN Maah** since 2018 to **improve nutritional outcomes for children, adolescent girls, pregnant women, and lactating mothers**.
- It includes a month-long activities focussed on antenatal care, optimal breastfeeding, **Anaemia**, growth monitoring, girls education, diet, **right age of marriage**, hygiene and sanitation and eating healthy (**Food Fortification**).
- The activities focus on **Social and Behavioural Change Communication (SBCC)** and are based on Jan Andolan Guidelines.
 - SBCC is the strategic use of communication approaches to promote changes in knowledge, attitudes, norms, beliefs and behaviours.

➤ Poshan Vatika:

- It's main objective is **to ensure supply of nutrition through organically home grown vegetables and**

fruits simultaneously ensuring that the soil must also remain healthy.

- Plantation drives for Poshan Vatikas would be taken up by all the stakeholders in the **space available at anganwadis, school premises and gram panchayats**.

➤ POSHAN Abhiyaan:

- Also called National Nutrition Mission, was launched by the government on the occasion of the **International Women's Day** on **8th March, 2018**.
- The Abhiyaan targets to **reduce Stunting, under-nutrition, Anemia** (among young children, women and adolescent girls) and reduce low birth weight by **2%, 2%, 3% and 2% per annum respectively**.
- It also targets to **bring down stunting among children in the age group 0-6 years from 38.4% to 25% by 2022**.

➤ Scenario of Malnutrition in India:

- According to a 2010 **World Bank** report, India suffered an economic loss of Rs 24,000 crore due to lack of toilets. And that the health impact on the economy was 38 million dollars.
- According to an Assocham study of the year 2018, the **GDP (Gross Domestic Product)** suffered a decline of 4% due to malnutrition.
 - The report also found that **children suffering from malnutrition** after growing up **earn 20% less** than those who have had healthy childhoods.
- The number of **SAM children** in the country was earlier **80 lakh**, which has now come down to 10 lakh.

PM Poshan Shakti Nirman Scheme

Why in News

Recently, the Union Cabinet has approved the **Prime Minister POSHAN scheme or PM-POSHAN** for providing **one hot cooked meal in Government and Government-aided schools**.

- The scheme will **replace the existing national programme for mid-day meal in schools or Mid-day Meal Scheme**.
- It has been launched for an **initial period of five years (2021-22 to 2025-26)**.

Mid-day Meal Scheme

- The Mid-day Meal Scheme (**under the Ministry of Education**) is a **centrally sponsored scheme** which was **launched in 1995**.
- It is considered as the **world's largest school meal programme** aimed to attain the goal of universalization of primary education.
- **Provides cooked meals to every child** within the age group of six to fourteen years studying in classes I to VIII who enrolls and attends the school.
- If the Mid-Day Meal is not provided in school on any school day due to non-availability of food grains or any other reason, the State Government shall pay **food security allowance** by 15th of the succeeding month.

Key Points

➤ PM POSHAN:

○ Coverage:

- The scheme will cover 11.8 crore students enrolled in **classes 1 to 8** in over 11.2 lakh schools across the country.
 - **Primary (1-5) and upper primary (6-8) schoolchildren** are currently entitled to 100 grams and 150 grams of food grains per working day each, to ensure a minimum of 700 calories.
- The scheme will be **extended to students studying in pre-primary or Balvatikas** running in government and government aided primary schools.
 - **Balvatika** is the pre-school that was started in government schools last year to include **children aged younger than six years** in the formal education system.

○ Nutritional Gardens:

- The government will **promote nutritional gardens** in schools. The gardens are being provided to **offer additional micro-nutrients to students**.

○ Supplementary Nutrition:

- The new scheme has a provision for **supplementary nutrition for children** in **aspirational districts** and those with high prevalence of **anaemia**.
 - It **does away with the restriction on the part of the Centre** to provide funds only for wheat, rice, pulses and vegetables.

- Currently, if a state decides to add any component like milk or eggs to the menu, the Centre does not bear the additional cost. Now that restriction has been lifted.

○ Tithi Bhojan Concept:

- The concept of **TithiBhojan** will be encouraged extensively.
- TithiBhojan is a **community participation programme** in which people provide special food to children on special occasions/festivals.

○ Direct Benefit Transfer (DBT):

- The central government will ensure **Direct Benefit Transfer (DBT) from states to schools**, which will use it to cover cooking costs.
 - Earlier money was allocated to the states, which then included their share of the money before sending it to a nodal midday meal scheme authority at district and tehsil levels.
- This is to ensure **no leakages at the level of district administration** and other authorities.

○ Nutrition Expert:

- A **nutrition expert is to be appointed in each school** whose responsibility is to ensure that health aspects such as Body Mass Index (BMI), weight and haemoglobin levels are addressed.

○ Social Audit of the Scheme:

- A **social audit of the scheme has also been mandated** for each school in each state to study the implementation of the scheme, which was so far not being done by all states.
- The **Ministry of Education** will also **engage college and university students** to monitor the scheme at a local level.

○ Fund Sharing:

- The **Centre will bear Rs. 54,061 crore** of the total estimated cost of Rs 1.3 lakh crore, with the **states paying Rs 31,733 crore** (Rs 45,000 crore will be released by the Centre as subsidies for food grains).

○ Vocal for Local for Atmanirbhar Bharat:

- Involvement of **Farmers Producer Organizations (FPO)** and **Women Self Help Groups** in implementation of the scheme will be encouraged.
- Use of locally grown traditional food items for a fillip to local economic growth will be encouraged.

Note:



Forest Rights Act

Why in News

Recently, the Jammu and Kashmir government has decided to implement the **Forest Rights Act (FRA), 2006**, which will elevate the socio-economic status of a sizable section of the 14-lakh-strong population of tribals and nomadic communities.

Key Points

➤ About:

- FRA enacted in 2006 **recognises the rights of forest-dwelling tribal communities** and other traditional forest dwellers to forest resources on which these communities **were dependent for a variety of needs, including livelihood, habitation** and other sociocultural needs.
- It recognizes and vest the forest rights and occupation in Forest land in **Forest Dwelling Scheduled Tribes (FDST)** and **Other Traditional Forest Dwellers (OTFD)** who have been residing in such forests for generations.
- It strengthens the **conservation regime of the forests** while ensuring livelihood and food security of the FDST and OTFD.
- The **Gram Sabha** is the authority to initiate the process for **determining the nature and extent of Individual Forest Rights (IFR)** or **Community Forest Rights (CFR)** or both that may be given to FDST and OTFD.

➤ Rights Under the Forest Rights Act:

- **Title rights:**
 - It gives FDST and OTFD the right to ownership to land farmed by tribals or forest dwellers subject to a maximum of 4 hectares.
 - **Ownership is only for land** that is actually being cultivated by the concerned family and no new lands will be granted.
- **Use rights:**
 - The rights of the dwellers extend to extracting **Minor Forest Produce**, grazing areas etc.
- **Relief and development rights:**
 - To rehabilitate **in case of illegal eviction or forced displacement** and to basic amenities, subject to restrictions for forest protection.

○ Forest management rights:

- It includes the right to **protect, regenerate or conserve or manage any community forest resource** which they have been traditionally protecting and conserving for sustainable use.

➤ Significance:

○ Constitutional Provision Expansion:

- It expands the mandate of the **Fifth and the Sixth Schedules** of the Constitution that protect the claims of indigenous communities over tracts of land or forests they inhabit.

○ Security Concerns:

- The alienation of tribes was one of the factors behind the **Naxal Movement**, which affected states like Chhattisgarh, Odisha and Jharkhand.

○ Forest Governance:

- It has the **potential to democratise forest governance** by recognising community forest resource rights.
- It will ensure that **people get to manage their forest on their own**, which will regulate exploitation of forest resources by officials, improve forest governance and better management of tribal rights.

➤ Challenges:

○ Administrative Apathy:

- As tribals are not a big vote bank in most states, **governments find it convenient to subvert FRA** or not bother about it at all in favour of monetary gains.
- The forest **bureaucracy has misinterpreted the FRA as an instrument to regularise encroachment** instead of a welfare measure for tribals.
- Corporates fear they may lose the cheap access to valuable natural resources.

○ Dilution of Act:

- Certain sections of environmentalists raise the concern that **FRA bends more in the favour of individual rights**, giving lesser scope for community rights.

○ Institutional Roadblock:

- Rough maps of community and individual claims are prepared by Gram Sabha which at times often lack technical knowhow and suffers from educational incapacity.

Note:



○ Misuse of FRA:

- The FRA has been misused and communities have rushed to file claims. Politicians across party lines have **interpreted FRA as a land distribution exercise** and have fixed targets for districts.

Quality of Life for Elderly Index

Why in News

Recently, the **Economic Advisory Council to the Prime Minister (EAC-PM)** released the **Quality of Life for Elderly Index**.

- The **share of elders, as a percentage of the total population** in the country, is expected to **increase from around 7.5% in 2001 to almost 12.5% by 2026**, and surpass 19.5% by 2050.
- **EAC-PM** is a **non-constitutional, non-statutory, independent body** constituted to **give advice on economic and related issues to the Government of India**, specifically to the Prime Minister.

Key Points

- **About:**
 - The Index has been created by the **Institute for Competitiveness** at the request of EAC-PM and it **sheds light on an issue often not mentioned-problems faced by the elderly**.
 - **Institute for Competitiveness**, India is an **international initiative centered in India**, dedicated to enlarging and purposeful disseminating of the body of research and knowledge on competition and strategy.
 - It **identifies the regional patterns of ageing across Indian States** and **assesses the overall ageing situation** in India.
 - **Ageing** is a continuous, irreversible, universal process, which starts from conception till the death of an individual.
 - However, the **age at which one's productive contribution declines** and **one tends to be economically dependent** can probably be treated as the onset of the aged stage of life.
 - National Elderly Policy defines people in the **60+ age group as elderly**.
 - It **will promote healthy competition among States**

through fair rankings and highlights the pillars and indicators they can improve.

➤ Pillars & Sub-Pillars of the Index:

○ Four Pillars:

- Financial Well-being, Social Well-being, Health System and Income Security

○ Eight Sub-Pillars:

- Economic Empowerment, Educational Attainment & Employment, Social Status, Physical Security, Basic Health, Psychological Well being, Social Security and Enabling Environment.

➤ Major Findings:

○ State-wise Rankings:

- **Rajasthan** and **Himachal Pradesh** are **top-scoring regions in Aged and Relatively Aged States**, respectively.

- The Aged States refer to States with an elderly population of more than 5 million, whereas Relatively Aged States refer to States with an Elderly population of less than 5 million.

- **Chandigarh** and **Mizoram** are **top-scoring regions in Union Territory and North-East States category**.

○ Pillar-wise Performance:

- The **Health System pillar** observes the **highest national average**, 66.97 at an all-India level, followed by **62.34 in Social Well-being**.
- **Financial Well-being** observes a score of **44.7**, which is lowered by the low performance of 21 States across the Education Attainment & Employment pillar, which showcases scope for improvement.
- States have performed particularly **worse in the Income Security pillar** because **over half of the States have a score below the national average** in Income Security, which is the lowest across all pillars.

➤ Challenges:

○ Feminization of Ageing:

- One of the emerging issues of population ageing is the "Feminization of Ageing", that is many more women than men reaching older ages.

○ Income security:

- India has one of the weakest social security mechanisms globally as it only spends 1% of its **Gross Domestic Product (GDP)** on pensions.

Note:



- **Integration of elderly in Economy:**
 - There is a need to cater to the present older person's unique needs, motivations, and preferences, and to give them a chance to contribute to society until they promote active ageing.
- **Health care and services:**
 - Good health lies at the core of society to ensure healthy ageing. As the life expectancy of older people increases in India, we need to ensure that people, while living longer, live healthier lives, which will translate into more significant opportunities and lower costs to older persons, their families and society.

➤ **Related Initiatives:**

- **SAGE (Seniorcare Aging Growth Engine):** It is a "one-stop access" of elderly care products and services by credible start-ups.
- **Integrated Programme for Older Persons (IPOP):** To improve the quality of life of older persons by providing basic amenities like shelter, food, medical care and entertainment opportunities, etc.
- **Rashtriya Vayoshri Yojana (RVY):** Aids and assistive living devices are provided to senior citizens belonging to Below Poverty Line (BPL) category who suffer from age-related disabilities such as low vision, hearing impairment, loss of teeth and locomotor disabilities.
- **Indira Gandhi National Old Age Pension Scheme (IGNOAPS):** Financial assistance is provided to persons of 60 years and above and belonging to families living BPL as per the criteria prescribed by Government of India. Central assistance of Rs 200 per month is provided to persons in the age group of 60-79 years and Rs 500 per month to persons of 80 years and above.
- **The Pradhan Mantri Vaya Vandana Yojana:** It is a pension scheme for senior citizens that comes with guaranteed returns on monthly, quarterly, half-yearly or on an annual basis for a period of 10 years. It is exclusively available to those who are 60 years of age and above.
- **Vayoshreshtha Samman:** Conferred as a National award, and given to eminent senior citizens & institutions under various categories for their contributions on International day of older persons on 1st october.

- **Maintenance and Welfare of Parents and Senior Citizens (MWPSC) Act, 2007:** To ensure need-based maintenance for Parents and Senior Citizens and their welfare.

➤ **Global Initiatives:**

- **Decade of Healthy Ageing (2020-2030):** The Decade of Healthy Ageing was endorsed by the 73rd World Health Assembly (decision making body of the World Health Organisation) in 2020.
- The **2030 Agenda for Sustainable Development** calls for leaving no one behind and for ensuring that the **Sustainable Development Goals (SDGs)** are met for all segments of society, at all ages, with a particular focus on the most vulnerable—including older persons.

Minority Institutions and RTE: NCPCR Survey

Why in News

Recently, the **National Commission for the Protection of the Rights of the Child (NCPCR)** conducted a **Nationwide Assessment of Minority Schools**. The report was titled "Impact of Exemption under Article 15 (5) with regards to Article 21A of the Constitution of India on Education of Minority Communities".

- The aim was to assess how the **93rd Amendment to Indian Constitution**, which exempts minority institutions from otherwise mandatory provisions of the **Right to Education**, affected children belonging to minority communities.
- The report highlights the disproportionate number of minority institutions or dominance of non-minority category in Minority institutions.

Key Points

➤ **Highlights of the Report:**

- **Minority Schools Catering to the Non-Minorities:** Overall, **62.5% of the students in these schools belonged to non-minority communities.**
 - **Only 8.76%** of the students in minority schools belong to **socially and economically disadvantaged backgrounds.**
- **Disproportionate Numbers:** In West Bengal, **92.47%** of the minority population is of Muslims

and 2.47% are Christians. On the contrary, there are 114 Christian minority schools and only two schools with Muslim minority status.

National Commission for Protection of Child Rights

- NCPCR is a **statutory body** set up in March 2007 under the **Commissions for Protection of Child Rights (CPCR) Act, 2005**.
- It is under the administrative control of the **Ministry of Women & Child Development**.
- The Commission's mandate is to ensure that all laws, policies, programmes, and administrative mechanisms are in **consonance with the child rights perspective** as enshrined in the Constitution of India and also the UN Convention on the Rights of the Child.
- It inquires into complaints relating to a child's right to free and compulsory education under the **Right to Education Act, 2009**.
- It monitors the implementation of **Protection of Children from Sexual Offences (POCSO) Act, 2012**.

- Similarly, in Uttar Pradesh, though the Christian population is less than 1% there are 197 Christian minority schools in the state.
- This disproportion **takes away the core objective of establishing minority educational institutions**.
- **Non-Uniformity in Madarasas:** It found that the **largest number of out-of-school children – at 1.1 crore – belonged to the Muslim community**.
 - According to the report, there are three kinds of madarasas in the country:
 - **Recognised Madarasas:** These are registered and impart both religious as well as secular education;
 - **Unrecognised Madarasas:** These have been found deficient for registration by state governments as secular education is not imparted.
 - **Unmapped Madarasas:** These have never applied for registration.
 - According to the NCPCR, the **Sachar Committee report 2005**, which says 4% of Muslim children (15.3 lakh) attend madarasas, has only taken into account the registered madarasas.
 - Further, the syllabi of madarasas, that have evolved over centuries, **are not uniform, and**

that “being left ignorant of the world around them”.

- Many students develop an inferiority complex, being alienated from the rest of society and unable to adjust with the environment.
- It also says that madarasas do not have any teachers training programmes.

Article 15(5), 30, 21A Linkage

- **Minority Institutions:** Minority institutions have the fundamental right under Article 30 of the Constitution to establish and administer their educational institutions according to their choice.
 - However, they cannot ignore the regulations recommended by the state.
 - Further, the Supreme Court in the **TMA Pai Foundation case, 2002** said that Article 30(1) was neither absolute nor above the law.
 - **Muslims, Sikhs, Christians, Buddhists, Jain and Zoroastrians (Parsis) have been notified as minority communities** under Section 2 (c) of the National Commission for Minorities Act, 1992.
- **Article 15 (5) (93rd Amendment to Indian Constitution):** It empowers the **state to make special provisions for the socially and educationally backward classes** or the Scheduled Castes or the Scheduled Tribes in **educational institutions** including private educational institutions (whether aided or unaided by the state), **except the minority educational institutions**.
- **Right to Education (RTE):** In order to implement Right to Education under **Article 21A**. The Act mandates 25% reservation for disadvantaged sections of the society where disadvantaged groups include:
 - SCs and STs
 - Socially Backward Class
 - Differently abled
- **Using Article 30 to Bypassing RTE:** Minority schools are outside the purview of the RTE Act. Further, in 2014, the Supreme Court in **Pramati judgment** made the whole RTE Act inapplicable to minority schools.
 - The NCPCR survey highlighted that **as many schools and institutions have registered as minority institutions, simply because they don't have to implement RTE**.

Note:



Marburg Virus

Why in News

Recently, West Africa's first case of the extremely contagious and deadly **Marburg virus** was confirmed in Guinea.

- Its first case was first identified just **two months after the country was declared free of Ebola**.
- Both the **Marburg case and this year's Ebola cases** were **detected in Guinea's Gueckedou district**.
- The **first cases of the 2014-2016 Ebola epidemic, the largest in history**, also were from the same region in **Southeastern Guinea's forest region**.



Key Points

- **About:**
 - Marburg virus disease is a highly virulent disease that causes **haemorrhagic fever**, it is **carried by bats with a fatality ratio of up to 88%**.
 - It is in the **same family as the virus that causes Ebola virus disease**.
 - **Two large outbreaks** that occurred simultaneously in **Marburg and Frankfurt in Germany**, and in **Belgrade, Serbia, in 1967**, led to the initial **recognition of the disease**.
 - The outbreak was associated with laboratory work using **African green monkeys (*Cercopithecus aethiops*)** imported from Uganda.
 - Subsequently, outbreaks and sporadic cases have been reported in **Angola, Democratic Republic of the Congo, Kenya, South Africa and Uganda**.

- There have been **12 major Marburg outbreaks since 1967**, mostly in southern and eastern Africa.

➤ Human-Infection:

- Human infection with Marburg virus disease initially results from prolonged exposure to mines or caves inhabited by **Rousettus bat colonies**.

- **Rousettus** is a genus of Old World fruit bats or megabats. They are sometimes referred to as **dog-faced fruit bats, or flying foxes**.

➤ Transmission:

- Once an individual is infected with the virus, **Marburg can spread through human-to-human transmission via direct contact** (through broken skin or mucous membranes) with the blood, secretions, organs or other bodily fluids of infected people, and with surfaces and materials (e.g. bedding, clothing) contaminated with these fluids.

➤ Symptoms:

- **Headache, vomiting blood, muscle pains and bleeding** through various orifices.
- Symptoms become increasingly severe and can include **jaundice**, inflammation of the pancreas, severe weight loss, liver failure, **massive hemorrhaging**, and **multi-organ dysfunction**.

➤ Diagnosis:

- Since many of the disease's symptoms are similar to those of **malaria** and typhoid fever, making a diagnosis is difficult.
- However, **Polymerase Chain Reaction (PCR)** and **Enzyme-Linked Immunosorbent Assay (ELISA)** testing can be used to confirm a case.

➤ Treatment:

- There is no specific treatment or approved vaccine for Marburg hemorrhagic fever. **Supportive hospital therapy** should be utilized.
- Supportive hospital therapy includes balancing the patient's fluids and electrolytes, maintaining oxygen status and blood pressure, replacing lost blood and clotting factors, and treatment for any complicating infections.

Continuation of Scheme for Fast Track Courts

Why in News

Recently, the Union Government **approved the**

Note:



continuation of more than 1000 Fast Track Special Court (FTSCs) as a **Centrally Sponsored Scheme (CSS)** for two years (April 2021-March 2023).

- It includes 389 exclusive **POCSO (Protection of Children from Sexual Offences) Courts**.
- The Central share will be provided from the **Nirbhaya Fund**.

Key Points

- **Background:**
 - Fast track courts (FTCs) were first recommended by the **Eleventh Finance Commission in 2000** "to substantially bring down, if not eliminate, pendency in the district and subordinate courts over the next five years".
 - Following the Finance Commission's report, Rs 502.90 crore was granted by the Centre to create 1,734 additional courts in different states for a period of five years.
 - In 2011, the **central government stopped funding fast-track courts**.
 - The decision was challenged in the Supreme Court (SC) in 2012, but the apex court said it was up to the states to continue or shut down these courts depending on their financial situation.
 - Three states—Maharashtra, Tamil Nadu and Kerala—continued running these courts while **Delhi, West Bengal, Himachal Pradesh and Karnataka** had said they would continue till 2013.
 - Following the December 2012 Gangrape and murder, the Union Government set up a '**Nirbhaya Fund**', amended the **Juvenile Justice Act** and set up **fast-track Mahila Courts**.
 - Some other states such as Uttar Pradesh, Jammu and Kashmir, Bihar etc. also set up FTCs for rape cases thereafter.
- **Scheme for Fast Track Special Courts:**
 - More recently, in 2019, the government approved a **scheme for setting up 1,023 fast-track special courts (FTSCs)** across the country for expeditious disposal of pending rape cases under the Indian penal Code (IPC) and crimes under the POCSO Act.
 - In July 2019, the SC also directed setting up of a centrally funded special court in each district where more than 100 FIRs are registered under the POCSO Act in order to deal exclusively with these cases.

- FTSCs are **dedicated courts expected to ensure swift dispensation of justice**. They have a better clearance rate as compared to the regular courts and hold speedy trials.
- It also strengthens the deterrence framework for sexual offenders.

➤ Performance of Fast Track Courts So Far:

- The Performance has been below par.
- According to **NCRB (National Crime Records Bureau)**, at the end of 2019, rape cases had a pendency rate--pending cases at the end of the year as a percentage of total cases for trial--of 89.5% and the conviction rate of 27.8%.
- For POCSO cases, 88.8% cases were pending at the end of the year, and of those disposed of, 34.9% ended in a conviction.

Samagra Shiksha Scheme 2.0

Why in News

The **Cabinet Committee on Economic Affairs** has approved the **school education programme Samagra Shiksha Scheme 2.0** till the **2025-26 financial year**.

- It has been **upgraded to align** it with the **Sustainable Development Goal for Education** and the **new National Education Policy** launched in 2020.

Key Points

➤ About Samagra Shiksha Scheme:

- It is an **integrated scheme for school education** covering the entire gamut from **pre-school to class XII**.
- It aims to deliver inclusive, equitable, and affordable school education.
- It **subsumes** the three Schemes of **Sarva Shiksha Abhiyan (SSA)**, **Rashtriya Madhyamik Shiksha Abhiyan (RMSA)** and **Teacher Education (TE)**.
- The scheme covers **1.16 million schools**, over 156 million students and 5.7 million Teachers of Govt. and Aided schools (from pre-primary to senior secondary level).
- It is being implemented as a **centrally sponsored scheme**. It involves a 60:40 split in funding between the Centre and most States. It was **launched by the Ministry of Education in 2018**.

Note:



➤ **About Samagra Shiksha Scheme 2.0:**○ **Direct Benefit Transfer (DBT):**

- In order to enhance the direct outreach of the scheme, all **child-centric interventions will be provided directly to the students** through DBT mode on an IT-based platform over a period of time.
- This DBT would include **RTE (Right to Education) entitlements** such as textbooks, uniforms and transport allowance.

○ **On NEP Recommendations:**● **Encouraging Indian languages:**

- It has a **new component** for appointment of **language teachers**, which includes salaries, and training costs as well as bilingual books and teaching learning material as recommended in NEP.

● **Pre-primary Education:**

- It will now include **funding to support pre-primary sections at government schools**, i.e. for teaching and learning materials, indigenous toys and games and play-based activities.
- Master trainers for pre-primary teachers and anganwadi workers will be supported under the scheme.

● **NIPUN Bharat Initiative:**

- Under this initiative, an **annual provision of Rs. 500 per child** for learning materials, Rs. 150 per teacher for manuals and resources and Rs. 10-20 lakh per district will be given **for assessment for foundational literacy and numeracy**.

● **On Digital Initiatives:**

- There is a provision for **ICT labs and smart classrooms**, including support for digital boards, virtual classrooms and DTH channels which have become more important in the wake of the **Covid-19 pandemic**.

● **For out-of-school children:**

- It includes a **provision to support out of school children** from age 16 to 19 with funding of Rs. 2000 per grade to complete their education via open schooling.
- There will also be a **greater focus on skills and vocational education**, both for students in school and dropouts.

Adoption (First Amendment) Regulations, 2021

Why in News

According to a **new clause in the adoption regulations**, **Indian diplomatic missions abroad will now be in charge of safeguarding adopted children whose parents move overseas with the child within two years of adoption.**

- So far, **Indian missions have had a role in inter-country adoption** of Indian children limited to kids adopted by **Non Resident Indians (NRIs), Overseas Citizens of India or foreign parents.**

Key Points

➤ **Adoption (First Amendment) Regulations, 2021:**

- It **amends the Adoption Regulations, 2017.**
- The amendment has been notified in accordance with the relevant sections of the **Juvenile Justice (Care and Protection of Children) Act, 2015 (2 of 2016)** and it amends **Adoption Regulations, 2017.**
 - Recently passed **Juvenile Justice (Care and Protection of Children) Amendment Act, 2021**, seeks to **strengthen and streamline the provisions for protection and adoption of children.**
 - It provides that **instead of the court, the District Magistrate (including Additional District Magistrate) will issue such adoption orders.**
- It has been made by the **Central Adoption Resource Authority** and has been notified by the **Woman and Child Development Ministry.**
 - **CARA** is a statutory body of the Ministry of Women & Child Development. It functions as the nodal body for adoption of Indian children and is **mandated to monitor and regulate in-country and inter-country adoptions.**

➤ **Need:**

- **Some cases came to the attention of the authorities** recently when Indian children were adopted by parents in India and who ended up moving abroad later, hence going out of the purview of Indian authorities and also not falling under purview of Indian Missions abroad.
 - Such children are vulnerable as they can be **neglected, exploited, maltreated or abuse of these children can happen.**

Note:



➤ **Current Responsibility of Indian Missions:**

- The **Indian diplomatic missions** presently send **progress reports of an adopted child on quarterly basis in the first year and on six-monthly basis in the second year**, from the date of arrival of the child in the receiving country.
- The **Missions are also expected to contact the central authority or other authorities** in the receiving countries to ensure safeguards of children of Indian origin adopted by Non-Resident Indian or Overseas Citizens of India or foreign parents.
- In case of **disruption of adoption**, the **foreign missions shall send a report in this regard at the earliest**, and render necessary help and facilitate the repatriation of the child in case required.

➤ **Persons Eligible to Adopt Child under Adoption Regulations, 2017:**

- The **Prospective Adoptive Parents (PAP)** “should be physically, mentally and emotionally stable, financially capable and shall not have any life-threatening medical condition.”
- A **person can adopt irrespective of their marital status** and whether or not he or she has a biological son or daughter.
- A **single female can adopt a child of any gender but a single male shall not be eligible to adopt a girl child**. In the case of a married couple, both spouses should give their consent for adoption.
- “No child shall be given in adoption to a couple unless they have **at least two years of stable marital relationship**”.
- **Couples with three or more children shall not be considered for adoption** “except in case of special need children”, “hard to place children” and in case of “relative adoption and adoption by step-parent”.

Polio

Why in News

Recently, India has decided to vaccinate Afghanistan returnees against **Polio** for free as a preventive measure against the **Wild Polio Virus**.

- **Afghanistan and Pakistan** are the only two countries in the world where polio is still **Endemic**.

Key Points

➤ **About:**

- Polio is a crippling and potentially **deadly viral infectious disease** that affects the nervous system.
- There are three individual and immunologically **distinct wild poliovirus strains**:
 - **Wild Poliovirus type 1 (WPV1)**
 - **Wild Poliovirus type 2 (WPV2)**
 - **Wild Poliovirus type 3 (WPV3)**
- Symptomatically, all three strains are identical, in that **they cause irreversible paralysis or even death**. However, there are **genetic and virological differences, which make these three strains separate viruses** which must each be eradicated individually.

➤ **Spread:**

- The virus is transmitted by **person-to-person mainly through the faecal-oral route** or, less frequently, by a common vehicle (for example, through contaminated water or food).
- It largely **affects children under 5 years of age**. The virus **multiplies in the intestine, from where it can invade the nervous system and can cause paralysis**.

➤ **Symptoms:**

- Most people with polio do not feel sick. Some people have only minor symptoms, such as fever, tiredness, nausea, headache, pain in the arms and legs, etc.
- In rare cases, polio infection **causes permanent loss of muscle function (paralysis)**.
- Polio can be fatal **if the muscles used for breathing are paralysed or if there is an infection of the brain**.

➤ **Prevention and Cure:**

- There is no cure, but it can be prevented through **Immunisation**.

➤ **Vaccines:**

- **Oral Polio Vaccine (OPV)**: It is given orally as a birth dose for institutional deliveries, then primary three doses at 6, 10 and 14 weeks and one booster dose at 16-24 months of age.
- **Injectable Polio Vaccine (IPV)**: It is introduced as an additional dose along with the 3rd dose of **DPT (Diphtheria, Pertussis and Tetanus)** under the **Universal Immunisation Programme (UIP)**.

Note:



➤ **Recent Outbreaks:**

- In 2019, polio outbreaks were recorded in the **Philippines, Malaysia, Ghana, Myanmar, China, Cameroon, Indonesia and Iran**, which were mostly vaccine-derived in which a rare strain of the virus genetically mutated from the strain in the vaccine.
 - According to the **WHO (World Health Organisation)**, if the **oral vaccine-virus** is excreted and allowed to circulate in an unimmunised or under-immunised population for at least 12 months, it can **mutate to cause infections**.

➤ **India & Polio:**

- India received **polio-free certification by the WHO in 2014**, after three years of zero cases.
 - This achievement has been spurred by the successful **Pulse Polio Campaign** in which all children were administered polio drops.
 - The last case due to wild poliovirus in the country was detected on 13th January 2011.

Polio Eradication Measures➤ **Global:**

- **Global Polio Eradication Initiative:**
 - It was launched in 1988 by the **Global Polio Eradication Initiative (GPEI)**, by national governments and WHO. Presently, 80% of the world's population is now living in certified polio-free regions.
 - An estimated 1.5 million childhood deaths have been prevented, through the systemic administration of vitamin A during polio immunization activities.
- **World Polio Day:**
 - It is observed every year on **24th October** in order to call on countries to stay vigilant in their fight against the disease.

➤ **Indian:**

- **Pulse Polio Programme:**
 - It was started with an objective of achieving hundred percent coverage under Oral Polio Vaccine.
- **Intensified Mission Indradhanush 2.0:**
 - It was a nationwide immunisation drive to mark the 25 years of **Pulse polio programme** (2019-20).

○ **Universal Immunization Programme (UIP):**

- It was launched in 1985 with the modification to '**Expanded Programme of Immunization (EPI)**'.
- The **objectives of the Programme** include: Rapidly increasing immunization coverage, Improving the quality of services, Establishing a reliable cold chain system to the health facility level, Introducing a district-wise system for monitoring of performance, Achieving self-sufficiency in vaccine production.

SAMVAD Initiative

Why in News

Recently, the **Ministry of Women and Child Development** has launched the **2nd phase of the SAMVAD programme**. The second phase was **launched on the completion of one year of programme**.

- The programme is **aimed at mental health outreach for children** who are abandoned and orphaned, child survivors of trafficking, or in conflict with law.
- Earlier, the government had announced a special "**PM-CARES for Children**" scheme for all those orphaned due to **Covid-19**.

Key Points

- **Stands for:** **Support, Advocacy & Mental health interventions** for children in **Vulnerable circumstances and Distress (SAMVAD)**.
- **Funded By:** The initiative is funded by the Ministry of Women and Child Development.
- **Implementing Body:** It is led by the **National Institute of Mental Health and Neuro Sciences (NIMHANS)**.
 - The NIMHANS is the apex centre of mental health and neuroscience education. It operates autonomously **under the Ministry of Health and Family Welfare**.
 - Recently, on the request of the Ministry of Home Affairs, NIMHANS, issued a set of **guidelines on the management of mental health issues** of the **prisoners and prison staff**.
- **Purpose:**
 - It is a **national initiative and integrated resource** that works in **child protection, mental health and psychosocial care of children** in difficult circumstances.

Note:



- It encompasses a **specialized training curriculum** on childhood trauma, interventions for children in conflict with the law, forensics in child and adolescent psychiatry and mental health.
- **Education and mental health support** to children with special needs, protection and care in the context of adoption.
- The initiative is providing coping mechanisms for children in distress by **training close to 1 lakh stakeholders** comprising Child Protection Functionaries, tele-counsellors, educators, law professionals among others.
- **Integration with Local Bodies:** The initiative aims to **foster care and integration of child protection and mental health** in the **Panchayati Raj systems** in **aspirational districts** across the country to facilitate awareness generation and improve service delivery at the grassroot level.

Drop in Open Defecation: Wash Report

Why in News

According to a **new report by the Wash Institute** (a global non-profit organisation), **India** was **responsible for the largest drop in open defecation since 2015**, in terms of absolute numbers.

- Universal access to **water, sanitation and hygiene (WASH)** to achieve the **United Nations-mandated Sustainable Development Goal (SDG) 6** was also emphasised.

Key Points

- **Findings of the Report:**
 - **On Open Defecation:**
 - Within India, open defecation had been highly variable regionally since at least 2006 but **by 2016** open defecation had **decreased in all states**, with the largest drops seen in **Himachal Pradesh and Haryana**.
 - Progress in curbing open defecation in **sub-Saharan Africa** was slow.
 - **On SDG 6:**
 - **Between 2016 and 2020**, the **global population** with access to safely managed drinking water at home increased to **74%, from 70%**.

WASH

- WASH is an acronym that stands for the interrelated areas of **Water, Sanitation and Hygiene**.
- The **World Health Organisation (WHO) WASH Strategy 2018-25** has been developed in response to Member State Resolution (WHA 64.4) and the **2030 Agenda for Sustainable Development (SDG 3: Good Health and Well Being, SDG 6: Clean Water And Sanitation)**.
- It is a component of **WHO's 13th General Programme of Work 2019–2023** which aims to contribute to the health of three billion through multisectoral actions like better emergency preparedness and response; and one billion with **Universal Health Coverage (UHC)**.
- It also takes on board the need for progressive realization of the human rights to safe drinking-water and sanitation, adopted by the **UN General Assembly** in July 2010.

- There is an improvement in **at-source water resources** and **onsite sanitation systems**.
 - **At-source water resources** include piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater and packaged or delivered water.
 - **Onsite sanitation system** is a system in which excreta and wastewater are collected, stored and/or treated on the plot where they are generated.
- There was an **increase in safely managed sanitation services to 54%, from 47%** between 2016 and 2020.

Gender Self Identification

Why in News

Recently, the **Spanish government approved a draft bill that would allow anyone over the age of 14 to legally change gender** without a medical diagnosis or hormone therapy.

- **Currently**, for someone to change their gender in official records, the law first **requires two years of hormone therapy and a psychological evaluation**.
- **'Self-Identification'** has been a **long held demand of trans-right groups** around the world, **including in India**, as prejudice against trans people remains rampant.

Note:



Key Points

➤ Gender Self-Identification (Concept):

- A person should be allowed to legally identify with the gender of their choice by simply declaring so, and without facing any medical tests.

○ Arguments in Favour:

- The current processes for declaring one's desired gender are lengthy, expensive and degrading.
- Trans people face daily discrimination and it is vital that steps are taken to tackle discrimination and provide the services and support people need.
- Gender identity is considered to be an inherent part of a person which may or may not need surgical or hormonal treatment or therapy and all persons must be empowered to make their decisions affecting their own bodily integrity and physical autonomy.

○ Arguments Against:

- Gender self-identification goes far beyond respecting people's right to believe what they want; to dress or act or express their identity as they want.
- This is a political and social demand that affects everybody, but in particular women, gay people and transsexuals.
- The medicalization of gender identity has allowed for vital legal recognition and transition-related healthcare for some members of the trans community.

➤ Countries where Self-ID is Legal:

- 15 countries around the world recognise self-ID, including Denmark, Portugal, Norway, Malta, Argentina, Ireland, Luxembourg, Greece, Costa Rica, Mexico (only in Mexico City), Brazil, Colombia, Ecuador and Uruguay.
- In Hungary, a newly adopted law effectively bans all content about homosexuality and gender change from school curriculum and television shows for children under the age of 18.

➤ Rules in India:

- In India, the rights of transgender persons are governed by the Transgender Persons (Protection of Rights) Act, 2019 and the Transgender Persons (Protection of Rights) Rules, 2020.

- Under the Rules, an application to declare gender is to be made to the District Magistrate. Parents can also make an application on behalf of their child.

- There will be no medical or physical examination for procedures for issue of certificate of identity/change of gender.

- In National Legal Services Authority (NALSA) v. Union of India, 2014 case, the Supreme Court declared transgender people to be a 'third gender'.

- The Court interpreted 'dignity' under Article 21 of the Constitution to include diversity in self-expression, which allowed a person to lead a dignified life. It placed one's gender identity within the framework of the fundamental right to dignity under Article 21.

- Further, it noted that the right to equality (Article 14 of the Constitution) and freedom of expression (Article 19(1)(a)) was framed in gender-neutral terms ("all persons").

- In 2018, the SC also decriminalised same-sex relationships (Read down the Provisions of Section 377 of the Indian Penal Code).

Features of Transgender Persons Act, 2019

- **Definition of a Transgender Person:** The Act defines a transgender person as one whose gender does not match the gender assigned at birth. It includes transmen and trans-women, persons with intersex variations, gender-queers, and persons with socio-cultural identities, such as kinnar and hijra.
- **Certificate of Identity:** The Act states that a transgender person shall have the right to self-perceived gender identity.
 - A certificate of identity can be obtained at the District Magistrate's office and a revised certificate is to be obtained if sex is changed.
- The Act has a provision that provides transgender the right of residence with parents and immediate family members.
- The Act prohibits discrimination against a transgender person in various sectors such as education, employment, and healthcare etc.
- Seeks to establish National Council for Transgender persons.
- **Punishment:** It states that the offences against transgender persons will attract imprisonment between six months and two years, in addition to a fine.

Note:



Trafficking in Persons Report

Why in News

According to the **Trafficking in Persons report 2021**, released by the US State Department, the **Covid-19 pandemic** has resulted in an **increase in vulnerability to human trafficking** and **interrupted existing anti-traffic efforts**.

- Human trafficking, also called trafficking in persons, **form of modern-day slavery** involving the illegal transport of individuals by force or deception for the **purpose of labour, sexual exploitation, or activities in which others benefit financially**.

Key Points

- **Findings of the Report:**
 - While India did not meet the minimum standards to eliminate trafficking, the government was **making significant efforts**, although these were inadequate, especially when it came to **bonded labour**.
 - Chinese government engaged in **widespread forced labour**, including through the continued mass arbitrary detention of more than one million **Uyghurs, ethnic Kazakhs, ethnic Kyrgyz, and other Muslims**.
- **Reasons for Increased Trafficking:**
 - The concurrence of the **increased number of individuals at risk, traffickers' ability to capitalise on competing crises**, and the **diversion of resources to pandemic response efforts** has resulted in an ideal environment for human trafficking to flourish and evolve.
- **Categorisation of Countries:**
 - The categorisation is based not on the magnitude of a country's trafficking problem but **on efforts to meet minimum standards** for the elimination of human trafficking.
 - The countries are designated on the **three-tier system**:
 - **Tier 1 countries** are those countries whose governments **fully comply with the Trafficking Victims Protection Act (TVPA - US's law on human trafficking)** minimum standards.
 - USA, UK, Australia, Bahrain and South Korea are some of the countries in tier 1.

- **Tier 2 countries** are those countries whose governments **do not fully comply with TVPA's minimum standards** but are making significant efforts to bring themselves into compliance with those standards.
 - **Tier 2 watchlist countries** are those where the absolute number of victims of severe forms of trafficking is significant or is significantly increasing.
 - **India is placed in Tier 2 category.**
- **Tier 3 countries** whose governments **do not fully comply** with the minimum standards and are not making significant efforts to do so.
 - Afghanistan, Burma, China, Cuba, Eritrea, North Korea, Iran, Russia, South Sudan, Syria and Turkmenistan are under this tier.
- There are also a few **"Special Cases"** such as **Yemen**, where the civil conflict and humanitarian crisis make gaining information difficult.

Child Soldier Recruiter List

Why in News

The **US has added Pakistan and 14 other countries to a Child Soldier Recruiter List** that identifies foreign governments having government-supported armed groups that **recruit or use child soldiers**.

- **Child Soldier** refers to **any person below 18 years of age who has been, recruited or used by an armed force or armed group in any capacity**.
 - It **includes but is not limited to children, boys and girls** who are used as fighters, cooks, porters, spies or for sexual purposes (Paris Principles on the Involvement of Children in Armed Conflict 2007).

Key Points

- **About Child Soldier Recruiter List:**
 - The US Child Soldiers Prevention Act -2008 (CSPA) requires the publication in the annual **Trafficking in Persons (TIP) report** a list of foreign governments that have recruited or used child soldiers.
 - Some of the **countries which have been added to the list** are Pakistan, Turkey, Afghanistan, Myanmar, Iran, Iraq, Nigeria, Yemen etc.
 - The **United Nations (UN)** verified that over 7,000 children had been recruited and used as soldiers in 2019 alone.

- The CSPA prohibits the US government from providing military assistance, including money, military education and training, or direct sales of military equipment, to countries that recruit and use child soldiers.

➤ **Related Global Conventions:**

- The recruitment or use of children below the age of 15 as soldiers is prohibited by both the UN Convention on the Rights of the Child (CRC) and the additional protocols to the Geneva Conventions.
 - The CRC says childhood is separate from adulthood, and lasts until 18; it is a special, protected time, in which children must be allowed to grow, learn, play, develop and flourish with dignity.
 - The Geneva Conventions and their Additional Protocols form the core of international humanitarian law, which regulates the conduct of armed conflict and seeks to limit its effects. They protect people not taking part in hostilities and those who are no longer doing so.
- The Optional Protocol to the CRC on the involvement of children in armed conflict further prohibits kids under the age 18 from being compulsorily recruited into state or non-state armed forces or directly engaging in hostilities.
 - Optional Protocols to human rights treaties are treaties in their own right, and are open to signature, accession or ratification by countries who are party to the main treaty.
- Recruiting Child Soldiers is also considered a war crime under the Rome Statute of the International Criminal Court (ICC).
- Also, the United Nations has identified the recruitment and use of child soldiers as among six "grave violations". Other Five violations are:
 - Killing and maiming of children;
 - Sexual violence against children;
 - Abduction of children;
 - Attacks against schools or hospitals;
 - Denial of humanitarian access for children.

➤ **Indian Scenario:**

- Though not very common in India, child soldiers are seen among non-state forces such as insurgent organizations in the NorthEast region (mainly in Assam, Manipur, Nagaland) and militant factions in the Kashmir region.

- Also, they are hired in maoist affected areas of Andhra Pradesh, Chhattisgarh, Jharkhand, Karnataka, Maharashtra.
- Some global human rights organisations allege Indian security forces of using children as spies and messengers, although the Indian government denies this allegation.
- National Cadet Corps (NCC) which is run by the Ministry of Defence, aims to motivate youth from age 13 to take up a career in the armed forces (Army, Navy and Air Force) and Territorial Army.
 - They can not be equated with the child soldiers.
- Steps Taken by Indian Government:
 - India is party to the Convention on the Rights of the Child (CRC) and acceded to Optional Protocol in November 2005.
 - The Constitution encompasses most rights included in the CRC as Fundamental Rights and Directive Principles of State Policy.
 - Article 39 (f) states that children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and that childhood and youth are protected against exploitation and against moral and material abandonment.
 - The Indian Penal Code criminalises the recruitment or use in hostilities of persons under-18 years by state armed forces or non-state armed groups.
 - Adults of age over 18 years are recruited in the Central Armed Police Forces (CAPF).

World Population Day

Why in News

Recently, Uttar Pradesh (UP) unveiled its New Population Policy 2021-30, on the occasion of World Population Day (11th July).

Key Points

➤ **About:**


- In 1989, the United Nations Development Programme (UNDP) recommended that 11th July be observed by the international community as World Population Day, a day to focus attention on the urgency and importance of population issues.

- UNDP was inspired by the public interest and awareness that was created by “Five Billion Day” on 11th July 1987 when the world’s population reached 5 billion.
- A resolution to the effect was passed, and the day was first marked on 11th July, 1990.
- The **United Nations Population Fund (UNFPA)** was created in 1969, the same year the United Nations General Assembly declared “parents have the exclusive right to determine freely and responsibly the number and spacing of their children.
- **Theme 2021: Rights and Choices are the Answer:** Whether baby boom or bust, the solution to shifting fertility rates lies in prioritising all people’s reproductive health and rights.

➤ U.P.’s New Population Policy:

- The policy **proposes five key targets:** population control; ending curable maternal mortality and illnesses; ending curable infant mortality and ensuring betterment in their nutrition status; betterment of sexual and reproductive health-related information and facilities among the youth; and care of elders.
- The UP government’s law commission has also **prepared a population control bill, under which a two-child norm will be implemented and promoted.**
- As per the draft, **violation of the policy is penalised** with measures such as barring for elections and **abidance is rewarded** with measures such as promotion in jobs, subsidy etc.

Future planning | The Uttar Pradesh Population Policy 2021-2030 was launched to reduce maternal and infant deaths in a time-bound manner. The policy aims to:



<ul style="list-style-type: none"> ▪ Decrease the total fertility rate (number of children per woman) from 2.7 to 2.1 by 2026 and 1.7 by 2030 ▪ Increase modern contraceptive prevalence rate from 31.7% to 45% by 2026 and 52% by 2030 ▪ Increase male methods of contraception use from 10.8% to 15.1% by 2026 	<ul style="list-style-type: none"> ▪ Decrease maternal mortality rate (per 1,00,000 live births) from 197 to 150 by 2026 and 98 by 2030 ▪ Decrease infant mortality rate (per 1,000 live births) from 43 to 32 by 2026 and 22 by 2030 ▪ Decrease under 5 mortality rate (per 1,000 live births) from 47 to 35 by 2016 and 25 by 2030
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Baby steps: Yogi Adityanath encouraging a newly married couple to opt for family planning in Lucknow on Sunday. • PTI

Awareness and extensive programmes would be held among those communities, cadres and geographical areas that have a higher fertility rate

U.P. POPULATION POLICY

We should not forget that the increase in population contributes to poverty in society. Hence, until all sections are made comprehensively aware, there will be a delay in fulfilling various goals

YOGI ADITYANATH, UTTAR PRADESH CM

Population Trends & Issues

➤ India’s Population Related Issues:

- **Large Size:**

- India has just **2% of the world’s landmass and 16% of the global population.**
- It has been reported that **India will soon surpass China’s population** (Country with largest population).

○ Fast Growth:

- Mismatch in birth and death rate resulted in **faster growth of population in the past few decades.**
 - However, **India’s Total Fertility Rate (TFR)** is declining. It is now **2.2 per woman**, nearing the replacement rate of 2.1, according to the latest government data.
 - **TFR** indicates the average number of children expected to be born to a woman during her reproductive span of 15-49 years.

○ Education and Population Growth:

- **Poverty and illiteracy contribute immensely** to the population explosion.
 - Recent data shows that the **overall literacy rate in the country is about 77.7%.**
 - At the all-India level, the **male literacy rate is higher at 84.7% compared to 70.3% among women.**
 - **Children in rural areas are considered as assets**, who will take care of parents at old age, also more children mean more earnings.
 - The level of **female education has a direct impact on fertility**, as it is evidenced that the fertility rate of illiterate women tends to be higher than those who are literate.
 - **Lack of education prevents women from having full knowledge about the use of contraceptives**, of the consequences of frequent childbirth.
- #### ○ Unemployment:
- High youth **unemployment in India is turning demographic dividend into a demographic disaster for India.**
 - This youth potential is often referred to as the ‘demographic dividend’ which means that **if the youth available in the country are equipped with quality education and skills training, then they will not only get suitable employment but can also contribute effectively towards the economic development of the country.**

Note:



Kapu Community Reservation

Why in News

Recently, the **Andhra Pradesh government has announced 10% reservation for the Kapu community and other Economically Weaker Sections (EWS)** for appointments in the initial posts and services in the State government.

- This reservation is extended in accordance with the **Constitution (103rd Amendment) Act, 2019**.

Key Points

- **About Kapu Community:**
 - The Kapus are primarily an **agrarian community based in the Andhra-Telangana region**.
 - It is believed that they **migrated from the Gangetic plains**, probably from Kampilya (near Ayodhya) thousands of years ago.
 - They entered what is present-day Telangana and, after clearing the forests along the **banks of the Godavari, settled down to farming**.
 - The Kapu community is **demanding inclusion in the 'Backward Castes' category** "like they were before independence".
 - The first major protest for the inclusion of the **Kapus in the 'Backward Castes' was held in 1993**.
 - A government order was then issued for their inclusion in 'Backward Castes'. However, it was not honoured.

Other Backward Classes

- Other Backward Classes (OBC) is a collective term used by the Government of India to classify castes which are educationally or socially disadvantaged.
- It is one of several official classifications of the population of India, along with General Class, Scheduled Castes and Scheduled Tribes (SCs and STs).
- The OBCs were found to comprise 52% of the country's population by the Mandal Commission report of 1980, and were determined to be 41% in 2006 when the National Sample Survey Organisation took place.
- **National Commission for Backward Classes** is a constitutional body under Article 338B of the Constitution under the Ministry of Social Justice and Empowerment.

Guidelines for EWS Reservation:

- Persons who are **not covered under the existing scheme of reservations** for SCs, STs and Socially and Educationally Backward Classes and whose **gross annual family income is below Rs 8 lakh** are to be identified as EWS for the benefit of reservation.
- The **income includes income from all sources** i.e. salary, agriculture, business, profession etc. for the financial year prior to the year of application.
- The term **family** for this purpose will include the person who seeks benefit of reservation, his or her parents and siblings below the age of 18 years as also his or her spouse and children below the age of 18 years.

103rd Constitutional Amendment Act:

- It **introduced an economic reservation (10% quota) in jobs and admissions** in education institutes for Economically Weaker Sections (EWS) by amending **Articles 15 and 16**.
 - It inserted Article 15 (6) and Article 16 (6).
- It was enacted to promote the welfare of the poor not covered by the 50% reservation policy for SCs, STs and Socially and Educationally Backward Classes (SEBC).
- It **enables both Centre and the states** to provide reservation to the EWS of society.

Severe Acute Malnutrition in India

Why in News

According to the **Women and Child Development Ministry, more than 9.2 lakh children** (from six months to six years) in India were '**severely acute malnourished**' till **November, 2020**.

- It underscores concerns that the **Covid-19 pandemic** could exacerbate the health and nutrition crisis among the poorest of the poor.

Key Points

➤ About Severe Acute Malnutrition (SAM):

- **WHO's Definition:** The **World Health Organisation (WHO)** defines 'severe acute malnutrition' (SAM) by very **low weight-for-height** or a **mid-upper arm circumference less than 115 mm**, or by the presence of **nutritional oedema**.

- Children suffering from SAM are **nine times more likely to die** in case of diseases due to their weakened immune system.
 - **Nutritional oedema: Abnormal fluid retention in the tissues** (oedema) resulting especially from lack of protein in states of starvation or malnutrition.
 - Oedema can, however, occur in starvation even if the blood levels of albumin are not lowered.
- **Related Findings:**
- **Number of SAM Children (National scenario):** An estimated 9,27,606 'severely acute malnourished' children from six months to six years were identified across the country till November 2020.
 - **States with SAM Children:**
 - The **most in Uttar Pradesh (3,98,359)** followed by **Bihar (2,79,427)**.
 - Uttar Pradesh and Bihar are **also home to the highest number of children** in the country.
 - **Maharashtra (70,665)** > Gujarat (45,749) > Chhattisgarh (37,249) > Odisha (15,595) > Tamil Nadu (12,489) > Jharkhand (12,059) > Andhra Pradesh (11,201) > Telangana (9,045) > Assam (7,218) > Karnataka (6,899) > Kerala (6,188) > Rajasthan (5,732).
 - **States with No Severely Malnourished Children:** Ladakh, Lakshadweep, Nagaland, Manipur and Madhya Pradesh reported no severely malnourished children.

Operation Blue Freedom: Team CLAW

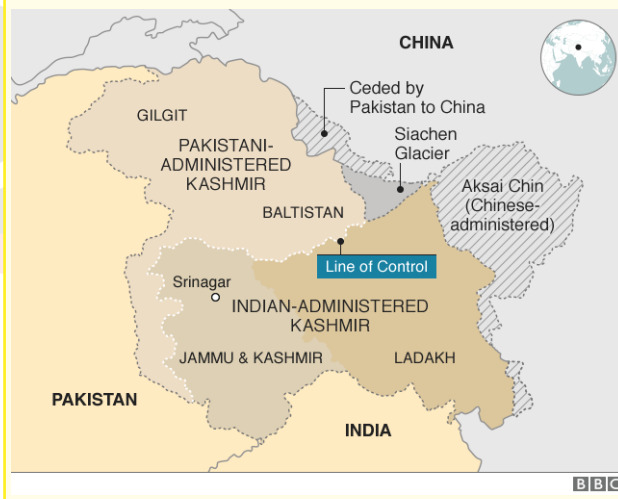
Why in News

Recently, the Government of India has accorded sanction to **Team CLAW** to lead a team of people with disabilities to scale **Siachen Glacier** and create a **new world record for the largest team of people with disabilities**.

- This is the land world record expedition, part of '**Operation Blue Freedom Triple World Records**' being undertaken.
- Triple Elemental World Records is a series of world records being attempted by the team in 2021 of collectives of people with disabilities achieving great feats on land, in air and underwater.

Siachen Glacier

- The Siachen Glacier is located in the **Eastern Karakoram range** in the Himalayas, just northeast of Point NJ9842 where the Line of Control between India and Pakistan ends.
- It is the **Second-Longest glacier** in the World's Non-Polar areas.
 - **Fedchenko Glacier, located in Yazgulem Range, Tajikistan** is the **Longest glacier** in the World's Non-Polar areas.
- The Siachen Glacier lies immediately south of the great drainage divide that separates the Eurasian Plate from the Indian subcontinent in the extensively glaciated portion of the Karakoram sometimes called the "**Third Pole**".
- The Siachen Glacier is part of Ladakh which has now been **converted into a Union Territory**.
- The Siachen Glacier is the world's highest battlefield.
- The entire Siachen Glacier has been under the administration of India since 1984 (**Operation Meghdoot**).



Key Points

- **About the Expedition:**
 - Initially, a team of **20 people with disabilities** would be selected to undergo training, after which the final expedition team shall be selected.
 - Final expedition team (including a minimum of 6 people with disabilities), who will trek from the **Siachen Base Camp to Kumar Post**.
 - Kumar post is located at an altitude of about **15,632 feet**.

Note:



➤ **Team CLAW and Operation Blue Freedom:**

- **Team CLAW:** Team CLAW (Conquer Land Air Water) is a team of ex-Indian Special Forces commandos.
 - Generally, all are either from **Indian Army Para Commandos** or the **Naval Marine Commandos**, also known as the **MARCOS**.
 - These veterans have **multiple specialisations** - not just in combat but also in other elite skills such as **skydiving, scuba diving, mountaineering, emergency medical response** and all-terrain survival amongst others.
 - The initiative was **taken by Major Vivek Jacob**, a Para (Special Forces) officer.
- **Operation Blue Freedom:** Operation Blue Freedom is a **social impact venture** aimed at **rehabilitating people with disabilities through adaptive adventure sports**.
 - It aims to **shatter the common perception of pity, charity and inability** associated with **people with disabilities** and recreate it to **one of dignity, freedom and ability**.
 - Further, their focus is to **'design and implement sustainable large-scale employment solutions'** for people with disabilities, especially in the **'Environment conservation and Sustainability'** space.
 - It was **launched in 2019 by Team CLAW**.
- **CLAW Global:** Team CLAW is in the process of **setting up centres across the globe where-in Special Forces Veterans** and **People with Disabilities** are merging in action for creating a better life experience, for not only persons with disability but the non-disabled as well.

Social Audit of Social Sector Schemes

Why in News

The **Ministry of Social Justice and Empowerment** has formulated a scheme, namely **Information-Monitoring, Evaluation and Social Audit (I-MESA)** in FY 2021-22.

Key Points

➤ **About the I-MESA Scheme:**

- Under this scheme, Social Audits are to be conducted for all the schemes of the Department starting FY 2021-22.

- These social audits are done through **Social Audit Units (SAU)** of the **States** and **National Institute for Rural Development and Panchayati Raj**.

➤ **Important Schemes of the Ministry of Social Justice and Empowerment:**

- **Schemes for Economic Development:**
 - Credit Enhancement Guarantee Scheme for the Scheduled Castes (SCs)
 - **National Safai Karamcharis Finance and Development Corporation (NSKFC)**
 - **National Scheduled Castes Finance and Development Corporation (NSFDC)**
 - Special Central Assistance to Scheduled Caste Sub Plan (SCA to SCSP)
 - Scheme of Assistance to Scheduled Castes Development Corporations (SCDCs)
- **Self Employment:**
 - **Scheme for Rehabilitation of Manual Scavengers (SRMS)**
 - **Venture Capital Fund For Scheduled Castes**
- **Schemes for Social Empowerment:**
 - Centrally Sponsored Scheme for implementation of the **Protection of Civil Rights Act, 1955** and the **Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act, 1989**
 - **Pradhan Mantri Adarsh Gram Yojana (PMAGY)**

Social Audit

➤ **About:**

- **Meaning:** Social Audit is the **audit of a scheme jointly by the Government and the people**, especially by those who are affected by the scheme or its beneficiaries.
- **Benefits:** It is a powerful tool to **promote transparency, accountability and people's participation** in the schemes meant for them.
 - A social audit helps to **narrow gaps between vision/goal and reality**, between **efficiency and effectiveness**.
- **Status:**
 - **Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)** was the **first Act to mandate Social Audit** by the **Gram Sabha** of all the projects taken up in the Gram Panchayat.

Note:



- Most States have set up an independent **Social Audit Unit (SAU)** and some have even begun to facilitate Social Audit in other programmes, including **Pradhan Mantri Awas Yojana, National Social Assistance Programme, Midday Meal Scheme** and **Public Distribution System**.

Kendu Leaf

Why in News

Recently, several children were seen collecting **kendu (Tendu) leaves** in Odisha's Kalahandi district.



Key Points

- **About:**
 - Kendu leaf is called the **green gold of Odisha**. It is a nationalised product like **bamboo** and sal seed. It is one of the **most important non-wood forest products in Odisha**.
 - Botanical name of the Tendu (Kendu) leaf is **Diospyros Melanoxylon**.
 - The leaves are used to **wrap bidis, a popular smoke among the locals**.
- **States Producing Kendu Leaves:**
 - The states producing bidi leaves in India comprises mainly **Madhya Pradesh, Chhattisgarh, Odisha, Andhra Pradesh, Jharkhand, Gujarat and Maharashtra**.
 - **Odisha is the third-largest producer** of kendu leaf, after Madhya Pradesh and Chhattisgarh.
- **UNIQUENESS:**
 - The Uniqueness of Odisha's Tendu (kendu) leaf is **in processed form** whereas the **rest of the states in India produce in Phal Form**.
 - In processed form the Kendu leafs are graded into different qualities that are **Grade I to Grade**

IV as per the specification of **color, texture, size and body condition of the leaf** and packets will be done by taking Five Kilograms as a Bundle.

National Health Mission

Why in News

Recently, the Union Minister of State for Health and Family Welfare informed the **Rajya Sabha** that **National Health Mission (NHM)** supported health system reforms have resulted in development of resilient health systems.

Key Points

- **About:**
 - NHM was launched by the government of India in 2013 subsuming the **National Rural Health Mission** (Launched in 2005) and the **National Urban Health Mission** (Launched in 2013).
 - The main programmatic components include **Health System Strengthening in rural and urban areas** for - **Reproductive-Maternal- Neonatal-Child and Adolescent Health (RMNCH+A)**, and **Communicable and Non-Communicable Diseases**.
 - The NHM envisages achievement of **universal access to equitable, affordable & quality health care services** that are accountable and responsive to people's needs.

National Health Mission	
GOALS	
• Reduce MMR to 1/1000 live births	
• Reduce IMR to 25/1000 live births	
• Reduce TFR to 2.1	
• Prevention and reduction of anemia in women aged 15-49 years	
• Prevent and reduce mortality and morbidity from communicable, non-communicable, injuries and emergency diseases	
• Reduce household out-of-pocket expenditure on total health care expenditure	
• Reduce annual incidence and mortality from Tuberculosis by half	
• Reduce prevalence of Leprosy to <1/10000 population and incidence to zero in all districts	
• Annual Malaria incidence to be <1/1000	
• Less than 1percent microfilaria prevalence in all districts	
• Kala-Azar Elimination by 2015, <1case per 10000 population in all blocks	

Department of Health and Family Welfare, Government of Karnataka

3

Support to States & Union Territories (UT):

- **Health Facilities:**
 - NHM support is provided to States/ UTs for **setting up of new facilities** as per norms and **upgradation of existing facilities** for bridging the

Note:



infrastructure gaps based on the requirement posed by them.

○ Health Services:

- NHM support is also provided for provision of a range of free services related to maternal health, child health, adolescent health, family planning, universal immunisation programme, and for major diseases such as Tuberculosis, vector borne diseases like Malaria, Dengue and Kala Azar, Leprosy etc.

➤ Major Initiatives Supported Under NHM:

- Janani Shishu Suraksha Karyakram (JSSK).
- Rashtriya Bal Swasthya Karyakram (RBSK).
- Implementation of Free Drugs and Free Diagnostics Service Initiatives.
- PM National Dialysis Programme.
- Implementation of National Quality Assurance Framework in all public health facilities.
- Mobile Medical Units (MMUs) & Tele-consultation services are also being implemented to improve access to healthcare particularly in rural areas.
- Ayushman Bharat.
- Pradhan Mantri Jan Arogya Yojana (AB-PMJAY).

Fit for 55 Package: EU

Why in News

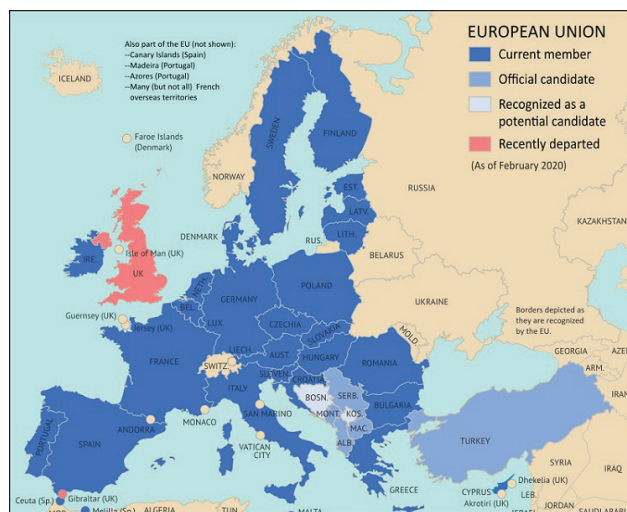
Recently, the European Union (EU) released a new climate proposal, the Fit for 55 package.

- The EU in December 2020 submitted a revised Nationally Determined Contribution (NDC) under the Paris Agreement.

Key Points

➤ Aim:

- The new package attempts to deliver the NDC and carbon neutrality goal through proposed changes that would impact the economy, society and industry, as well as ensure a fair, competitive and green transition by 2030 and beyond.
- Climate neutrality is achieved when a country's emissions are balanced by absorptions and removal of greenhouse gases from the atmosphere. It is also expressed as a state of net-zero emissions.



- It claims to achieve a balance between “regulatory policies” and market-based carbon pricing to avoid the pitfalls of each.

➤ Major Proposals:

○ Renewable Sources:

- It proposes to increase the binding target of renewable sources in the EU's energy mix to 40% (from 32% earlier) and improve energy efficiency by 36% (from 32.5% earlier) by 2030.

○ Vehicular Carbon Emissions:

- It must be cut by 55% by 2030 and by 100% by 2035, which means a phaseout of petrol and diesel vehicles by 2035.
- It also includes some provisions that benefit the auto industry. Public funds will be used to help build charging stations every 60 kilometers, on major highways, a move that will encourage sales of electric cars.
- It will also help finance a network of hydrogen fueling stations.

○ Emissions Trading System:

- It calls for the creation of an Emissions Trading System (ETS) for buildings and road transport, separate from the EU's current ETS, to become operational from 2026.
- ETS are market-based instruments that create incentives to reduce emissions where these are most cost-effective.

○ Social Climate Fund:

- To help low-income citizens and small businesses adjust to the new ETS, the EU proposes the creation of a Social Climate Fund, which will

take various forms ranging from funding for renovation of buildings, and access to low carbon transport, to direct income support.

- They expect to build up this fund using **25% of revenues from the new ETS**. The current ETS is proposed to extend to the maritime sector between 2023 and 2025.
- **Carbon-Border Adjustment Mechanism:**
 - Among other market-based mechanisms, the EU is proposing a carbon-border adjustment mechanism, which will **put a price on imports from places that have carbon-intensive production processes**.
 - This instrument has been deemed to have a small impact on global carbon dioxide emissions by the **United Nations Conference on Trade and Development**, and could instead have negative impacts on developing countries.
- **Enhance Sink Capacity:**
 - It has set a target to **enhance the EU's sink capacity to 310 million tonnes of CO₂ equivalent**, which it hopes will be achieved through specific national targets by member countries.

India's INDC, to be achieved primarily, by 2030

- To **reduce the emissions intensity of the Gross Domestic Product** by about a third.
- A total of **40% of the installed capacity for electricity will be from non-fossil fuel sources**.
- India also promised an **additional carbon sink** (a means to absorb carbon dioxide from the atmosphere) of 2.5 to 3 billion tonnes of carbon dioxide equivalent through **additional forest and tree cover by the year 2030**.

China Relaxes Two Child Policy: Lessons for India

Why in News

Recently, China **relaxed its two child policy** and announced it will now **allow three children per married couple**.

- It also announced that it would **increase the retirement age** by a few months every year. For the past four decades, the **retirement age in China has been 60 for men and 55 for women**.

Key Points

➤ China's Population Policies:

○ One Child Policy:

- China embarked upon its one-child policy in **1980**, when its **government was concerned that the country's growing population**, which at the time was approaching one billion, **would impede economic progress**.
 - **Chinese authorities have long hailed the policy** as a success, claiming that it **helped the country avert severe food and water shortages** by preventing up to 40 crore people from being born.
- It was a **source of discontent**, as the state **used brutal tactics such as forced abortions and sterilisations**.
- It also met criticism and remained controversial for **violating human rights**, and for being **unfair to the poor**.

○ Two Child Policy:

- From **2016**, the Chinese government finally **allowed two children per couple** – a policy change that **did little to arrest the rapid fall in population growth**.

○ Three Child Policy:

- It was announced after **China's 2020 census** data showed that the country's **rate of population growth is falling rapidly despite the 2016 relaxation**.
- The country's **fertility rate has dropped to 1.3**, far below the **replacement level of 2.1** required for a generation to have enough children to replace it.
 - The **United Nations** expects China's **population to begin declining after 2030**, but some experts say this could happen as early as in the next one or two years.

➤ Lessons For India:

○ Avoid Stringent Measures:

- Stringent population control measures have landed China in a human crisis that was inevitable. **If coercive measures like a two-child limit are enforced, India's situation could be worse.**

○ Women Empowerment:

- The proven ways to lower the fertility rate are to **give women the control over their fertility**

Note:



and ensure their greater empowerment through **increased access to education, economic opportunities and healthcare.**

- As a matter of fact, **China's fertility reduction** is only partly attributable to coercive policies, and is **largely because of the sustained investments the country had made in education, health and job opportunities for women.**
- **Need to Stabilize Population:**
- India has done very well with its **family planning measures** and now it is at **replacement level fertility of 2.1**, which is desirable.
- It needs to **sustain population stabilisation** because in **some States** like Sikkim, Andhra Pradesh, Delhi, Kerala and Karnataka, the **total fertility rate is way below replacement level**, which means it can experience in 30-40 years what China is experiencing now.

India's Case

- **India's Population Growth:**
 - India's population is estimated to be over **1.36 billion as of March 2021**, indicating an estimated **12.4% growth over the last decade.**
 - That is **lower than the 17.7% between 2001 and 2011.**
 - However, a 2019 **United Nations** report had projected **India to overtake China as the most populous country by 2027.**
 - India is **expected to add nearly 273 million people between 2019 and 2050.**

Seniorcare Aging Growth Engine Initiative

Why in News

Recently, the **Ministry of Social Justice and Empowerment** virtually launched the **SAGE (Seniorcare Aging Growth Engine)** initiative and **SAGE portal for elderly persons.**

- An amount of **Rs. 100 crore** has been assigned for the **promotion of the silver economy.**

Key Points

Silver Economy

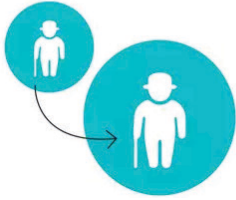
- Silver economy is the system of **production, distribution and consumption of goods and services aimed at using the purchasing potential of older and ageing people** and satisfying their consumption, living and health needs.
- The silver economy is **analyzed in the field of social gerontology** (study of aging) **not as an existing economic system but as an instrument of ageing policy** and the political idea of forming a potential, needs-oriented economic system for an aging population.
- Its **main element is gerontechnology** (Technology pertaining to aged people) as a new scientific, research and implementation paradigm.
- **About:**
 - The **SAGE portal** will be a **"one-stop access" of elderly care products and services by credible start-ups.**
 - It has been launched with a view to **help such persons who are interested in entrepreneurship in the field of providing services for elderly care.**
 - The **SAGE project aims to identify, evaluate, verify, aggregate, and deliver products, solutions and services directly to the stakeholders. The Ministry will act as a facilitator, enabling the elderly to access the products through identified start-ups.**
- **Features:**
 - **Start-ups can apply** for being a part of SAGE through a dedicated portal.
 - The start-ups selected under SAGE will be those which will provide new innovative products and services to elderly persons in **various areas like health, travel, finance, legal, housing, food among others.**
 - An allocation of **Rs. 25 crores** has been made for the SAGE project in the current financial year i.e **2021-22.**
- **Need for the Initiative:**
 - The **share of elders**, as a percentage of the total population in the country, is expected **to increase from around 7.5% in 2001 to almost 12.5% by 2026, and surpass 19.5% by 2050.**

Note:



300M ELDERLY BY 2050

30 years from now, the elderly population in India is expected to triple from **104 million** in 2011 to **300 million** in 2050



Elderly population in **India (134m)** in 2020 is fast reaching the current size of population of **Mexico (130m)** or **Russia (143m)**

The 2050 population of elderly will be close to the population of the US (**326m** in 2018) today

India's **12 million** population of 80+ is equal to the total population of countries such as Belgium, Greece, or Cuba

Overcrowding of Prison

Why in News

The **Supreme Court (SC)** of India has ordered the **interim release of eligible prisoners** in view of the uncontrolled second surge in the raging Covid-19 pandemic.

- The Court's order aims to decongest jails and a measure that **protects the right to life and health of the prisoners**.

Key Points

- **Important Points of Supreme Court Order:**
 - Emphasised the need to adhere to the norms it had laid down in **Arnesh Kumar vs State of Bihar (2014)** case.
 - Under this case, the police were asked not to effect unnecessary arrests, especially in cases that involve jail terms **less than seven years**.
 - Authorities in all districts in the country to give effect to **Section 436A of the Code of Criminal Procedure (Cr.P.C.)**.
 - Under the Section 436A of the Cr.P.C, the undertrials who have **completed half of the maximum prison term** prescribed for the offence may be released on **personal bond**.
 - Suggested the legislature to consider the idea of **placing convicts under house arrest** to avoid overcrowding of prisons.
 - The **occupancy rate in prisons** climbed to 118.5% in 2019. Moreover, a **very large sum of the budget** is used for the maintenance of prisons.
 - Ordered all States to **take preventive steps** as well as **constitute high-powered committees** to

determine the class of prisoners who could be released on bail or parole for a specified period.

➤ Status of Indian Prisons:

- Indian prisons face **three long-standing structural constraints:**
 - Overcrowding,
 - Understaffing and underfunding and
 - Violent clashes.
- The **Prison Statistics India 2016**, published by the **National Crime Records Bureau (NCRB)** in 2019 highlights the plight of prisoners in India.
 - **Under-trial Population:** India's under-trial population remains among the highest in the world and more than half of all undertrials were detained for less than six months in 2016.
 - The report highlights that at the end of 2016, there were 4,33,033 people in prison, of whom **68% were undertrials**.
 - This suggests that the high proportion of undertrials in the overall prison population may be the result of **unnecessary arrests** and **ineffective legal aid** during remand hearings.
 - **People Held Under Preventive Detention:** There is the rise in the number of people held under **administrative (or 'prevention') detention laws** in Jammu and Kashmir.
 - A 300% increase, with 431 detainees in 2016, compared to 90 in 2015.
 - Administrative, or 'preventive', detention is used by authorities to detain persons without charge or trial and circumvent regular criminal justice procedures.
 - **Unawareness about Section 436A of C.R.P.C.:** There is a gap between the number of prisoners eligible to be released and actually released, under Section 436A of the Code of Criminal Procedure.
 - In 2016, out of 1,557 undertrials found eligible for release under Section 436A, only 929 were released.
 - Also, research by Amnesty India has found that prison officials are frequently unaware of this section and unwilling to apply it.
 - **Unnatural Deaths in Prison:** The number of "unnatural" deaths in prisons has doubled between 2015 and 2016, from 115 to 231.

Note:



- The rate of suicide among prisoners also increased by 28%, from 77 suicides in 2015 to 102 in 2016.
- The **National Human Rights Commission (NHRC)** in 2014 had stated that on average, a person is one-and-a-half times more likely to commit suicide in prison than outside. This is a possible indicator of the magnitude of **mental health concerns** within Indian prisons.
- **Lack of Mental Health Professional:** There was only one mental health professional for every 21,650 prisoners in 2016, with only six States and one Union Territory having psychologists/psychiatrists.
- Also, the NCRB had said that about 6,013 individuals with mental illness were in jail in 2016.
- As per the Prison Act, 1894 and Prisoner Act, 1900, there should be a **welfare officer and a law officer** in each jail but recruitment of these officers is still pending. This state explains the low political and budgetary priority which prisons have received during the preceding century.

Recommendation for Prison Reforms

- The Supreme Court appointed **Justice Amitava Roy (retired.) Committee** has given the following recommendations to **reform prisons**.
- **For Overcrowding:**
 - **Speedy Trial:** Speedy trial remains one of the best ways to remedy the unwarranted phenomenon of overcrowding.
 - **Lawyer to Prisoner Ratio:** There should be at least **one lawyer for every 30 prisoners**, which is not the case at present.
 - **Special Courts:** Special fast-track courts should be set up to deal exclusively with petty offences which have been pending for more than five years.
 - Further, accused persons who are charged with petty offences and those granted bail, but who are unable to arrange surety should be released on a **Personal Recognizance (PR) Bond**.
 - **Avoid Adjournment:** An adjournment should not be granted in cases where witnesses are present and the concept of plea bargaining,

in which the accused admits guilt for a lesser sentence, should be promoted.

○ For Prisoners:

- **Accommodative Transition:** Every new prisoner should be allowed a free phone call a day to his family members to see him through his first week in jail.
- **Legal Aid:** Providing effective legal aid to prisoners and taking steps to provide vocational skills and education to prisoners.
- **Use of ICT:** Use of video-conferencing for trial.
- **Alternatives:** The courts may be asked to use their “discretionary powers” and award sentences like “fine and admonition” if possible instead of sending the offenders to jails.
 - Further, courts may be encouraged to release offenders on probation at pre-trial stage or after trial in deserving cases.

○ Filling Vacancies:

- The Supreme Court should pass directions asking authorities to start the recruitment process against permanent vacancies within three months and the process should be completed in a year.
- For Food: Modern cooking facilities and canteens to buy essential items.

- In 2017, the **Law Commission of India** had recommended that undertrials who have completed a third of their maximum sentence for offences attracting up to seven years of imprisonment be released on bail.

Constitutional Provisions

- **State Subject:** ‘Prisons/persons detained therein’ is a **State subject** under **Entry 4 of List II of the Seventh Schedule** to the Constitution of India.
- Administration and management of prisons is the responsibility of respective State Governments.
- However, the **Ministry of Home Affairs** provides regular guidance and advice to States and UTs on various issues concerning prisons and prison inmates.
- **Article 39A:** Article 39A of the Constitution directs the State to ensure that the operation of the legal system promotes justice on a basis of equal opportunity and shall, in particular, **provide free legal aid by suitable legislation or schemes or in any other way**, to ensure that opportunities for securing justice are not denied to any citizen by reason of economic or other disabilities.

Note:



- **Right to free legal aid or free legal service** is an essential fundamental right guaranteed by the Constitution.
- It forms the basis of reasonable, fair and just liberty under **Article 21** of the Constitution of India, which says, “**No person shall be deprived of his life or personal liberty except according to procedure established by law**”.

Key Terms

- **Undertrials:** These are the people who are yet to be found guilty of the crimes they have been accused of.
- **Preventive Detention:** The imprisonment of a person with the aim of preventing them from committing further offences or of maintaining public order.
 - **Article 22 (3) (b)** of the Constitution allows for preventive detention and restriction on personal liberty for reasons of state security and public order.
 - Further, **Article 22 (4)** states that no law providing for preventive detention shall authorise the detention of a person for a longer period than three months unless:
 - An Advisory Board reports sufficient cause for extended detention.
 - Such a person is detained in accordance with the provisions of any law made by the Parliament.
- **Personal Recognizance (PR) Bond:** It is also known as Own Recognizance (OR) bond, and sometimes referred to as “no cost bail”. With this type of bond, a person is released from custody and is not required to post bail.
 - They are, however, responsible for showing up on their specified court date, and must sign a release form stating this promise in writing.
 - The person is then released from custody based on their promise to appear in court and abide by any conditions of release set by the court.

Maratha Reservation Struck Down: SC

Why in News

Recently, the **Supreme Court (SC)** declared a **Maharashtra law** which provides **reservation benefits**

to the **Maratha** community, taking the quota limit in the State in excess of 50%, as unconstitutional.

Key Points

➤ Background:

- **2017:** A 11-member **commission headed by Retired Justice N G Gaikwad** recommended **Marathas should be given reservation** under **Socially and Educationally Backward Class (SEBC)**.
- **2018:** Maharashtra Assembly passed a Bill proposing **16% reservation for Maratha community**.
- **2018:** The Bombay High Court while upholding the reservation pointed out that instead of 16% it should be **reduced to 12% in education and 13% in jobs**.
- **2020:** The SC stayed its implementation and **referred the case to Chief Justice of India for a larger bench**.

➤ Current Ruling:

- **Violation of Fundamental Rights:**
 - A separate reservation for the Maratha community violates **Articles 14 (right to equality) and 21 (due process of law)**.
 - Reservation breaching the 50% limit **will create a society based on “caste rule”**.
 - The Maratha reservation of 12% and 13% (in education and jobs) had **increased the overall reservation ceiling to 64% and 65%, respectively**.
 - In the **Indira Sawhney judgment 1992**, SC had categorically said **50% shall be the rule**, only in certain **exceptional and extraordinary situations** for bringing far-flung and remote areas’ population into mainstream said 50% rule can be relaxed.
- **No Further Benefits:**
 - **Appointments made under the Maratha quota** following the Bombay High Court judgment endorsing the State law **would hold**, but **they would get no further benefits**.
- **Deprived States of the Power to Identify SEBCs:**
 - There will **only be a single list of SEBC with respect to each State and Union Territory notified by the President** of India, and that **States can only make recommendations** for inclusion or exclusion, with any subsequent change to be made only by Parliament.

Note:



- The Bench unanimously **upheld the constitutional validity** of the **102nd Constitution Amendment** but differed on the question whether it affected the power of states to identify SEBCs.
- **Direction to NCBC:**
 - Asked the **National Commission for Backward Classes (NCBC)** to expedite the **recommendation of SEBCs** so that the President can publish the notification containing the list of SEBCs in relation to States and Union Territories expeditiously.

102nd Amendment Act of 2018

- It introduced **Articles 338B and 342A in the Constitution**.
- **Article 338B** deals with the newly established National Commission for Backward Classes.
- **Article 342A** empowers the President to specify the socially and educationally backward communities in a State.
 - It says that it is for the Parliament to include a community in the Central List for socially and backward classes for grant of reservation benefits.

Unique Disability Identification Portal

Why in News

The Ministry of Social Justice & Empowerment has issued a notification making it mandatory for all **States/UTs** to grant **certificate of disability** through online mode only using **UDID (Unique Disability ID)** portal **w.e.f. 01.06.2021**.

Key Points

- **Unique Disability Identification (UDID) Portal:**
 - The project is being implemented with a view of **creating a National Database for persons with disabilities (PwDs)**, and to issue a **Unique Disability Identity Card** to each PwDs.
 - The project will not only **encourage transparency, efficiency and ease of delivering the government benefits** to the person with disabilities, but also **ensure uniformity**.
 - The project will **also help in stream-lining the tracking of physical and financial progress of beneficiaries** at all levels of hierarchy of

implementation – from village level, block level, District level, State level and National level.

➤ **Right of Persons with Disabilities Act 2016:**

- **Right of Persons with Disabilities Act 2016** replaces the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995.
- **Disability has been** defined based on an evolving and dynamic concept.
- It **increases the quantum of reservation** for people suffering from disabilities **from 3% to 4% in government jobs** and from **3% to 5% in higher education institutes**.
- This Act brings our law in line with the **United National Convention on the Rights of Persons with Disabilities (UNCPRD)**, to which India is a signatory.

➤ **Other Programmes/Initiatives for Disableds:**

- **Accessible India Campaign:** Creation of Accessible Environment for PwDs.
- **DeenDayal Disabled Rehabilitation Scheme:** Financial assistance is provided to NGOs for providing various services to Persons with Disabilities.
- **Assistance to Disabled Persons for Purchase / fitting of Aids and Appliances (ADIP):** It aims at helping the disabled persons by bringing suitable, durable, scientifically-manufactured, modern, standard aids and appliances within their reach.
- **National Fellowship for Students with Disabilities:** It aims to increase opportunities to students with disabilities for pursuing higher education.

National Rare Disease Policy 2021

Why in News

Recently, the Ministry of Health and Family Welfare has approved the **National Rare Disease Policy 2021**.

- Earlier, the **Delhi High Court had directed the Centre** to set up a Rare Diseases Committee, a Rare Diseases Fund and to finalise and notify the National Health Policy for Rare Diseases on or before 31st March, 2021.

Key Points

- **Aim:**
 - To increase **focus on indigenous research and local production of medicines**.

- To **lower the cost of treatment** of rare diseases.
- To **screen and detect rare diseases early at early stages**, which will in turn help in their prevention.
- **Major Provisions of the Policy:**
 - **Categorization:**
 - The policy has categorised rare diseases in **three groups**:
 - **Group 1:** Disorders amenable to **one-time curative treatment**.
 - **Group 2:** Those requiring **long term or lifelong treatment**.
 - **Group 3:** Diseases for which **definitive treatment is available** but challenges are to make optimal patient selection for benefit, very high cost and lifelong therapy.
 - **Financial Support:**
 - Those who are suffering from rare diseases listed under Group 1 will have the financial support of up to Rs. 20 lakh under the umbrella scheme of **Rashtriya Arogya Nidhi**.
 - **Rashtriya Arogya Nidhi:** The Scheme provides for **financial assistance to patients, living below poverty line (BPL)** and who are suffering from major life threatening diseases, **to receive medical treatment at any of the super specialty Government hospitals / institutes**.
 - Beneficiaries for such financial assistance would not be limited to BPL families, but extended to about 40% of the population, who are eligible as per norms of **Pradhan Mantri Jan Arogya Yojana**, for their treatment in Government tertiary hospitals only.
 - **Alternate Funding:**
 - This includes **voluntary crowdfunding treatment** by setting up a **digital platform** for voluntary individual contribution and corporate donors to voluntarily contribute to the treatment cost of patients of rare diseases.
 - **Centres of Excellence:**
 - The policy aims to strengthen tertiary health care facilities for prevention and treatment of rare diseases through designating eight health facilities as '**Centres of Excellence**' and these will also be **provided one-time financial support of up to Rs. 5 crore** for upgradation of diagnostics facilities.

○ **National Registry:**

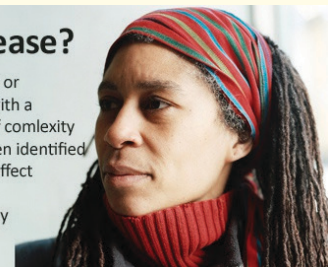
- A national **hospital-based registry of rare diseases will be created** to ensure adequate data and comprehensive definitions of such diseases are **available for those interested in research and development**.

Rare Diseases

- There are **6,000-8,000 classified rare diseases**, but less than 5% have therapies available to treat them.
 - **Example:** **Lysosomal Storage Disorders (LSD)**, Pompe disease, **cystic fibrosis**, muscular dystrophy, spina bifida, **haemophilia** etc.
- About **95% rare diseases have no approved treatment** and less than 1 in 10 patients receive disease-specific treatment.

What is a rare disease?

- Rare Diseases are life-threatening or chronically debilitating diseases with a low prevalence and a high level of complexity
- 6000-8000 rare diseases have been identified
- 80% are of genetic origin & 50% affect children
- No cure exists for the vast majority



- These diseases have differing definitions in various **countries** and range from those that are prevalent in 1 in 10,000 of the population to 6 per 10,000.
- However broadly, a 'rare disease' is **defined as a health condition of low prevalence that affects a small number of people** when compared with other prevalent diseases in the general population. Many cases of **rare diseases may be serious, chronic and life-threatening**.
- India has close to **50-100 million people affected by rare diseases** or disorders, the policy report said almost 80% of these rare condition patients are children and a leading cause for **most of them not reaching adulthood is due to the high morbidity and mortality rates** of these life-threatening diseases.

Anamaya: Tribal Health Collaborative

Why in News

Recently, the **Ministry of Tribal Affairs** has launched

Note:



Tribal Health Collaborative (THC) 'Anamaya' through a video conference.

- In 2018, an expert committee released a **comprehensive report on tribal health** in India which highlighted the issues and concerns of tribal health.

Key Points

- **About:**
 - It is an initiative **bringing together** governments, philanthropists, national and international foundations, **Non-Governmental Organizations (NGOs)**/Community Based Organizations (CBOs) **to end all preventable deaths among the tribal communities of India.**
 - It will **converge efforts of various Government agencies and organisations** to enhance the health and nutrition status of the tribal communities of India.
- **Aim:**
 - To **build a sustainable, high-performing health ecosystem** to address the key health challenges faced by the tribal population of India.
- **Stakeholders:**
 - It is a multi-stakeholder initiative of the **Ministry of Tribal Affairs** supported by **Piramal Foundation** and **Bill and Melinda Gates Foundation (BMGF)**.
 - **Piramal Foundation** is the philanthropic arm of Piramal Group. The foundation undertakes projects under the four broad areas – **healthcare, education, livelihood creation and youth empowerment.**
- **Operation:**
 - It will **begin its operations with 50 tribal, Aspirational Districts** (with more than 20% **Scheduled Tribe** population) across 6 high tribal population states.
 - Over a **10-year period**, the work of the THC will be **extended to 177 tribal Districts** as recognised by the Ministry of Tribal Affairs.

MANAS Mobile App

Why in News

Recently, the government of India launched a

mobile app, **MANAS (Mental Health and Normalcy Augmentation System)** to promote mental wellbeing across age groups.

- MANAS was endorsed as a national program by the **Prime Minister's Science, Technology, and Innovation Advisory Council (PM-STIAC)**.
 - **PM-STIAC:** It is an overarching Council that **facilitates the Principal Scientific Adviser's Office** to **assess the status in specific science and technology domains**, comprehend challenges in hand, formulate specific interventions, develop a futuristic roadmap and advise the Prime Minister accordingly.

Key Points

- **About:**
 - It is a **comprehensive, scalable, and national digital wellbeing platform** and an app developed to augment mental well-being of Indian citizens.
 - It **integrates the health and wellness efforts of various government ministries**, scientifically validated indigenous tools with gamified interfaces developed/researched by various national bodies and research institutions.
 - It is **based on life skills and core psychological processes**, with **universal accessibility**, delivering **age-appropriate methods** and promoting positive attitude focusing on wellness.
- **Developed By:**
 - **National Institute of Mental Health and Neuro Sciences (NIMHANS)** Bengaluru, Armed Forces Medical College (AFMC) Pune and **Centre for Development of Advanced Computing (C-DAC)** Bengaluru.
- **Beneficiaries:**
 - Catering to the overall wellbeing of people of **all age groups**, the **initial version of MANAS** focuses on **promoting positive mental health in the age group of 15-35 years.**
- **Aim:**
 - To build a healthier and happier community, to empower it to nurture its innate potential for building a **Swasth and Atmanirbhar Bharat.**
- **Motto of MANAS:**
 - Uttam Mann, Saksham Jan.

Note:



Mental Health in India

CAUSE FOR CONCERN

13.7% Prevalence of mental illness in India as per National Mental Health Survey (2016)

28% of global suicides occur in India

Access to mental healthcare

49% had a mental health facility within 20km radius

26% reported no mental health facility within 50km radius

59% reported lack of any de-addiction service in their area

Awareness about mental health

57% not aware of any person with mental illness

28% did not consider suicide to be associated with mental illness

Insurance for mental healthcare

80% had no health insurance or thought mental health treatment was not covered



Global Diabetes Compact: WHO

Why in News

The **World Health Organization (WHO)** launched a **Global Diabetes Compact** to better fight the disease while marking the centenary of the discovery of **insulin**.

- The programme was **launched at the Global Diabetes Summit** co-hosted by the Government of Canada.

Key Points

- **Global Diabetes Compact:**
 - The Global Diabetes Compact has the **vision of reducing the risk of diabetes**, and ensuring that all people who are diagnosed with diabetes have **access to equitable, comprehensive, affordable and quality treatment and care**.
 - It will also **support the prevention of type 2 diabetes** from obesity, unhealthy diet and physical inactivity.
 - It will set standards for tackling the diseases in the form of '**global coverage targets**' for ensuring a wider reach of diabetes care.
 - A key aim of the program is to unite key stakeholders from the public and private sectors, and, critically, people who live with diabetes, around a common agenda, to generate new momentum and co-create solutions.
- **Diabetes:**
 - **Diabetes** is a **Non-Communicable Disease (NCD)** that occurs either when the pancreas does not produce enough insulin (a hormone that regulates

blood sugar, or glucose), or when the body cannot effectively use the insulin it produces.

- It is classified into two types:

- **Type 1 Diabetes:** It occurs when the pancreas fails to produce sufficient insulin.
- **Type 2 Diabetes:** Type 2 diabetes is the most common type of diabetes. In this condition the body does not use insulin properly. This is called insulin resistance. The main reason for the occurrence of type 2 diabetes is due to obesity and lack of exercise.

Immunisation Agenda 2030

Why in News

Recently, the **United Nations** and other agencies have launched the **Immunisation Agenda 2030 (IA2030)** during the **World Immunisation Week**.

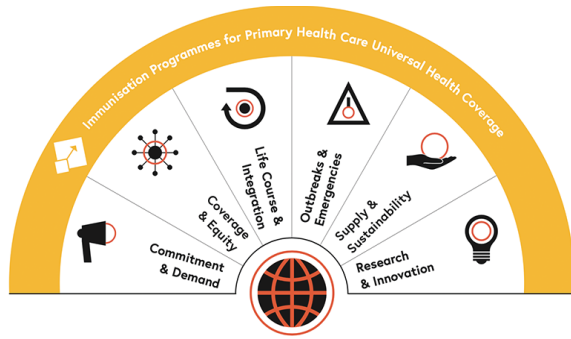
- It will contribute to achieving the **UN-mandated Sustainable Development Goals** specifically **SDG 3 i.e. Good Health and Well being**.
- **Covid-19** pandemic has **affected routine immunization globally**.

Key Points

- **About the Immunisation Agenda 2030 (IA2030):**
 - It sets an ambitious, overarching global vision and **strategy for vaccines and immunization for the decade 2021–2030**.
 - The IA2030 is **based on learnings from Global Vaccine Action Plan (GVAP)**. It aims to **address the unmet targets of the GVAP** that were initially to be fulfilled as part of the global immunisation strategy of the '**Decade of vaccines**' (2011–2020).
 - **GVAP** was developed to help realize the vision of the **Decade of Vaccines**, that all individuals and communities enjoy lives free from vaccine preventable diseases.
 - It is **based on a conceptual framework of seven strategic priorities**, to ensure that immunization fully contributes to stronger **primary health care** and attainment of **universal health coverage**.
 - It is underpinned by **four core principles**: it puts people in the centre, is led by countries, implemented through broad partnerships, and driven by data.

Note:





➤ Targets of IA2030:

- As part of this new immunisation programme, global agencies like the **World Health Organization (WHO)**, **UNICEF** and others have set a target of **avoiding 50 million vaccine-preventable infections in this decade**.
- It also intends to **reduce the number of zero-dose children by 50%**.
 - **Zero-dose children** are those who have received no vaccines through immunisation programmes.
- To achieve **90% coverage for essential vaccines** given in childhood and adolescence.
- To complete **500 national or subnational introductions of new or under-utilized vaccines** - such as those for **Covid-19, rotavirus**, or human papillomavirus (HPV).
- The UN agencies aim to ensure through IA2030 that the **benefits of immunisation are shared equitably among and within countries**.

Pradhan Mantri Swasthya Suraksha Nidhi

Why in News

The Union Cabinet has approved the **Pradhan Mantri Swasthya Suraksha Nidhi (PMSSN)** as a **single non-lapsable reserve fund for share of Health** from the proceeds of Health and Education Cess.

- The proceeds of **Health and Education Cess** are levied under **Section 136-b of Finance Act, 2007**.

Key Points

- **Salient Features of the Pradhan Mantri Swasthya Suraksha Nidhi (PMSSN):**
 - It is a non-lapsable reserve fund for Health in the **Public Account**.

- Proceeds of share of health in the **Health and Education Cess** will be credited into PMSSN.
- Accruals into the PMSSN will be utilized for the flagship schemes of the Ministry of Health & Family Welfare namely,
 - **Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY)**.
 - **Ayushman Bharat - Health and Wellness Centres (AB-HWCs)**.
 - **National Health Mission**.
 - **Pradhan Mantri Swasthya Suraksha Yojana (PMSSY)**.
 - **Emergency & disaster preparedness and responses during health emergencies**.
 - **Any future programme/scheme** that targets to achieve progress towards **Sustainable Development Goals (SDGs)** and the targets set out in the **National Health Policy (NHP) 2017**.
- **Administration and maintenance** of the PMSSN is entrusted to the **Ministry of Health & Family Welfare (MoHFW)**.
 - In any financial year, the expenditure on such schemes of the MoHFW would be initially incurred from the PMSSN and thereafter, from Gross Budgetary Support (GBS).
- **Benefits of PMSSN:**
 - **Enhanced access to universal & affordable health care** through availability of earmarked resources, while ensuring that the amount does not lapse at the end of financial year.
- **Significance of Spending on Healthcare:**
 - **Improved Developmental Outcomes:** From an economic standpoint, better health improves productivity, and reduces losses due to premature death, prolonged disability and early retirement.
 - **Enhance Opportunities:** One extra year of population life expectancy raises GDP per capita by 4%, investment in health creates millions of jobs, largely for women, through a much needed expansion of the health workforce.
- **Health and Education Cess:**
 - In the **Budget speech 2018**, the Finance Minister while announcing Ayushman Bharat Scheme, also announced **replacement of existing 3% Education Cess by 4% Health and Education Cess**.
 - It is collected with the aim of addressing the educational and healthcare needs of rural families in India.

Note:



Revising National Food Security Act, 2013: NITI Aayog

Why in News

NITI Aayog, through a discussion paper, has recommended reducing the rural and urban coverage under the **National Food Security Act (NFSA), 2013**, to 60% and 40%, respectively.

- It has **also proposed a revision of beneficiaries as per the latest population** which is currently being done through Census- 2011.

National Food Security Act (NFSA), 2013

- **Notified on:** 10th September, 2013.
- **Objective:** To provide **for food and nutritional security** in the human life cycle approach, by ensuring access to adequate quantities of quality food at affordable prices to people to live a life with dignity.
- **Coverage:** 75% of the rural population and upto 50% of the urban population for receiving subsidized foodgrains under **Targeted Public Distribution System (TPDS)**.
 - Overall, NFSA caters to **67% of the total population**.
- **Eligibility:**
 - **Priority Households** to be covered under TPDS, according to guidelines by the State government.
 - Households covered under existing **Antyodaya Anna Yojana**.
- **Provisions:**
 - 5 Kgs of foodgrains per person per month at Rs. 3/2/1 per Kg for rice/wheat/coarse grains.
 - The existing AAY household will continue to receive 35 Kgs of foodgrains per household per month.
 - Meal and maternity benefit of not less than Rs. 6,000 to pregnant women and lactating mothers during pregnancy and six months after the child birth.
 - Meals for children upto 14 years of age.
 - Food security allowance to beneficiaries in case of non-supply of entitled foodgrains or meals.
 - Setting up of grievance redressal mechanisms at the district and state level.

Hunter Syndrome: MPS II

Why in News

Two brothers suffering from **Mucopolysaccharidosis II or MPS II (Hunter Syndrome, Attenuated Type)** have approached the Delhi High Court seeking direction to the Centre and AIIMS to provide them free treatment.

- **MPS II is a rare disease** that is passed on in families.

Key Points

- **About:** MPS II mostly **affects boys** and their bodies **cannot break down a kind of sugar that builds bones, skin, tendons and other tissues**.
- **Cause:** It is **caused by changes (mutations) of the IDS gene** that regulates the production of the iduronate 2-sulfatase (I2S) enzyme.
 - This enzyme is **needed to break-down complex sugars**, known as **glycosaminoglycans (GAGs)**, produced in the body.
- **Impact:** Lack of I2S enzyme activity **leads to the accumulation of GAGs within cells**, specifically inside the **lysosomes**.
 - Lysosomes are compartments in the cell that **digest and recycle different types of molecules**.
 - Conditions that cause molecules to build up inside the lysosomes, including MPS II, are called **lysosomal storage disorders**.
 - The accumulation of GAGs increases the size of the lysosomes, which is why **many tissues and organs are enlarged in this disorder**.
- **Symptoms:** It is characterized by **distinctive facial features, a large head, enlargement of the liver and spleen (hepatosplenomegaly)**, hearing loss, etc.
- **Inheritance:**
 - MPS II is inherited in an X-linked recessive pattern, which means that this condition occurs almost exclusively in males. **Females are generally unaffected carriers** of this condition.
 - In a family with more than one affected individual, the mother of the affected males must be a carrier. When a carrier female has a child, there is a 25% (1 in 4) chance that she will have an affected son.



Note:



Key Points

Details

[illegible]

Summary

Key Points

Details

Summary

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