News Analysis (22 Mar, 2021)

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Right to Health

Why in News

Recently, the Chief Minister of Rajasthan announced the implementation of the **Rajasthan Model of Public Health** that would include a **Right to Health** as well as measures for preventive, primary and curative care as envisioned by the **World Health Organisation (WHO).**

Key Points

> **Rajasthan Model of Public Health:**
>> - The **Mukhya Mantri Chiranjeevi Yojana** will also be launched as a **Universal Health Care scheme** as part of measures to reinforce health infrastructure and ensure accessibility to all citizens.
>>> The scheme stipulates cashless health services up to **Rs. 5 lakh to every family in the State.**
>> - The **Indian Institute of Health Management Research (IIHMR)** has recommended **setting of standards** in accordance with the resources available in the State to **match with the rights of patients as well as the service providers.**
>>> The **Indian Public Health Standards (IPHS)** set by the Union government, have also been revised keeping in view the changing protocols of the existing programmes.

Indian Public Health Standards

- **IPHS** are a set of uniform standards envisaged to improve the quality of health care delivery in the country.
- The IPHS documents have been revised keeping in view the changing protocols of the existing programmes and introduction of new programmes especially for Non-Communicable Diseases.
- Flexibility is allowed to suit the diverse needs of the States and regions.

- The IPHS guidelines act as the main driver for continuous improvement in quality and serve as the benchmark for assessing the functional status of health facilities.
- States and UTs adopt these IPHS guidelines for strengthening the Public Health Care Institutions.

- **Right To Health:** The right to health, as with other rights, includes both **freedoms and entitlements:**
  - **Freedoms** include the **right to control one's health and body** (for example, sexual and reproductive rights) and to be free from interference (for example, free from torture and non-consensual medical treatment and experimentation).
  - **Entitlements** include the **right to a system of health protection** that gives everyone an equal opportunity to enjoy the highest attainable level of health.
- **Provisions Related to Right to Health in India:**
  - **International Conventions:** India is a signatory of the **Article 25 of the Universal Declaration of Human Rights (1948)** by the United Nations that grants the **right to a standard of living** adequate for the **health** and well-being to humans including food, clothing, housing and medical care and necessary social services.
  - **Fundamental Rights:** Article 21 of the Constitution of India guarantees a fundamental right to life & personal liberty. The right to health is inherent to a life with dignity.
  - **Directive Principles of State Policy (DPSP): Articles 38, 39, 42, 43, & 47** put the obligation on the state in order to ensure the effective realization of right to health.
  - **Judicial Pronouncements:** Supreme Court in *Paschim Bangal Khet Mazdoor Samity case(1996)* held that in a welfare state, primary duty of the government is to secure the welfare of the people and moreover it is the obligation of the government to provide adequate medical facilities for its people.
    - Also in its landmark judgment in *Parmanand Katara Vs Union Of India(1989)*, Supreme Court had ruled that every doctor whether at a government hospital or otherwise has the professional obligation to extend his services with due expertise for protecting life.
- **Significance of Right to Health for India:**
  - **Right Based Healthcare Services:** The people are entitled to the right to health and it puts a compulsion for the government to take steps toward this.
  - **Wide Access to Health Services:** Enables **everyone to access the services** and ensures that the quality of those services is good enough to **improve the health of the people** who receive them.
  - **Reduce Out of Pocket Expenditure:** Protects people from the **financial consequences** of paying for health services out of their own pockets and reduces the risk of people getting pushed into poverty.

- **Challenges:**
  - **Lack of Primary Healthcare Services:** The existing public primary health care model in the country is limited in scope.
    - Even where there is a well-functioning public primary health centre, only services related to pregnancy care, limited childcare and certain services related to national health programmes are provided.
  - **Inadequate Funding:** Expenditure on public health funding has been consistently low in India **(approximately 1.3% of GDP).**
    - As per OECD, India's total out-of-pocket expenditure is around 2.3 % of GDP.
  - **Sub-optimal Public Health System:** Due to this, it is challenging to tackle **Non-communicable Diseases**, which is all about prevention and early detection.
    - It diminishes preparedness and effective management for new and emerging threats such as pandemic like Covid-19.

Way Forward

- **More Funding:** Public funding on health should be increased to at least 2.5% of GDP as envisaged in the **National Health Policy, 2017.**
- A comprehensive **public health legislation** incorporating the right to health may be passed by the Parliament.
- **Creating a Nodal Health Agency:** There is need to create a designated and autonomous agency to perform the functions of disease surveillance, information gathering on the health impact of policies of key non-health departments, maintenance of national health statistics, enforcement of public health regulations, and dissemination of information to the public.

Source: TH

GRAM UJALA

Why in News

Recently, the Government has launched the **Gram UJALA** Programme - **an ambitious scheme offering the world's cheapest LED bulbs in rural areas at a mere Rs. 10.**

Key Points

- **Coverage:** In its **first phase launched from Arrah in Bihar, 15 million LED bulbs** will be distributed **across villages of 5 districts -** Aarah (Bihar), Varanasi (Uttar Pradesh), Vijayawada (Andhra Pradesh), Nagpur (Maharashtra), and villages in western Gujarat.
    - The light-emitting diode (LED) is one of today's most energy-efficient and rapidly-developing lighting technologies.

- **Implementation:**
  - **7 watt and 12-watt LED bulbs with 3 years warranty** will be given to rural consumers **against submission of working Incandescent bulbs.**
    - Each **household** will get **up to 5 LEDs.**
    - Participating rural households **will also have metres installed in their houses** to account for usage.
  - The **LED bulbs are offered** by state-run **Energy Efficiency Services Ltd's (EESL's) subsidiary Convergence Energy Services Ltd (CESL).**
    > EESL is a Public Sector Undertaking (PSU) under the **Ministry of Power.**
- **Financing Mechanism:**
  - The programme will be financed **entirely through carbon credits** and will be the **first such programme** in India.
  - The **revenue earned from carbon credits** will contribute Rs. 60 per LED bulb piece, with the balance Rs. 10 to be paid by the rural consumer.
    - **Carbon credit (or "carbon offsets")** are certificates generated by projects or activities that reduce, avoid, or destroy greenhouse gases.
    - Project owners, such as solar and wind energy developers, or protectors of endangered forestlands can sell these certificates to an individual or a company to earn revenues to keep expanding their projects into the future.
    - When one purchases carbon offsets, one is funding the reduction or elimination of carbon.
  - Further on, **carbon credit documentation** will be **sent to United Nations (UN) accredited validators** for inclusion into the **Shine Program of activities.**
    - Carbon credits will be prepared under the Shine Program of Activities with an option for verifying under the Voluntary Carbon Standard, depending on the needs of buyers.
    - Carbon Credit Buyers will also be sought through an open process based on initial discussions with the market.

- **Significance:**
  - Help in meeting **intended nationally determined contributions** under **paris climate accord.**
    - If all 300 million lights in India were replaced, the total energy savings would be 40,743 million kWh/year, avoiding peak demand of 22,743MW/year and CO_2 reductions of 37 million tons per year.
  - Through extra carbon credit, India will **boost its position in global carbon trade.**
  - Boost to efforts to **ensure 24-hour power supply.**
    - The Prime Minister of India, in his Independence Day speech of 2015, promised that all villages where electricity was yet to reach, will have power within 1,000 days.
    - To create basic power infrastructure and connectivity, the government had announced a scheme - the **Deendayal Upadhyay Gram Jyoti Yojana.**
  - Help in the **growth of domestic LED markets.**
  - Meet the benefit of **sustainable development goals (SDG).**
    - Specially **SDG7:** To ensure universal access to affordable, reliable and modern energy services.
- **Other Schemes for Encouraging Use of LED Bulbs:**
  - **Unnat Jyoti by Affordable LEDs for All (UJALA).**
  - Street Lighting National Programme (SLNP).

Source:PIB

Global Water Crisis: UNICEF

Why in News

According to a new report released by the **United Nations Children's Fund** (UNICEF), **one in five children** worldwide reside in areas of **high or extremely high water vulnerability.**

The Report was released ahead of **World Water Day (22nd March).**

Key Points

- **About the Report :**
    - The new report is **part of UNICEF's 'Water security for all'** initiative that identifies areas where physical water scarcity risks overlap with poor water service levels.
    - The **initiative aims to mobilise resources, partnerships, innovation and global response to identified hot spots.**
    - UNICEF identified **37 hot-spot countries** where children faced especially distressing circumstances in terms of absolute numbers, where global resources, support and urgent action had to be mobilised.
    - Afghanistan, Burkina Faso, Ethiopia, Haiti, Kenya, Niger, Nigeria, Pakistan, Papua New Guinea, Sudan, Tanzania and Yemen were especially vulnerable.
- **Findings:**
    - **Children in more than 80 countries** live in areas with high or extremely high water vulnerability.
    - **Eastern and Southern Africa** has the **highest proportion** of children living in such areas, with more than half of children – **58%** – facing difficulty accessing sufficient water every day.
    - It is followed by **West and Central Africa (31%), South Asia (25%),** and the **Middle East (23%).**
    - **More than 155 million children in South Asia** lived in areas with high or even extremely high water vulnerability.
- **Water Crisis in India:**
    - India has **4% of the world's freshwater** which has to cater to **17% of the world's population.**
    - As per **NITI Aayog report** released in June 2018, India is facing the worst-ever water crisis in history. Approximately 600 million people or roughly around **45% of the population in India is facing high to severe water stress.**
    - The report says that nearly **40% of the population will have absolutely no access to drinking water by 2030 and 6% of India's GDP will be lost by 2050 due to the water crisis.**
- **Causes of Water Crisis in India:**
    - The Central Groundwater Board's estimates show that the **groundwater table in most parts of the country has been declining every year** because of over-exploitation.
        - If the groundwater continues to decline unabated, meeting the country's agricultural and drinking water requirements will become a big challenge.
        - 85% of rural water supply, 45% of urban water supply and over 64% of irrigation now rely on groundwater.
    - Due to **accumulation of sediments in the water storage area of major and medium irrigation dams** that are currently in use, the **total storage capacity has fallen significantly.**
        - This is clearly underlined in the **report 'Compendium of Silting of Reservoirs in India',** released by the Central Water Commission in 2020.
    - **Climate change** is causing major changes in rainfall levels.

- **Measures Taken by the Central Government:**
    - **"Jal Shakti Abhiyan: Catch the Rain" Campaign:**
        - The campaign will be implemented during the period 22nd March, 2021 to 30th November, 2021 - the **pre-monsoon and monsoon period** in the country.
        - The campaign is **intended to nudge the State and all stakeholders** to create **Rain Water Harvesting Structures (RWHS)** suitable to the climatic conditions and subsoil strata to ensure storage of rainwater.
            > Rains falling in the four/five months of monsoon are the only source of water for most parts of the country.
    - **Jal Jeevan Mission (JJM):**
        - In the Budget 2021-22, **Jal Jeevan Mission (Urban)** has been announced under the Housing and Urban Affairs Ministry to provide universal coverage of water supply to all households through functional taps in all statutory towns in accordance with **Sustainable Development Goal- 6.**
        - It complements the **Jal Jeevan Mission (Rural)** which envisages supply of 55 litres of water per person per day to every rural household through Functional Household Tap Connections (FHTC) by 2024.
    - **Ministry of Jal Shakti:**
        - The Government of India **established the Ministry of Jal Shakti in 2019** to consolidate interrelated functions pertaining to water management.
        - The Ministry **launched Jal Shakti Abhiyan** – a campaign for water conservation and water security.
- **Measures Taken by State Governments:**
    - Uttar Pradesh – Jakhni Village (water village), Bundelkhand
    - Punjab – Pani Bachao Paise Kamao
    - Madhya Pradesh – Kapil Dhara Yojana
    - Gujarat – Sujalam Sufalam Yojana
    - Telangana – Mission Kakatiya Program
    - Maharashtra – Jalyukt Shivar Abhiyan
    - Andhra Pradesh – Neeru Chettu Programme
    - Rajasthan – Mukhya Mantri Jal Swalambhan Abhiyan (MJSA)

World Water Day

- **About:**
    - It is observed annually across the globe on **22nd March,** with the purpose of highlighting the importance of water, and raising awareness about the water crisis that the world faces.
    - According to the **United Nations (UN)** website, the main focus of the day is to support the achievement of **sustainable development goals (SDG) 6:** water and sanitation for all by 2030.

- **History:**
    - The resolution to observe World Water Day was first adopted by the UN General Assembly on **22nd December 1992.**
    - After which **22nd March** was declared as **World Water Day** and is being celebrated around the world since **1993.**
- **Theme of World Water Day 2021:**
        "Valuing Water" - To highlight the value of water in our daily lives.
- A new **World Water Development Report** is released each year on or near World Water Day, to provide decision-makers with tools to formulate and implement sustainable water policies. This report is coordinated by UNESCO's World Water Development Programme (WWAP) on behalf of UN-Water.

UNICEF

- United Nations Children's Fund (UNICEF) is **a special program of the United Nations (UN)** devoted to aiding national efforts to improve the health, nutrition, education, and general welfare of children.
- UNICEF was **created in 1946 as the International Children's Emergency Fund (ICEF)** by the UN relief Rehabilitation Administration to help children affected by World War II.
- UNICEF **became a permanent part of the United Nations in 1953.**
        The name was shortened to the United Nations Children's Fund but it is still referred to as UNICEF.
- UNICEF is **guided by the Convention on the Rights of the Child, 1989.**
        It strives to establish children's rights as enduring ethical principles and international standards of behaviour towards children.
- **Awarded the Nobel Prize for Peace in 1965** for "promotion of brotherhood among the nations".
- **Headquarters:** New York City.
        It works in over 190 countries and territories with 7 regional offices.

Source: DTE

Rising Cases of Diphtheria

Why in News

A recent study has found that Diphtheria, which is a relatively easily-preventable infection, could become a **major global threat.**

Key Points

- **Data:**
  - **Global Rise:** The number of diphtheria cases reported globally has been increasing gradually. In **2018, there were 16,651** reported cases, more than double the yearly average for **1996-2017 (8,105 cases).**
  - **Indian Scenario:** According to the **World Health Organization (WHO),** India reported **2,365 cases in 2015.** However, in 2016, 2017 and 2018, the numbers rose successively to 3,380, 5,293 and 8,788.
    - As per the WHO, **India accounted for 60% of all diphtheria cases globally in 2017.**
    - In 2018, Delhi witnessed the death of more than 50 children because of Diphtheria.
- **Reasons:**
  - **Antimicrobial Resistance (AMR)**: Diphtheria has started to become resistant to several classes of antibiotics.
    Antimicrobial resistance is the resistance acquired by **any microorganism (bacteria, viruses, fungi, parasite, etc.)** against **antimicrobial drugs (such as antibiotics, antifungals, antivirals, antimalarials, and anthelmintics)** that are used to treat infections.
  - **Covid-19 Impact**: Covid-19 has severely impacted vaccination schedules in different parts of the world.
    According to the recently released **UN Report on the Impact of Covid-19 on Children**, suspension of immunization campaigns will set back the decades-long effort to eliminate various diseases.
  - **Misunderstanding of Disease:** Parents often misunderstand the disease as usual cough and cold and take medicines from a physician. Since the child has not been given diphtheria shots, with the passage of time, the toxin released from the bacteria starts hampering the functioning of the kidney, heart and nervous system.
  - **Vaccine Hesitancy**: It refers to delay in acceptance or refusal of vaccines despite availability of vaccine services. It is complex and context specific varying across time, place and vaccine.
    It is influenced by factors such as complacency, convenience and confidence.

Diphtheria

- **Caused by Bacteria:**
  Diphtheria is primarily caused by the **bacterium Corynebacterium diphtheriae.**
- **Symptoms:**
  Common cold, fever, chills, swollen gland in neck, sore throat, bluish skin etc.
- **Impact:**
  - The primary infection is in the **throat and upper airways.** Produces a toxin affecting other organs.
  - One type of diphtheria affects the **throat and sometimes the tonsils.**
  - Another type causes **ulcers on the skin.**

- **Spread:**
  - It is mainly spread by coughs and sneezes, or through close contact with someone infected.
- **Target Population:**
  - Diphtheria particularly affects children **aged 1 to 5 years.**
    - Occurrence of diphtheria cases in under-five children reflects **low coverage** of primary diphtheria vaccination.
- **Fatality Rate:**
  - Diphtheria is fatal in only 5-10% cases.
    - **Fatality Rate** is the proportion of people **who die from a specified disease among all individuals diagnosed with the disease** over a certain period of time.
- **Treatment:**
  - Administering **diphtheria antitoxin** to neutralize the effects of the toxin, as well as antibiotics to kill the bacteria.
  - Diphtheria is preventable with use of **antibiotics and vaccines.**
- **Vaccination:**
  - The diphtheria vaccine is among the oldest vaccines in India's Universal Immunisation Programme. As per data from the **National Family Health Survey-4**, the coverage of **diphtheria vaccine is 78.4%.**
  - In 1978, India launched the **Expanded Programme on Immunisation.**
  - The **first three vaccines** in the programme were **BCG (against TB), DPT (diphtheria, pertussis, tetanus) and cholera.**
  - In 1985, the programme was converted to the **Universal Immunisation Programme (UIP).** DPT continues to be a part of UIP, which now includes 12 vaccines.
  - It is now **incorporated as a pentavalent vaccine** (containing a vaccine against **diphtheria, pertussis, tetanus, Hepatitis B and Haemophilus influenzae type B).**
    - It is also included among the combination of **eight vaccine doses** which are administered in the first year of life under the **full immunisation programme.**
  - 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.

Source: DTE

General Lachit Borphukan of Ahom Kingdom

Why in News

Recently, the Prime Minister called 17th century **Ahom general Lachit Borphukan** a symbol of India's **"Atma Nirbhar military might".**

Key Points

- **Lachit Borphukan:**
  - Born on 24th November, 1622, Borphukan was known for his leadership in the **Battle of Saraighat**, 1671 in which an attempt by Mughal forces to capture Assam was thwarted.
  - He was the inspiration behind **strengthening India's naval force** and revitalising **inland water transport** and creating infrastructure associated with it due to his great naval strategies.
  - **The Lachit Borphukan gold medal** is awarded to the best cadet from the **National Defence Academy.**
    - The **medal was instituted in 1999** to inspire defence personnel to emulate Borphukan's heroism and sacrifices.
  - He died on 25th April, 1672.

- **Ahom Kingdom:**
  - **Founder:**
    - **Chaolung Sukapha** was a 13th century ruler who founded the Ahom kingdom that ruled Assam for six centuries. The Ahoms ruled the land till the province was annexed to British India in 1826 with the signing of the **Treaty of Yandaboo.**
  - **Political Setup:**
    - Ahoms created a new state by suppressing the older political system of the **bhuiyans (landlords).**
    - The Ahom state depended upon **forced labour.** Those forced to work for the state were called **paiks.**
  - **Society:**
    - Ahom society was divided into **clans or khels**. A khel often controlled several villages.
    - Ahoms worshipped their own tribal gods, yet they accepted **the Hindu religion and the Assamese language.**
      - However, the Ahom kings did not completely give up their traditional beliefs after adopting Hinduism.
    - Intermarriage with local also increased assimilation processes of Ahoms in Assamese culture.
  - **Art and Culture:**
    - Poets and scholars were **given land grants** and theatre was encouraged.
    - Important works of Sanskrit were translated into the local language.
    - Historical works, known as **buranjis**, were also written, **first in the Ahom language and then in Assamese.**
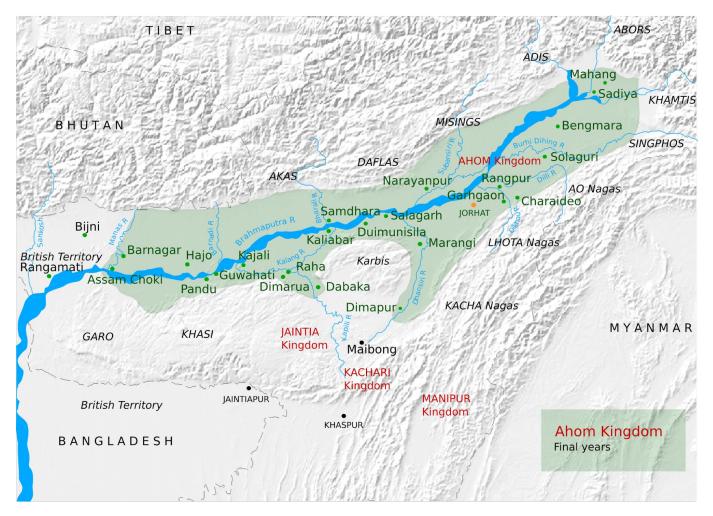
- **Military Strategy:**
  - The Ahom king was the supreme **commander of the state as well as the Military.** The Ahom king himself led the state forces in the time of wars. The Paiks were the main army of the state.
    - There were two types of Paiks i.e. **serving and nonserving.** The **nonserving Paiks** constituted **a standing militia** which could be mobilized at a short notice by the **kheldar** (an expert military organizer).
  - The full contingent of the Ahom Army consisted of **infantry, navy, artillery, elephantry, cavalry and spies.** The main war weapons consisted of bows and arrows, swords, Javelins discus, guns, match-locks and cannons.
  - The Ahoms **sent spies to the enemy's camp** to study the strength and the war strategies of the enemies before leading an expedition.
  - The Ahom soldiers were experts in **guerilla fighting.** Sometimes they allowed the enemies to enter the country, then cut off their communications and attack them in front and rear
  - **Few important forts:** Chamdhara, Saraighat, Simlagarh, Kaliabar, Kajali and Pandu.
  - They also learnt the technique of **constructing boatbridges** in the Brahmaputra.
  - Above all, the mutual understanding among the **civil and military wings, unity among the nobles** always worked as **strong weapons of the Ahoms.**

Battle of Saraighat

- The battle of Saraighat was fought on the banks of the **Brahmaputra** in Guwahati in 1671.
- It is considered as one of the **greatest naval battles on a river** which resulted in the victory of Ahoms over the Mughals.

Haridwar Kumbh Mela

Why in News

The Centre has written to the Uttarakhand government about the need for stringent measures to control the spread of Covid-19 during the ongoing Kumbh Mela in the state (at Haridwar).

Key Points

- Kumbh Mela comes under **UNESCO's Representative List of Intangible Cultural Heritage of Humanity.**
    - Kumbh Mela is the **largest peaceful congregation of pilgrims** on earth, during which participants bathe or take a dip in a sacred river.

- It takes place on the banks of the **Godavari river in Nashik,** the **Shipra river in Ujjain,** the **Ganges in Haridwar**, and the **confluence of the Ganges, Yamuna, and the mythical Saraswati river in Prayag.** The confluence is referred to as the **'Sangam'.**
  - As it is held in four different cities in India, it involves different social and cultural activities, making this **a culturally diverse festival.**
- While technically, it is **to be held in each of the aforementioned locations once every 12 years, sometimes,** the mela **can happen only a year apart at the sites.**
- It should also be known that in between, around the sixth year, the **Ardh Kumbh Mela (also known as the half mela)** is held. In addition to that, in Allahabad, every year the Maagh Mela is celebrated in the month of Maagh (mid-January to February, as per the Hindu calendar) at the Sangam.
  - This Maagh Mela is also referred to as the Ardh Kumbh Mela and Kumbh Mela when it happens in the sixth and twelfth years, respectively.
- **Kumbh Mela in Haridwar is being held after 11 years** — not the usual 12 — because of specific auspicious dates. In fact, this is the first time in 80 years that such a phenomenon has happened.
- The event encapsulates the science of astronomy, astrology, spirituality, ritualistic traditions, and social and cultural customs and practices, making it extremely rich in knowledge.
- The teacher-student relationship of the sadhus in the ashrams and akhadas remains the most important method of imparting and safeguarding knowledge and skills relating to Kumbh Mela.

UNESCO List of Intangible Cultural Heritage of Humanity

- This coveted list is made up of those intangible heritage elements that help demonstrate diversity of cultural heritage and raise awareness about its importance.
- The list was established in 2008 when the Convention for Safeguarding of the Intangible Cultural Heritage came into effect.
- **Intangible Cultural Heritage of India, recognized by UNESCO:**

13 ICH traditions recognised by UNESCO

1.	Tradition of Vedic chanting, 2008	8.	Buddhist chanting of Ladakh: recitation of sacred Buddhist texts in the trans-Himalayan Ladakh region, Jammu and Kashmir, India, 2012
2.	Ramlila, the traditional performance of the Ramayana, 2008	9.	Sankirtana, ritual singing, drumming and dancing of Manipur, 2013
3.	Kutiyattam, Sanskrit theatre, 2008	10.	Traditional brass and copper craft of utensil making among the Thatheras of Jandiala Guru, Punjab, India ,2014
4.	Ramman, religious festival and ritual theatre of the Garhwal Himalayas, India, 2009	11.	Yoga, 2016
5.	Mudiyettu, ritual theatre and dance drama of Kerala, 2010	12.	Nowruz, 2016
6.	Kalbelia folk songs and dances of Rajasthan, 2010	13.	Kumbh Mela, 2017
7.	Chhau dance, 2010		

Source TH