



Rajasthan's Land Aggregation Law | Rajasthan | 12 Oct 2024

Why in News?

Recently, Rajasthan has announced its plan to become the **first state** in India to introduce a land aggregation law aimed at assisting industries and benefiting farmers.

Key Points

- **Land Aggregation Bill:** Rajasthan is set to introduce a Bill in the State Assembly, which will establish a legal mechanism for land aggregation. The law is expected to facilitate industries and help farmers.
- **Focus on Global Investment:** The announcement comes ahead of the **'Rising Rajasthan' Global Investment Summit, scheduled for December 2024.**
 - The state government has already signed over **Rs.12.50 lakh crore worth** of MoUs during roadshows in Mumbai and Delhi.
- **Policy Details:** The proposed legislation aims to aggregate private land from willing owners, develop it, and return **25% of the developed land to the original owners.** This compensation can be used by landowners for personal use or to lease or sell for better returns.
- **Farmer Partnership in Development:** The policy ensures that farmers become partners in development, benefiting from both the developed land and the increased value of the remaining land, leading to higher income.
- **Land Usage and Timeframe:** Private land will be used **for [industrial parks](#), [public infrastructure](#), and related development.** The aggregated land must be utilized within five years, or it will revert to the **Land Aggregation Authority.**
- **Land Aggregation Authority:** A new "Land Aggregation and Development Authority" will be formed to manage the aggregation and development of land. An Appellate Authority will also be created to address grievances efficiently, avoiding court proceedings.
- **Regional Benefits:** Specific regions like **Banswara, a [tribal area bordering Gujarat](#), and areas along the [Delhi-Mumbai Industrial Corridor and Expressway](#)** are expected to benefit significantly from this legislation.

Congo Fever Outbreak in Rajasthan | Rajasthan | 12 Oct 2024

Why in News?

Recently, Rajasthan has reported a case of [Congo fever](#), leading to the death of a 51-year-old woman in Jodhpur.

- The state government has issued guidelines to prevent further spread of the disease, and health teams are actively tracing symptomatic individuals.

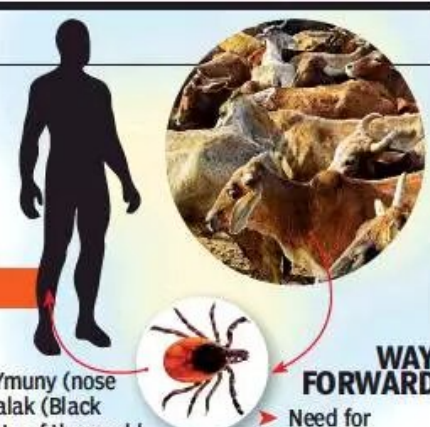
Key Points

- **Congo Fever:** Congo fever, also known as [Crimean-Congo Hemorrhagic Fever \(CCHF\)](#), is a viral disease transmitted to humans primarily through **tick bites or contact with infected animals**.
 - It can also spread through direct contact with bodily fluids of an infected person.
- **Symptoms:** The onset is sudden and includes high fever, muscle ache, dizziness, neck pain, and photophobia.
 - Severe cases can lead to hemorrhaging, liver failure, and even death.
- **Government Response:** The state has directed hospitals to improve vigilance, isolate potential cases, and conduct awareness campaigns about the disease.

THE DEADLY VIRUS

Crimean-Congo Haemorrhagic Fever (CCHF) virus is considered as biosafety level 4 pathogen with up to **50%** fatality rate. In case of nosocomial infection, mortality rate may go up to **80%**

It produces little or no disease in its natural hosts (animals) but causes severe infection in humans



FROM THE PAST

It was first described in the Crimea in 1944 and was found to be responsible for an illness in a human in Congo in 1956

The disease is also known as Khungribta (blood taking), KhumYmuny (nose bleeding) and Karakhalak (Black Death) in different parts of the world

SYMPTOMS

Headache, high fever, back, joint & stomach pain, and vomiting
Rarer signs include jaundice, severe bruising and uncontrolled bleeding

INFECTIONS IN HUMANS

The regular mode of infection in humans are tick bites, nosocomial (originating in hospital) infection, crushing of infected ticks, direct contact with CCHF virus infected blood or tissue as during slaughtering infected animals


WAY FORWARD

Need for awareness programmes for people living in close proximity to livestock, people working in slaughterhouses, those handling animal carcasses for livelihood and health workers

- Training for those working in primary healthcare centres, rural and district hospitals on biosafety issues, including isolation
- Better surveillance

TREATMENT

There are limited treatment options for CCHF. Ribavirin is the only known drug that is effective against it



RISK GROUP

Shepherds, campers, agricultural workers, veterinarians, abattoir workers, and other persons in close contact with livestock and ticks are at risk of infection

