

Launch of National Biopharma Mission

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Industry-Academia Collaborative for Accelerating Discovery Research to

Early Development for Biopharmaceuticals

Curtain Raiser

Innovate in India (i3)

The first ever Industry-Academia mission to accelerate biopharmaceutical development in India will be formally launched by the Cabinet Minister for Science and Technology, Earth Sciences, Environment, Forests and Climate Change, Dr. Harsh Vardhan in New Delhi on 30th June 2017. The program named *Innovate in India (i3)* will witness an investment of USD 250 million with USD 125 million as a loan from world Bank and is anticipated to be a game changer for the Indian Biopharmaceutical industry. It aspires to create an enabling ecosystem to promote entrepreneurship and indigenous manufacturing in the sector.

India has been an active player in the pharmaceutical industry and has contributed globally towards making life saving drugs and low cost pharmaceutical products accessible and affordable for those in need. Be it the Rotavirus vaccine, heart valve prosthesis or affordable insulin, India has been a forerunner in these and many more. Despite, these advances Indian biopharmaceutical industry is still 10-15 years behind their counterparts in the developed countries and faces stiff competition from China, Korea and others. The lacuna primarily exists due to disconnected centers of excellence, less focus on translational research and staggered funding. There was an immediate need felt to focus on consolidated efforts to promote product discovery, translational research and early stage manufacturing in the country to ensure inclusive innovation.

i3 is committed to addressing these gaps with a Mission to make India a hub for design and development of novel, affordable and effective biopharmaceutical products and solutions. The aim of the Mission is to *“Enable and nurture an ecosystem for preparing India’s technological and product development capabilities in biopharmaceuticals to a level that will be globally competitive over the next decade, and transform the health standards of India’s population through affordable product development”*

As a flagship program of the Government of India in collaboration with World Bank, it promises to boost the growth curve for domestic biopharma in India by accelerating the translation of research concepts into viable products, supporting clinical validation, enabling sustainable networks for collaboration between industry and academia, and supporting entrepreneurial ecosystem amongst many others. Currently India has only 2.8% share in the global biopharmaceutical market, the program would elevate this to 5% resulting in an additional business opportunity of 16 Billion USD.

The Mission will provide a holistic and integrated approach to strengthen and support the entire product development value chain for accelerating the research leads to product development. This will help not only in immediate product development addressing public health needs, but will also help to create an ecosystem which will facilitate development of a continuous pipeline of products.

The Mission to be implemented by Biotechnology Industry Research Assistance Council (BIRAC), a Public Sector Undertaking of Department of Biotechnology will bring together expertise from national and international corridors to provide strategic guidance and direction to move promising solutions through the product development value chain. The program thereby stands unique in its approach as it becomes a cradle to innovate, co-create and co-facilitate scientific discoveries and offers young entrepreneurs an avenue to engage with the best in the industry.

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SC allows woman to abort 26-week foetus due to abnormalities

New Delhi: The Supreme Court on Monday permitted a woman, who is in her 26th week of pregnancy, to abort her foetus that is suffering from severe cardiac ailments. A bench of justice Dipak Misra and M. Khanwilkar said the procedure of termination of pregnancy should be carried out “forthwith” at the SSKM Hospital in Kolkata.

The direction came after the bench perused the report of the medical board and the SSKM Hospital, which advised the termination of pregnancy on the grounds that the mother would suffer “severe mental injury” if the pregnancy is continued and the child, if born alive, has to undergo multiple surgeries for severe cardiac ailments.

“Keeping in view the report of the medical board, we are inclined to allow the prayer and direct medical termination of pregnancy of petitioner no. 1 (woman),” the bench said.

The woman and her husband had approached the apex court seeking permission to abort her foetus on grounds of abnormalities which could be even fatal to her. They have also challenged the constitutional validity of section 3(2)(b) of the Medical Termination of Pregnancy (MTP) Act which prohibits abortion of a foetus after 20 weeks of pregnancy.

The apex court had earlier took on record the report of a seven-member medical board set up by the West Bengal government on its direction and asked the woman to examine the report on her health and apprise it of her stand.

The court, on 23 June, had ordered setting up of the medical board of seven doctors of the SSKM Hospital to ascertain certain aspects relating to the health of the woman and her 24-week foetus and submit a report.

The couple, in the plea, had attached a report suggesting that the foetus suffered from serious abnormalities, including cardiac issues. This report had said if the birth was allowed, the baby may not survive even the first surgery and, moreover, the foetus could be fatal to the mother as well.

The court had on 21 June sought responses from the Centre and West Bengal government on the plea. The petition has said that the woman had suffered immense mental and physical anguish after coming to know of the abnormalities on the 21st week of her pregnancy.

“This petition challenges the constitutional validity of section 3(2)(b) of the Medical Termination of Pregnancy Act, 1971 (MTP) restricted to the ceiling of 20 weeks stipulated therein. “This challenge is to the effect that the 20 week stipulation for a woman to avail of abortion services under section 3(2)(b) may have been reasonable when the section was enacted in 1971 but has ceased to be reasonable today where technology has advanced and it is perfectly safe for a woman to abort even up to the 26th week and thereafter,” it said.

The plea has said the determination of foetal abnormality in many cases can only be done after the 20th week and, by keeping the ceiling artificially low, women who obtain report of serious foetal abnormalities after the 20th week have to suffer excruciating pain and agony because of the deliveries they are forced to go through.

“The ceiling of 20 weeks is therefore arbitrary, harsh, discriminatory and violative of Articles 14 and 21 of the Constitution of India,” it has said. The petition has claimed that during the examination of the foetus on May 25, the abnormalities were detected including, a combination of four impairments in the heart.

“It was during a foetal echocardiography conducted on the petitioner on 25 May, that it was first suspected that the foetus suffered from Tetralogy of Fallot, a combination of four impairments in the heart. Further, a subsequent foetal echocardiography done on May 30, confirmed the same.

“However, petitioner had crossed the 20 weeks mark and medical termination of pregnancy under the MTP Act restricts medical termination of pregnancy beyond 20 weeks,” her plea had said, adding that the denial of her right to an abortion had caused her “extreme anguish” and “forced her to continue her pregnancy while being aware that the foetus may not survive”.

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Drug-resistant TB higher among children than expected: report

While detection of tuberculosis (TB) in children remains a challenge, it has now emerged that Multi-Drug Resistant (MDR) TB is higher among children than expected. This has been described as a “worrying trend” by the Union Health Ministry.

As many as 5,500 of over 76,000 children tested in nine cities have been diagnosed with TB. Nine per cent of these paediatric TB cases have been diagnosed to have MDR TB, according to the Foundation for Innovative New Diagnostics (FIND) that conducted the tests in collaboration with the Central TB Division under the Revised National TB Control Programme (RNTCP).

FIND initially started a unique initiative for diagnosing paediatric TB in four cities of Delhi, Chennai, Hyderabad and Kolkata from April 2014 with funding from the United States Agency for International Development (USAID). It has now scaled up the project to include additional five cities —Nagpur, Surat, Visakhapatnam, Bengaluru and Guwahati. The project will start in Indore next week. The aim of the project is to provide rapid access to quality TB diagnosis for all presumptive paediatric TB patients in the project intervention areas.

Sunil D Khaparde, Deputy Director General (TB) and Head of the Central TB Division, told *The Hindu* on Tuesday that the RNTCP is committed to providing increasing access to quality TB diagnostics for the paediatric population. In 2016, the proportion of children among new TB patients reported was 6%. Absence of appropriate samples coupled with decentralised capacity to get good samples from children to test for TB remains a challenge in paediatric TB case detection, he said.

Admitting that paediatric MDR-TB cases had not been documented so far, he said children were more prone to primary MDR infection as they were in close contact with their parents and grandparents, who would have been infected.

“A considerable number of the 9% diagnosed to have MDR-TB are primary infections. This is a worrying factor,” said Dr. Khaparde, who is also the Project Director of RNTCP.

“FIND’s collaboration with RNTCP is to enable rapid linkage to treatment with an overall aim of improving clinical outcomes in this vulnerable (paediatric) population. As of now the project is in nine cities and based on the success we will extend it to other cities,” he said.

According to Sanjay Sarin, who heads FIND, India, TB diagnosis in children is complicated due to challenges associated with sample collection and poor sensitivity of tests like the Acid fast bacilli (AFB) smear. FIND, through this project, has collaborated with the Central TB Division to improve access to more sensitive diagnostic tools like the GeneXpert in the paediatric population, he said.

Free test

The project was initially started to assess the feasibility of roll out of GeneXpert MTB/RIF, a cartridge-based test used with an automated molecular diagnostic platform that enables the diagnosis of TB and some drug-resistant TB (DR-TB) in less than two hours.

The focus was on testing various types of paediatric specimens in routine programmatic settings.

According to Debadutta Parija, Medical Officer, FIND, GeneXpert labs have been established within the reference labs of RNTCP in each of the project cities, catering to patients in both the public and private sectors.

GeneXpert MTB/RIF testing was performed free of cost for all presumptive paediatric TB and drug-resistant TB patients (aged under 15 years).

FIND's Project Coordinator (Paediatric) Aakshi Kalra said both sputum and non-sputum specimens are being tested using GeneXpert except stool, urine and blood. This is as per the World Health Organisation (WHO) recommendations, Dr. Kalra said.

Lifestyle-related risk factors are being cited, compounded by an inadequate number of treatment centres in the region

Without policies to stop the worrying spread of antimicrobial resistance, the mortality rate could be disturbing

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Beijing Declaration on Education

Beijing Declaration on Education

Following is the text of BEIJING DECLARATION ON EDUCATION adopted in the 5th Meeting of BRICS Ministers of Education in Beijing, China, on July 5th, 2017.

We, the BRICS Ministers of Education and assigned representatives of the Federative Republic of Brazil, the Russian Federation the Republic of India, the People's Republic of China, and the Republic of South Africa.

Having met in Beijing, the People's Republic of China on July 4th and 5th, 2017 to discuss education reforms, approaches to promoting equity in education and fostering quality education, strengthening BRICS collaboration in the field of education, and exchange of students and scholars and teaching faculty among BRICS Member States;

Recalling *Brasilia Declaration* on March 2nd, 2015, *Moscow Declaration* on November 18th, 2015 and *New Delhi Declaration* on September 30th, 2016;

Committed to the UN Sustainable Development Goal 4 (SDG4)-Education 2030 which aims to "Ensure inclusive and equitable quality education and promote life-long learning opportunities for all" that was set within *The 2030 Agenda for Sustainable Development*.

Recognizing the significance of collaboration in the field of education for enhancing the overall partnership among BRICS Member States and enhancing people to people exchanges to a higher level;

Realizing that the scale of education development in BRICS Member States is expanding rapidly, and that all Member States face common challenges in promoting educational equity, accessibility and in improving the quality of education;

Considering that higher education contributes to the development of high-level human resources and intellectual support for the economic and social development, studies of BRICS Member States will enhance the mutual understanding between each Member State, and

Recognizing that the mobility of faculty and students, and sharing of information among the

Member States is of great importance for the implementation of the consensus arrived at the Meeting of BRICS Ministers of Education.

For ensuring coordinated and deeper cooperation among the Member States, hereby declare to;

1. Reiterate support for the BRICS Network University (NU) to collaborate in the fields of education, research and innovation. Encourage universities to participate in the BRICS University League.
2. Increase cultural cooperation through language education and multilingualism to promote mutual understanding of the history and culture of BRICS Member States.
3. Undertake initiatives to promote professionalization of academics in higher education through the BRICS Network University as a focus of future education development.
4. Encourage more teachers and educational administrators to learn from experience of other countries in improving teacher quality and performance, and promoting the development of education through international exchanges.
5. Strengthen cooperation in the field of Technical and Vocational Education and Training (TVET), share ideas and experiences in the development of vocational educators, and develop projects that are of common interests to BRICS Member States.
6. Recognize the importance of BRICS Think Tanks Council (BTTC), BRICS Network University as well as other BRICS initiatives, and encourage the streamlining of mechanisms for their closer cooperation to ensure the alignment of their work.
7. Emphasize the importance of streamlining the cooperation among educational think tanks and education researchers, and welcome China's invitation to host a conference to explore possible cooperation among the various entities in BRICS Member States.
8. Encourage the organization of "youth winter/summer camps" to reinforce communication and cultural exchanges among the young generation from BRICS Member States.
9. Encourage Member States to expand the number of scholarship opportunities to students across BRICS Member States.
10. Share the experience and practices in achieving the SDG4-Education 2030 targets in order to foster a more favorable policy environment, adopt effective practices, and advocate for global educational policies that take into account the common concern and priorities of the BRICS Member States.
11. Encourage the participation in the 3rd BRICS NU Annual Conference to be held in 2018, in Cape Town, South Africa and in the BRICS Global Business and Innovation Conference to be held in September 2017, in St. Petersburg, Russia.

The Federative Republic of Brazil, the Russian Federation, the Republic of India, and the Republic

of South Africa extend their appreciation to the Government of the People's Republic of China for hosting the 5th Meeting of BRICS Ministers of Education.

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“JIGYASA” - Student-Scientist connect programme launched**“JIGYASA” - Student-Scientist connect programme launched****Signing of MoU between CSIR & KVS****Student-Scientist connect programme “JIGYASA”.****1151 Kendriya Vidyalayas connect with 38 CSIR Laboratories targeting one lakh students and nearly 1000 teachers annually**

Jigyasa, a student- scientist connect programme was officially launched in the national capital today. Council of Scientific and Industrial Research (CSIR), has joined hands with Kendriya Vidyalaya Sangathan (KVS) to implement this programme. The focus is on connecting school students and scientists so as to extend student’s classroom learning with that of a very well planned research laboratory based learning.

Memorandum of Understanding signing ceremony was held in the presence of Dr. Harsh Vardhan, Minister of Science & Technology, Earth Sciences, Environment, Forests and Climate Change and Shri Prakash Javadekar, Minister of Human Resource Development.

Addressing the gathering, the Minister for Science & Technology, Dr Harshvardhan said, that the Jigyasa programme was inspired by Prime Minister Narendra Modi’s vision of a new India and “Scientific Social Responsibility (SSR)” of scientific community and institutions. It is a historic day when two ministries are collaborating on the Youth who are the future of the nation. The day also coincides with the birthday of Shri Shyama Prasad Mukherjee who is an inspirational figure and a role model for all Indians.

Speaking on the occasion, Union Minister of Human Resource Development Shri Prakash Javadekar said that “to inculcate scientific temper among the students we have to make them aware about the impact of science on the society. Science has played a very important role in changing our lives”. Thanking Dr Harshvardhan and CSIR, Shri Javadekar further said that access to these premier institutions is only the beginning. CSIR will also talent hunt among the visiting students for furthering the cause of scientific development. The Minister also informed that he will personally review the status periodically.

CSIR has been contributing for several decades for socio-economic development in the country. It has been through development and deployment of knowledge base focused at Technology and Innovation. CSIR has also been playing a key role in human resource development, in particular training of the young researchers through Ph. D. programmes in diverse fields.

The “JIGYASA” would inculcate the culture of inquisitiveness on one hand and scientific temper on the other, amongst the school students and their teachers. The Programme is expected to connect 1151 Kendriya Vidyalayas with 38 National Laboratories of CSIR targeting 100,000 students and nearly 1000 teachers annually.

The program will also enable the students and teachers to practically live the theoretical concepts taught in science by visiting CSIR laboratories and by participating in mini-science projects. The model of engagement includes:

- Student Residential Programmes;
- Scientists as Teachers and Teachers as Scientists;

- Lab specific activities / Onsite Experiments;
- Visits of Scientists to Schools/Outreach Programmes;
- Science and Maths Clubs;
- Popular Lecture Series/ demonstration programme at Schools;
- Student Apprenticeship Programmes;
- Science Exhibitions;
- Projects of National Children’s Science Congress;
- Teacher Workshops; and
- Tinkering Laboratories.

“JIGYASA” is one of the major initiative taken up by CSIR at national level, during its Platinum Jubilee Celebration Year. CSIR is widening and deepening its Scientific Social Responsibility further with the programme.

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Bird flu: India declares itself free from Bird Flu

NEW DELHI: India has declared itself free from [Bird Flu](#) (highly pathogenic [Avian Influenza](#) - H5N1 and H5N8) and notified it to the [World Organisation for Animal Health](#). The move will help it resume export of poultry products to the countries which had banned trade in such items early this year.

India had reported outbreaks of Avian Influenza at various epicentres in Delhi, Gwalior (Madhya Pradesh), Rajpura (Punjab), Hissar (Haryana), Bellary (Karnataka), Allappuzha and Kottayam (Kerala), Ahmedabad (Gujarat), Daman (Daman) and Khordha and Angul in Odisha during October 2016 to February 2017.

"India has declared itself free from Avian Influenza (H5N8 and H5N1) from June 6, 2017 and notified the same to the World Organisation for Animal Health", said the Union agriculture ministry in a statement on Thursday.

The countries which banned Indian poultry products, include [United Arab Emirates](#) (UAE) and Hong Kong.

The ministry said that all the outbreaks of Avian Influenza were notified to the world body and the control and containment operations were carried out as per the action plan on preparedness, control and containment.

"Surveillance was carried out throughout the country and around the areas of the outbreaks since completion of the operation (including culling, disinfection and clean-up). Surveillance in the states showed no evidence of presence of Avian Influenza virus", said the ministry while justifying its action.

The World Organisation for Animal Health is recognised as a reference body by the [World Trade Organization](#). It has 181 countries as its members. This global body keeps tab on animal health issues and advises countries on best practices to be followed during such outbreaks.

This organisation also supports countries to help them control animal diseases that cause livestock losses and pose a risk to public health. Under its norms, ban can be lifted after 90 days of surveillance.

Though many West Asian countries have already lifted the ban to import from India, the remaining ones are expected to open their markets after the latest notification to the world body.

India is, at present, the world's fifth largest egg producer and the 18th largest producer of broilers. In terms of export from India, poultry products recorded 18% growth during the 2015-16 financial year over the same period of 2014-15.

The country had exported over 6,59,304 metric tonne of poultry products worth Rs 768.72 crore during 2015-16. The major importing countries of these products were Oman, USA, Saudi Arabia, Japan, UAE and Germany.

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No-detention policy in school may be scrapped from next academic year: Union minister

The no-detention policy might be scrapped from the next academic year as the policy has negatively impacted affected quality of basic education in the country, Union minister of state for human resources development Mahendra Nath Pandey said on Thursday.

“Many states have expressed worry over declining education quality due to the no-detention policy and supported to remove it. Eyeing this, a decision has been made where the Centre approved that the no-detention policy can be uprooted from the next academic year,” Pandey told the media at the BJP headquarters in Agartala.

The minister said the state governments will decide if they want to continue with the policy or remove it.

Under the Right to Education (RTE) Act, 2009, no child admitted in a school will be held back in any class or expelled till the completion of elementary education covering classes 1 to 8.

“There has been a unanimous decision of withdrawing the no-detention policy from the Right to Education Act 2009,” the minister said.

He said Prime Minister Narendra Modi has decided to transform 20 universities of the country into world class ones and the ministry was working in this direction.

During his two-day visit, Pandey visited the Sanskrit Institute and the National Institute of Technology. He also assured to extend support for upgradation of the engineering institute.

Pandey also expressed pleasure over growing popularity of the BJP in the Left-ruled state. “I hope BJP will be the new parivartan (change) in Tripura in the 2018 assembly election,” he said.

(With PTI inputs)

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Minister of Food Processing Industry laid foundation stone for First Maize Based Mega Food Park in Kapurthala, Punjab

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Shri Harsimrat Kaur Badal, Union Minister of Food Processing Industry laid the foundation stone for First Maize based Mega Food Park in Kapurthala, Punjab today. Sadhvi Niranjan Jyoti, Minister of State for Food Processing was also present on the occasion.

Speaking on the occasion Shri Harsimrat Kaur Badal said that Maize is an amazing cereal and is an alternate to *Jhona* (paddy) and *Kanak* (wheat). Maize is rich in protein, provides nutritional requirements that India needs and Maize consumes much lesser water and could contain the problem of further water depletion. The Mega Food Park is being developed by Sukhjit Mega Food park & Infra Limited at village Rehana Jattan, Phagwara, District Kapurthala, Punjab. She also said that Kapurthala has been declared as a Dark Zone district where slow desertification is happening because of overexploitation of water due to cash crops. So establishment of this Mega Food Park was not allowed. Since this would be a maize based Mega Food Park which will promote crop diversification and water conservation, Smt Harsimrat Kaur Badal informed that her ministry made special efforts to get this Mega Food Park approved from Ministry of Water Resources, River Development and Ganga Rejuvenation. Establishment of this Mega Food Park will result in the development of this Dark Zone which includes Job opportunities, Environmental Conservation, she added.

Smt Harsimrat Kaur Badal also said that there is an urgent need to turn to Maize and our government would relentlessly work to make Maize as the third viable staple crop of Punjab after Wheat and Rice and growing of maize with enhanced quality of seeds. A Maize based Food Park is like putting an engine to the cart so that cultivation of maize grows leaps and bounds. Highlighting the new flagship scheme "KISAN SAMPADA YOJANA", Minister of Food Processing Industries said that with the aim of making every farmer a Food Processor also, this scheme has been designed where farmers can also set up big or small food processing units and marketing units. She also said that enterprises willing to set up maize based food processing units in Sukhjit Mega Food Park would get loan from NABARD at affordable rates. She also thanked the state government for extending support for the establishment of the Mega Food Park.

Background:

Maize Based Mega Food Park is the first major and serious step in the history of India for containing the desertification problem of Punjab and would make farmers turn to maize cultivation which need less water for more production. Maize is being used by different industries for seed, starch, brewery, food additives, sweeteners etc and it is also a basic raw material to thousands of industrial products like oil, proteins, pharmaceutical, cosmetics, beverages, film, textile, gum, value added foods, paper industries, bio-ethanol etc.

The Mega Food Park will leverage an additional investment of about Rs.250 crores in 25-30 food processing units in the park and generate turnover of Rs.450-500 crores annually. The Park will provide direct and indirect employment to 5,000 persons and benefit about 25,000 farmers.

Set up in an area of 55 acres, the first Maize based Park is being built with an investment of Rs. 123.7 crores with a grant of Rs.50 crores by Union Food Processing Industries Ministry to have Multipurpose Cold Storage of 3, 000 Metric tonnes, Individually Quick Frozen (IQF) and Deep Freezer 1 Metric Tonne/Hour capacity, Sorting and Grading Yard of 2,000 sqm and Food Testing Lab. In addition to that promoter is also set up an Anchor Unit with an investment of Rs.105 crores

for Maize Processing with an installed grinding capacity of 500 Metric Tonnes a day.



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Scheme for IPR Awareness – Creative India; Innovative India**Scheme for IPR Awareness – Creative India; Innovative India**

Taking forward the National Intellectual Property Rights (IPR) Policy 2016, a 'Scheme for IPR Awareness – Creative India; Innovative India' has been launched by Cell for IPR Promotion and Management (CIPAM) under the aegis of the Department of Industrial Policy and Promotion.

The Scheme aims at raising IPR awareness amongst students, youth, authors, artists, budding inventors and professionals to inspire them to create, innovate and protect their creations and inventions across India including Tier 1, Tier 2, Tier 3 cities as well as rural areas in the next 3 years.

The Scheme for IPR Awareness aims to conduct over 4000 IPR awareness workshops/seminars in academic institutions (schools and colleges) and the industry, including MSMEs and Startups, as also IP training and sensitization programmes for enforcement agencies and the judiciary.

Workshops will cover all vital IP topics including international filing procedures, promotion of Geographical Indications and highlighting the ill effects of piracy and counterfeiting.

The Scheme for IPR Awareness would be implemented through partner organizations to promote innovation and entrepreneurship, for which complete details can be viewed at <http://dipp.nic.in/whats-new/scheme-ipr-awareness>.

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What is Swayam?

President [Pranab Mukherjee](#) launched the Swayam and Swayam Prabha platforms to facilitate imparting education to all. The Swayam program offers digital classrooms with the help of internet and satellite connectivity to the remotest corners in the country. Swayam is essentially a portal which has been formulated as a solution to the problem of difficult access to physical educational infrastructure and teachers along with study material and textbooks. Swayam will provide online study material to students free of cost and the courses will be taught via digital classrooms.

The program of Human Resource Development Ministry spells out as Study Webs of Active-Learning for Young Aspiring Minds (SWAYAM). It offers courses ranging into hundreds and they are those which are taught at school, college and university level. The program will also likely rope in foreign teachers for some courses.

Furthermore, it can easily be integrated into one's formal traditional education. The system allows the transfer of credits that a college student earns from a course directly into their academic records. It also provides courses of vocational nature and also for those who want to study while continuing with their jobs. All courses are free in Swayam and the fee is only for issuing of a certificate.

In the initial phase, courses will be offered by IITs Bombay, Madras, Kanpur, Guwahati, Delhi, IGNOU, University of Delhi, Jawahar Lal Nehru University, IIM Bangalore, IIM Calcutta, Indian Institute of Science, NCERT etc. The courses offered are from school to post-graduate level.

The broad categories of courses offered are engineering, management, science, arts and recreation, mathematics, languages, general studies, humanities, library sciences, energy, sustainable development, social science etc. The government expects at least 1 crore students to enroll in the initial 2-3 years.

The program also provides certification. If a student wants to get certification for course studies, one needs to register for it and the certification process will be carried out after the completion of the course. The certificate will be provided for a "nominal fee" as per the Swayam website.

The program takes digital education and satellite technology to a new paradigm in the country. Students across the country will be able to make use of the service and any queries that they have will apparently be clarified in real time to maintain a classroom-like environment.

The program will make available quality teachers to pupils and multi-language study material including in regional languages to get them started quickly. The program is of a Massive Open Online Learning format and seeks to provide the best teachers for students across the country with ICT solutions to bridge the gap between urban and rural education.

A total 32 Swayam Prabha DTH channels launched along Swayam portal seek to help students living in remote areas who don't have proper connectivity to IT services.

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New class of antibiotic raises hopes for urgently-needed gonorrhoea drug

With the sexually transmitted disease fast becoming drug resistant, successful lab tests of closthioamide show potential as an effective new treatment

With the sexually transmitted disease fast becoming drug resistant, successful lab tests of closthioamide show potential as an effective new treatment

[Sarah Boseley](#) and [Nicola Davis](#)

18.00 BST19.01 BST

A new class of antibiotic has been found to work in the lab against the sexually transmitted infection gonorrhoea, which can cause infertility and damage to babies and is fast becoming resistant to all existing drugs.

Although it is early days, because the antibiotic has yet to be tried in animals or humans, researchers say they are excited by its potential. The World Health Organisation has listed [gonorrhoea as a high priority infection](#) that poses a great threat to human health, estimating that there about about 78m gonorrhoea infections worldwide each year. In the UK, gonorrhoea is the second most common bacterial STI after [chlamydia](#), with 35,000 cases in England in 2014 alone. New drugs are urgently needed.

Closthioamide, which was discovered in 2010, has been tested in the lab against samples of the *Neisseria gonorrhoeae* bacterium causing the disease by researchers from Imperial College London and the London School of Hygiene and Tropical Medicine (LSHTM).

They tested 149 samples of bacteria from hospital patients with infections in the throat, urethra, cervix and rectum. Very small amounts of the antibiotic were effective against 146 of the 149 samples. The drug was also effective against samples of the drug-resistant bacteria provided to the researchers by the World Health Organisation. [Their results are published in the journal Antimicrobial Agents and Chemotherapy.](#)

[Drug resistance](#) is an escalating problem. The World Health Organisation (WHO) has estimated that 700,000 people around the world die annually from drug resistant infections. Scientists have found it difficult to discover new antibiotics and many pharmaceutical companies have left the field, because it is hard and there are no reliable long-term markets. New antibiotics are used as little as possible to conserve their potency. When they are widely used, resistance begins to set in and they cease to be effective.

Victoria Miari, lead author from LSHTM, said: "Antibiotic resistance, combined with the reduction of drug development, is one of the biggest health issues facing the world today. The problem threatens to render many human and animal infections untreatable, including gonorrhoea. With no effective vaccine available, new antibiotics are urgently needed to tackle this infection which, left untreated, can have very serious consequences.

"The results of our initial laboratory studies show that closthioamide has the potential to combat *N. gonorrhoeae*. Further research is needed, but its potential to successfully tackle this infection, as well as other bacteria, cannot be underestimated."

Dr John Heap, lead author from Imperial's department of life sciences, described the new findings as exciting, but stressed the antibiotic will not be in use any time soon. "There is a long way to go

from where we are right now before we have a medicine ready to give to anyone in the clinic,” he said.

But, Heap added, the antibiotic is promising, not least because it has a very unusual structure. “Often you might come across an antibiotic and it looks just like all the other antibiotics – it is a very close relative of an existing one or it turns out it does just the same thing,” he said.

“[Closthioamide] is exciting, partly because it has such a weird structure we might expect it to have different properties to other antibiotics.”

And there is another advantage. “Fortunately, in the case of this [antibiotic], there is a method to make it synthetically so we don’t have to grow massive, massive vats of the bacteria and squeeze tiny amounts out,” said Heap.

Claudia Estcourt, professor of sexual health and HIV at Glasgow Caledonian University and a member of the British Association for Sexual [Health](#) and HIV, said she was cautiously optimistic about the development, pointing out there are many steps before the drugs can be used in clinic.

“Because of the biology of gonorrhoea itself and, I think, the lack of success in work gone into producing a vaccine, antibiotics are absolutely essential because currently they are the only treatment for an important sexually transmitted infection which has both public health and individual health impact.

“To have something at this stage that is showing very early promise in the laboratory is very exciting – but there are many compounds that may produce early, exciting results across the spectrum of infectious disease but never reach usability in humans.”

Estcourt also stressed the need for greater awareness of safe sex and for individuals to have check-ups, pointing out that gonorrhoea infections do not always come with symptoms.

“Prevention is better than cure and services need to be available to support this,” she said.

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U.S. may tighten rules for foreign students

Foreign students in the United States may be required to reapply every year for permission to stay in the country, if a proposal under consideration by the Department of Homeland Security (DHS) is implemented. The move will require regulatory changes that could take up to 18 months, the *Washington Post* reported.

Indians are the fastest growing group among the international student population in the U.S. There are 1,66,000 students from India pursuing higher education in the U.S. now, up from about 1,00,000 two years earlier. A large majority of them pursue science, technology, engineering and math courses. Around 1.4 million international students are currently present in the U.S.

Under current regulations, international students can stay in the U.S. as long as they are enrolled for a programme. Students who enter the U.S on F-1 visas are issued an entry document with an end date that states "duration of stay", which is theoretically open-ended. They can stay as long as they have a valid I-20 document, which is issued by the university, with all details regarding the student's programme of study, financing, etc. They can also move from one programme to another and from one institution to another, by a notification to the DHS, based on a new I-20 document that the institution issues.

But the new proposal, if implemented, will make their visa status time-bound, the report said. The proposed measures could increase costs and paper work for students and universities. A DHS spokesperson told the *Post* that the proposal is part of an ongoing review of the immigration policy to ensure that it "promotes the national interest, enhances national security and public safety and ensures the integrity of our immigration system."

Aparna Dave, an immigration attorney, said the proposal could make the U.S. a less attractive destination for students from India. "There are other countries that offer opportunities with much less administrative requirement. The new proposal will put a burden of \$200 on the students each time they reapply, as service charge, which is now a one-time fees," she said.

Negative impact

Ms. Dave said the measures appear to be aimed at tracking the students closely, but the real impact of it will be in diminishing U.S. ability to attract the best talent from across the world.

Rahul Choudaha, CEO, DrEducation, a U.S.-based research firm specialising in international students, said increased immigration scrutiny of international students is misinformed. "International students are already highly tracked. They not only have to go through screening of university admissions systems but also rigorous visa application and interview processes".

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Minister of Railways Shri Suresh Prabhakar Prabhu launched various Railway initiatives**Minister of Railways Shri Suresh Prabhakar Prabhu launched various Railway initiatives**

Minister of Railways Shri Suresh Prabhakar Prabhu launched the following Initiatives:-

1. RAIL CLOUD PROJECT.
2. NIVARAN-Grievance Portal (First IT Application on Rail Cloud).
3. Cashless treatment Scheme in Emergency (CTSE) Scheme and Handing over of 1st CTSE Card.

Minister of State for Railways Shri Rajen Gohain was specially present to grace the occasion. Member Staff, Shri A.K.Mital, other Railway Board Members and senior officials were also present on the occasion. Ministry of Railways has launched the RailCloud project in association with its PSU, RailTel Corporation of India Limited.

Speaking on the occasion, Minister of Railways Shri Suresh Prabhakar Prabhu said, "Efforts are being made to bring entire Railway system on Integrated dIGITAL Platform. RailCloud is another step towards Digitization of Railways. Rail Cloud works on popular Cloud Computing system. Most Important works are done through Cloud Computing. Also, this is going to reduce the cost & data may be safely ensured on the servers. Also, another important step is Cashless Treatment Scheme in Emergency. Life Expectancy has increased, so many health problems have evolved. This scheme would improve health care facilities of Railway employees."

Salient Features of the Initiatives Launched:**1. RailCloud**

Indian Railway has started a strategic IT initiative, christened IR-OneICT, for enterprise wide digital single platform with an aim to improve customer satisfaction, improve revenue and effective, efficient and safe operations. To achieve the goal of single digital platform for IR a few foundational projects need to be implemented first, establishment of RailCloud is one such project. Cloud Computing is the emerging technology for faster and on demand commensurate deployment of Server resources which result in reduced cost. Accordingly, RailCloud Phase-I has been sanctioned at the cost of Rs. 53.55 Cr under PH-17, DF(3) in FY 17-18. Potential benefits to Railways after implementation of RailCloud are:

Faster and on-demand deployment of application- RailCloud will pave the way for swifter deployment of application (within 24 hrs as compared to conventional time running into weeks and months). At the same time the cloud hardware and environment will be available for rigorous testing of the new applications.

Optimum use of Servers and storage- The technology enables maximising the usage of the available server and storage resulting in accommodation of bigger data and more applications within same server space.

Utilization of existing infrastructure as part of Cloud- The existing resources available with railway will be subsumed in RailCloud thereby ensuring that expenditure is minimized in acquiring new resources.

Rapid scalability and elasticity- Server and storage space will scale up and down as per the demand. This makes the system suitable to meet the higher demand at peak hours with less

expenditure.

IT Security enhancement and Standardization: The cloud shall be equipped with security features as per the latest GOI guidelines, the security features can be updated in one go for all the applications hosted on the cloud, resulting in enhanced security and stability with less expenditure and effort.

Cost reduction: The server and storage infrastructure will be deployed as per the requirement, resulting in substantial savings to railway as expenditure will be incurred as and when required instead of upfront shelling out money on procurement of expensive servers.

Better User Experience: In Cloud, the server resources are constantly scaled up or down as per the no. of users logged on to the system. This ensures a better user experience to the customer.

The Managed Network and Virtual Desktop Interface (VDI) services are also being planned, in near future, for providing faster and more efficient work environment to each rail worker.

2. NIVARAN-Grievance Portal'First IT application on RailCloud

'NIVARAN-Grievance Portal' is the first IT application to be launched on the RailCloud. It is the platform for resolution of service related grievances of serving and former railway employees. The existing application was hosted on a conventional server; it has been made cloud-ready and being migrated as the first cloud application of Indian Railways. It will save significant revenue and at the same time user experience will also improve.

3. Cashless treatment Scheme in Emergency (CTSE)

Railway provides Comprehensive Health Care Facilities to its beneficiaries through in-house health Institutions, supplementing with referrals to recognized hospitals whenever necessary. The beneficiaries include retired employees and their dependent family members. Large no. of retired beneficiaries lives in the newly developed suburbs of various cities. These parts of the city are often far away from the established Railway Health Institutions. In this scenario the RELHS beneficiaries coming to Railway Health Institutions in routine is acceptable, however in emergency situations, precious time (Golden Hour) is lost in travel.

To provide immediate care to its retired employees in 'Golden Hour' Railway Board has decided to roll out a "Cashless treatment Scheme in Emergency" (CTSE), in empanelled hospitals, for retired employees and their dependent family members. A web based system of communication between private hospitals and railway authorities has been developed wherein identity of the beneficiary shall be established using biometrics stored in Aadhar (UIDAI) server, eligibility shall be determined using Railway Data Base and emergency shall be verified by Railway Medical Officer based on private hospital's clinical report. The whole system is online and even the bill processing shall be online. This scheme shall provide help and succor to the retired railway employees at the time of need and at the same time will have a morale boosting effect on the serving employees.

The Scheme fulfils both the avowed objectives of the GOI; utilizing IT tools to cut the red-tape and promoting cashless transactions.

Rather than creating a separate time and resource consuming vertical the scheme has used the existing resources by bringing on board the UIDAI and ARPAN database. Railway has not incurred any capital expenditure on the scheme, M/s UTIITSL has developed the software in consultation with Railway and shall be paid on per bill processed basis. The online processing will ensure swifter disposal of bills in a transparent manner.

At present the scheme has been rolled out in four metro cities of Delhi, Mumbai, Kolkata and

Chennai, based on the experience of this pilot the scheme may be extended to the whole of country.

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Cabinet approves establishment of the International Rice Research Institute (IRRI), South Asia Regional Center (ISARC) at campus of National Seed Research and Training Center (NSRTC) in Varanasi

Cabinet approves establishment of the International Rice Research Institute (IRRI), South Asia Regional Center (ISARC) at campus of National Seed Research and Training Center (NSRTC) in Varanasi

The Union Cabinet chaired by the Prime Minister Shri Narendra Modi has approved the establishment of the International Rice Research Institute (IRRI), South Asia Regional Center (ISARC) at campus of National Seed Research and Training Center (NSRTC) in Varanasi.

Under the proposal, a Centre of Excellence in Rice Value Addition (CERVA) will be set up in Varanasi. This will include a modern and sophisticated laboratory with capacity to determine quality and status of heavy metals in grain and straw. The Centre will also undertake capacity building exercises for stakeholders across the rice value chain.

This Center will be the first international Center in the eastern India and it will play a major role in harnessing and sustaining rice production in the region. It is expected to be a boon for food production and skill development in the eastern India and similar ecologies in other South Asian and African countries.

Benefits from ISARC

The Centre will help in utilizing the rich biodiversity of India to develop special rice varieties. This will help India to achieve higher per hectare yields and improved nutritional contents. India's food and nutritional security issues will also be addressed. The Centre will support in adopting value chain based production system in the country. This will reduce wastage, add value and generate higher income for the farmers. The farmers in Eastern India will benefit in particular, besides those in South Asian and African countries.

Management of ISARC

ISARC will operate under the governance of the IRRI Board of Trustees who will appoint an appropriate IRRI staff member as Director. A Coordination Committee will be headed by Director General, IRRI as Chair and Secretary, Government of India, Department of Agriculture, Cooperation and Farmers Welfare (DACFW) as Co-Chair. The other members of Coordination Committee are Deputy Director General (Crop Sciences), ICAR; Director, NSRTC; IRRI representative in India, representative of Government of UP and representatives of Governments of Nepal & Bangladesh and Private Sector.

For setting up of the Centre, A Memorandum of Agreement, will be signed between DAC&FW and IRRI, Philippines. The Department of DAC&FW will provide physical space for laboratories, offices, training classes, etc. with associated infrastructure and land at

NSRTC, Varanasi. The Centre will be commissioned within six months.

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India ranks 116 out of 157 nations on SDG index

UNITED NATIONS: [India](#) is ranked 116 out of 157 nations on a global index that assesses the performance of countries towards achieving the ambitious sustainable development goals (SDGs).

The [SDG](#) Index and Dashboards Report produced by the Sustainable Development Solutions Network (SDSN) and the Bertelsmann Stiftung shows that [world](#) leaders need to strengthen their joint efforts to realise the 17 global goals.

"Not only does a rising trend of nationalism and protectionism impede the implementation of the goals, but as the report shows, industrialised countries are not serving as role models," the report added.

It said many of the richest countries in the world are nowhere near achieving the global policy objectives but also deteriorate the implementation process for poorer countries because of negative spillover effects.

India is ranked 116th on the index with a score of 58.1, behind countries such as Nepal, Iran, [Sri Lanka](#), Bhutan and [China](#). [Pakistan](#) is ranked 122.

The report said that the countries which are closest to fulfilling the goals are not the biggest economies but comparably small, developed countries.

Sweden leads the list, followed by Denmark and Finland. Among the G7 countries, only Germany and France can be found among the top ten performers. The [United States](#) ranks 42nd on the Index, while Russia and China rank 62nd and 71st respectively.

"One of the greatest obstacles to achieving the global goals for high-income countries are poor performances regarding sustainable consumption and production. All countries that score lowest on electronic-waste generation, for example, are high-income countries," it said.

Bertelsmann Stiftung chairman and CEO Aart De Geus said the report's findings show that politicians, businesses and society altogether must urgently intensify their efforts and commit themselves to this agenda.

"SDG Index and Dashboards highlight the need for urgent action on the part of G20 countries in making sustainable development a reality both within and beyond their borders. If the world is to achieve the SDGs, all countries must take up the goals as part of their national development strategies, and ensure that they take responsibility for their impact on the rest of the world," said Jeffrey D Sachs, Director of the SDSN.

The SDG Index and Dashboard collect available data for 157 countries to assess where each country stands in 2017 with regard to achieving the SDGs.

The SDG Index ranks countries based on their performance across the 17 Sustainable Development Goals.

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A looming threat - OPINION

About 5,500 of over 76,000 children tested in nine Indian cities have been diagnosed with tuberculosis, 9% of them with multi-drug resistant TB (MDR-TB), highlighting the silent spread of the disease. Though the actual prevalence of MDR-TB among children in India is not known, the results from a limited number of children tested in this sample, under the Revised National TB Control Programme, is worrying. According to a 2015 study, of the over 600 children who had tested positive for TB in four cities, about 10% showed resistance to Rifampicin, a first-line drug. Since the incidence of TB among children is a reflection of the prevalence of the disease in the community at large, the high prevalence of both drug-sensitive TB and drug-resistant TB in children from these nine cities is a grim reminder of the failure of the health-care system to diagnose the disease early enough in adults and start them on treatment. Very often, children who test positive for TB have been in close contact with adults with the disease in the same household. With up to a couple of months' delay in diagnosing the disease being the norm, there is a continuing threat of TB spreading among household contacts and in the larger community. In line with World Health Organisation guidelines, the RNTCP requires all household contacts, particularly children, of a newly diagnosed pulmonary TB patient to be tested and started on treatment if needed. Children below six years of age in the household of a newly diagnosed patient are required to be given the drug Isoniazid as a prophylactic even when they do not have the disease.

A proactive approach to testing helps in early and correct diagnosis of all contacts and in cutting the transmission chain. Unfortunately, as several studies have shown, the RNTCP guidelines on contact screening are heeded mostly in the breach. The results from this limited study should now compel the government to take up contact screening more urgently. In 2010, WHO had revised the dosage of certain TB drugs for children. Fixed-dose combination (FDC) drugs that take into account the revised dosages for children were finally made available in late 2015. The FDCs are meant for treating children with drug-susceptible TB and cannot be used to treat children who require second-line drugs or who have MDR-TB. After more than a year's delay, a few months ago India finally introduced FDCs in six States. The remaining States will be covered by the end of this year. Adherence to treatment will improve, and correct dosage for children weighing less than 25 kg will become easier when child-friendly FDCs become available throughout the country. Using the Xpert molecular diagnostic test to screen children with TB is a positive step and should be welcomed, but all the diagnosed children should be guaranteed paediatric FDCs. It would be unethical to deny them this lifeline.

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Govt. panel to study cow derivatives

Harsh Vardhan.

The government has set up a 19-member panel, including three members linked to the RSS and VHP, to carry out what it says will be scientifically validated research on cow derivatives including its urine, and their benefits, according to an inter-departmental circular and members of the panel.

Headed by Science and Technology Minister Harsh Vardhan, the committee will select projects that can help scientifically validate the benefits of panchgavya — the concoction of cow dung, cow urine, milk, curd and ghee — in various spheres such as nutrition, health and agriculture, says the circular accessed by PTI.

Named the National Steering Committee, the panel includes secretaries of the departments of Science and Technology, Biotechnology, Ministry of New and Renewable Energy, and scientists from the Indian Institute of Technology (IIT), Delhi.

It also has three members of Vigyan Bharti and Go Vigyan Anusandhan Kendra, outfits affiliated to the RSS and VHP. The government circular says former CSIR Director R.A. Mashelkar, known for vigorously campaigning against U.S. patents on turmeric and basmati rice, is also a member of the panel. The others include IIT-Delhi director Prof. V. Ramgopal Rao and Prof. V.K. Vijay of the IIT's Centre for Rural Development and Technology.

The government has given the project the acronym SVAROP, which stands for Scientific Validation and Research on Panchagavya, and says it is a “national programme” that's being conducted by the Department of Science and Technology, Department of Biotechnology, and the Council for Scientific and Industrial Research (CSIR) of the Ministry of Science and Technology in collaboration with IIT-Delhi.

The document also says “this multi-disciplinary programme” will involve participation of other related ministries, government departments, academic institutions, research laboratories, voluntary organisations and others “to carry out research and development and also build capacities, and cover five thematic areas including scientific validation of uniqueness of indigenous cows.”

It will cover “scientific validation of ‘panchagavya’ for medicines and health, scientific validation of ‘panchagavya’ and its products for agriculture applications, scientific validation of ‘panchagavya’ for food and nutrition,” the circular says.

Vijay Bhatkar, president of the Delhi-based Vigyan Bharti, an RSS-affiliated science body, is the co-chairman of the committee.

Says BJP will campaign against corruption, law and order problems and lack of development work in Himachal Pradesh

The process of holding the requisite Board Meetings and Shareholder Meetings has been completed in phases in September 2017.

Ruben George is staying at Ram Nath Kovind's house at Kalyanpur, near Kanpur

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GM mustard policy: SC gives govt. time

The government on Monday informed the Supreme Court that a policy decision on the commercial release of the Genetically Modified (GM) mustard crop is yet to be finalised.

The Centre said it was poring through the various suggestions on and objections to the commercial rollout of the GM crops.

A Bench, led by Chief Justice of India J.S. Khehar and Justice D.Y. Chandrachud, granted the government one week to report back on when the policy would be finalised. It said the policy should be good-intentioned and well-informed.

The court had on October 17, 2016, extended the stay on the commercial release of the GM mustard until further orders. It had asked the Centre to collect public opinion before the release.

The government had assured the court that there would be no commercial release of GM seeds till the views of the public were collected and placed before the appraisal committee.

Sowing without safety

The hearing was conducted on the basis of a petition filed by activist Aruna Rodrigues, who had alleged that the government was sowing GM seeds without the relevant tests.

Mustard is one of India's most important winter crops, sown between mid-October and late November.

Advocate Prashant Bhushan, appearing for Ms. Rodrigues, alleged the government was sowing the seeds in various fields and that the bio-safety dossier, which has to be made public by putting it on the website, had not yet been done.

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Shri J P Nadda launches the National Strategic Plan for Malaria Elimination (2017-22)**Shri J P Nadda launches the National Strategic Plan for Malaria Elimination (2017-22)**

Shri J P Nadda, Union Minister of Health and Family Welfare launched the National Strategic Plan for Malaria Elimination (2017-22) at a function, here today. The Strategic Plan gives year wise elimination targets in various parts of the country depending upon the endemicity of malaria in the next 5 years. Speaking at the launch, Shri Nadda said that the government would like to eliminate malaria by 2027 and urged the states for active cooperation. He further stated that the programme has to be owned by the states. Dr. Jagdish Prasad, DGHS, Shri R.K.Vats, Additional Secretary & Director General and Acting WHO Representative to India Dr. Suchaxaya Prakin were also present at the launch function.

Recalling the launch of the National Framework for Malaria Elimination (NFME) last year, Shri Nadda stated that NFME outlined India's commitment for eliminating malaria by 2030. "Today we are here for the launch of the National Strategic Plan for Malaria Elimination (2017-22) which gives strategies for working towards the ultimate goal of elimination of malaria by 2030," Shri Nadda elaborated. The Health Minister further said that the National Strategic Plan is for five years and requested the Programme Officers to work with a strategy and follow the operational guidelines laid down in the National Strategic Plan.

The Health Minister further said that encouraging results have been achieved in the North East India and our efforts are now focussed in other states such as Jharkhand, Odisha, Chhattisgarh, Madhya Pradesh and Maharashtra. Shri Nadda further informed that since the past three years focus is on Long Lasting Impregnated Nets (LLINs). "The Ministry has distributed 14 million nets and 25 million nets are to be distributed", Shri Nadda said.

Highlighting the salient features of the NSP, Shri Nadda stated that the strategies involve strengthening malaria surveillance, establishing a mechanism for early detection and prevention of outbreaks of malaria, promoting the prevention of malaria by the use of Long Lasting Impregnated Nets (LLINs), effective indoor residual spray and augmenting the manpower and capacities for effective implementation for the next five years. "Intersectoral coordination is the key, we have to work together with the other Ministries and Municipal Corporations to achieve the desired results, Shri Nadda added.

Dr Suchaxaya Prakin, acting WHO representative to India said that today's development is an important step in the direction of global efforts for elimination of malaria in various countries. She informed that one child dies of malaria every two minutes and the burden is the heaviest in the African region. India has the third highest malaria burden in the world. She stressed on harnessing innovation and research along with monitoring and surveillance, and community participation.

Also present at the event were Sh. Navdeep Rinwa, Joint Secretary, Dr. P. K. Sen, Director, NVBDCP along with the other senior officers of the Ministry and representatives of international development organizations.

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Supreme Court allows Centre to replace MCI oversight committee

The Supreme Court on Tuesday allowed the Centre to replace the oversight committee set up to supervise the functioning of the Medical Council of India (MCI) with a fresh panel of five eminent doctors.

A five-judge Constitution bench, headed by Chief Justice J S Khehar, said the Centre had proposed the names of five eminent doctors to replace the oversight committee whose term had just expired.

“The doctors proposed are all outstanding people. We are satisfied with the names,” the bench, also comprising Justices J Chelameswar, R K Agrawal, D Y Chandrachud and S Abdul Nazeer, said.

It also gave the Centre liberty to replace any doctor in the list with another if he does not wish to be a part of the oversight committee.

The bench had on Monday asked the Centre to constitute a panel which would replace the oversight committee set up last year by the apex court to oversee the MCI’s functioning till the government put in place an alternate mechanism.

The committee, set up by the court on May 2 last year, was to function for a period of one year or till a suitable mechanism was brought in by the Centre to substitute it.

During the hearing, senior lawyer Kapil Sibal, appearing for some medical colleges, had told the bench that till date, no alternative mechanism had been put in place by the Centre despite the fact that the oversight panel was to function for only one year or till a suitable mechanism was evolved.

He had argued that the MCI was bound by directions of the oversight committee but the council was not adhering to them.

Senior advocate Mukul Rohatgi, appearing for the Hamdard Institute of Medical Sciences and Research, had said the tenure of the oversight committee should be extended by one more year or till the time the Centre comes out with a mechanism to deal with the issues relating to the MCI’s functioning.

The apex court had on July 13 agreed to set up a five- judge constitution bench to deal with the matter after Rohatgi had said it was an urgent matter as counselling for admissions in MBBS and BDS was underway.

The Centre had earlier told the apex court that it had taken steps to put the alternative mechanism in place and there was no need now for the oversight committee to continue.

MCI had contended that the directions of the constitution bench which had set up the oversight committee were based on certain material which could not be controverted at the time of the order.

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Ministry, NITI Aayog moot privatisation of select services in district hospitals

Model contract: Under the Public Private Partnership , care for three non-communicable diseases — cardiac disease, pulmonary disease, and cancer care — will be provided.

As a part of a radical 'privatisation project', the Health Ministry and the NITI Aayog have developed a framework to let private hospitals run select services within district hospitals, on a 30-year lease.

In a 140-page document, prepared in consultation with the World Bank, the government will be allowing "a single private partner or a single consortium of private partners" to bid for space in district level hospitals, "especially in tier 2 & 3 cities."

Under this Public Private Partnership (PPP), care for only three non-communicable diseases — cardiac disease, pulmonary disease, and cancer care — will be provided.

A model contract drawn up by NITI Aayog was sent out to State governments on June 5 by Amitabh Kant, Chief Executive Officer of NITI Aayog, giving the states a two-week window to furnish responses.

In a letter sent out last month, Mr. Kant adds that the draft document was prepared by a working group comprising representatives from the industry, Health Ministry and "representatives of a few states".

The policy document has come under sharp criticism for the Ministry's failure to consult with key stakeholders from civil society and academia. Dr. Amit Sengupta, convener of the India chapter of the People's Health Movement, said that the government was handing over critical public assets without gaining anything much in return.

"NITI Aayog has no locus standi to make health policy, which is a state subject in India. The logic behind shutting down the Planning Commission was to ensure that policies are not centralised. NITI Aayog was to be an advisory body but here they are rushing through a policy that will essentially hand over public assets to the private sector, leading to a further dismantling of the public services available for free. If the government has to give seed money, share blood banks and other infrastructure, and still not be able to reserve beds for poor patients, it seems like we are not getting much in return," said Dr. Sengupta.

Mr. Kant, Health Minister JP Nadda and Health Secretary C.K. Mishra did not respond to emails and phone calls.

According to the draft model contract, private hospitals will bid for 30-year leases over portions of district hospital buildings to set up 50- or 100-bed hospitals in smaller towns across the country. The State governments could lease up to five or six district hospitals within the State.

Further, the State governments will give Viability Gap Funding (VGF), or one-time seed money, to private players to set up infrastructure within district hospitals. The private parties and State health departments will share ambulance services, blood banks, and mortuary services.

A major concern about the policy is that under 'principles' of the financial structure, the document states that "there will be no reserved beds or no quota (sic) of beds for free services" in these facilities.

"While it is clear that insured patients will receive free care, it is not at all clear what will happen to

the vast majority of the population. In particular, how will these referral arrangements work? Whereas it says that states can, if they wish, refer 100% of patients for cashless care, it is a matter of concern that it also proposes that States can set a cap on this entitlement. How would this work? What happens when the cap is reached? Would people only be able to access services for half the year, or less,” said Robert Yates, a leading expert on universal health coverage (UHC) and Project Director of the UHC Policy Forum at Chatham House, London.

“What is particularly disturbing is the suggestion that only Below Poverty Line (BPL) patients and those in insurance schemes will be able to access free care. This would effectively exclude hundreds of millions of the Indian population from vital hospital services.

“If implemented, these proposals could threaten to take India away from UHC, a key sustainable development goal, rather than towards it,” Mr. Yates said.

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Ruben George is staying at Ram Nath Kovind’s house at Kalyanpur, near Kanpur

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The Union Minister for Finance, Defence and Corporate Affairs will formally launch the Pradhan Mantri Vaya Vandana Yojana (PMVVY) tomorrow in the national capital. PMVVY is a Pension Scheme announced by the Government of India exclusively for the senior citizens aged 60 years and above which is available from 4th May, 2017 to 3rd May, 2018. The Scheme can be purchased offline as well as online through Life Insurance Corporation (LIC) of India which has been given the sole privilege to operate this Scheme.

Following are the major benefits under the Pradhan Mantri Vaya Vandana Yojana (PMVVY):

- Scheme provides an assured return of 8% p.a. payable monthly (equivalent to 8.30% p.a. effective) for 10 years.
- Pension is payable at the end of each period, during the policy term of 10 years, as per the frequency of monthly/ quarterly/ half-yearly/ yearly as chosen by the pensioner at the time of purchase.
- The scheme is exempted from Service Tax/ GST.
- On survival of the pensioner to the end of the policy term of 10 years, Purchase price along with final pension installment shall be payable.
- Loan upto 75% of Purchase Price shall be allowed after 3 policy years (to meet the liquidity needs). Loan interest shall be recovered from the pension installments and loan to be recovered from claim proceeds.
- The scheme also allows for premature exit for the treatment of any critical/ terminal illness of self or spouse. On such premature exit, 98% of the Purchase Price shall be refunded.
- On death of the pensioner during the policy term of 10 years, the Purchase Price shall be paid to the beneficiary.
- Minimum / Maximum Purchase Price and Pension Amount:

Mode of Pension	Minimum Purchase Price	Maximum Purchase Price	Minimum Pension amount	Maximum Pension amount
Yearly	Rs. 1,44,578/-	Rs. 7,22,892/-	Rs. 12,000/-	Rs. 60,000/-
Half-yearly	Rs. 1,47,601/-	Rs. 7,38,007/-	Rs. 6,000/-	Rs. 30,000/-
Quarterly	Rs. 1,49,068/-	Rs. 7,45,342/-	Rs. 3,000/-	Rs. 15,000/-
Monthly	Rs. 1,50,000/-	Rs. 7,50,000/-	Rs. 1,000/-	Rs. 5,000/-

- The ceiling of maximum pension is for a family as a whole, the family will comprise of pensioner, his/her spouse and dependants.
- The shortfall owing to the difference between the interest guaranteed and the actual interest

earned and the expenses relating to administration shall be subsidized by the Government of India and reimbursed to the Corporation.

DSM/SBS/KA

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Untrained teachers get 2 years to qualify

The Lok Sabha on Friday passed a Bill that offers untrained teachers teaching in schools time till March 31, 2019, to acquire B.El. Ed (Bachelor of Elementary Education) or D. El. Ed. (Diploma in Elementary Education) qualifications to hold their jobs as teachers.

This was done through an amendment to the Right to Education Act, 2009, as a last chance to such teachers not to lose their jobs. The Compulsory Education (Amendment) Bill, 2017 Bill will now have to pass muster in the Rajya Sabha — and get presidential assent after that — to become an Act.

Last chance: Minister

Explaining the rationale for the Bill, Human Resource Development Minister Prakash Javadekar said many new schools had come up in the days of educational expansion under the Sarva Shiksha Abhiyan and the RTE, and many teachers who were hired did not have requisite degrees, some having studied only till school. They were given five years to train themselves, and many did, but 5-6 lakh private schools teachers and 2.5-lakh government school teachers still did not have the requisite degrees, the Minister added. “As a last chance, another two years are being given to them with this amendment,” he said.

The qualifications are deemed necessary to ensure that teachers are well-qualified to ensure quality of education. He said that with the Swayam portal — part of massive open online courses — and 32 free DTH educational channels, these teachers — who already had experience — could acquire theoretical knowledge and then pass the exam to retain their jobs. State governments would also offer them annual training, Mr. Javadekar said.

During the debate, Bhartruhari Mahtab of the BJD suggested that the cut-off date be left to the States, as it was not advisable to bring every extension back to Parliament. He also suggested a separate budget allocation for RTE.

Mr. Javadekar said all States had different conditions. “Ninety per cent untrained teachers are from eight States. We will make a task force for them,” he said.

Mr. Javadekar mentioned ways that State governments had put in place steps to ensure better teacher attendance, like Rajasthan pasting photographs of all teachers in a school on the notice board with the caption “our respected teachers” and Manipur using a tab that would mark attendance only within 50 feet of the school.

Detention Bill soon

Human Resource Development Minister Prakash Javadekar told the Lok Sabha on Friday that the government would soon introduce a Detention Bill.

“Detention Bill is also about to come. We should not have the situation that the Pratham report on students from Classes 5 to 8 shows. For this, learning outcomes that are expected of students in each of the classes have been defined,” he said. “There will be exams in March for Classes 5 and 8. If the student fails in March, he will be given another chance to pass in May. For the student who fails in May too, we will soon have a Bill to provide for detention.”

The UPA government had introduced a no-detention policy till Class 8 and the Bill seeks to change the law.

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India performs miserably in war on inequality

NEW DELHI: India has been ranked 132 out of 152 countries in an index that rates countries by their commitment to reducing inequality. The first report edition of the index, released recently, showed that OECD countries headed by [Sweden](#) ranked the highest while Nigeria was at the bottom. The US had the highest level of [inequality](#) among developed countries, though it is the wealthiest country in history.

Ironically, Bhutan, known for coining the term 'Gross National Happiness', is ranked even lower than India at 143. Of India's immediate neighbours, all but Nepal (81) and China (87) ranked between 138 and 150. Given that this region is home to the largest chunk of poor people in the world, that's worrying news.

The index and the inequality report were put together by the international NGO [Oxfam](#) and Development Finance International to measure the efforts of governments that had pledged to reduce inequality as part of the sustainable development goals. The index mainly focused on redistributive actions governments can take, rather than those that would prevent rising inequality in the first place.

"A recent study of 13 developing countries that had reduced their overall inequality level found that 69% of the reduction... was because of public services," stated the report. It added that progressive taxation, where corporations and the richest individuals are taxed more in order to redistribute resources and ensure the funding of public services, is a key tool for governments committed to reducing inequality.

The report noted that government spending on health, education and social protection was woefully low in India.

The tax structure looks reasonably progressive on paper, but in practice much of the progressive tax is not collected, it added. India fared poorly on labour rights as well as respect for women in the work place. The report said that if India were to reduce its inequality by a third, 170 million people could be raised out of poverty. In contrast, it noted how Namibia had halved the poverty rate from 53% to 23% with very high spending on health and education.

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Google's machine-raised mosquitoes to shrink vector's numbers

Google's parent company Alphabet and scientists in the US have teamed up to release 20 million machine-raised mosquitoes to shrink the numbers of the disease-carrying ones.

According to the plans, millions of sterile male mosquitoes will be released in Fresno county in California, which will then mate with wild female mosquitoes. The eggs the females lay won't hatch, a [report](#) in the Washington Post said.

The project, called Debug Fresno, is being undertaken by Verily, a subsidiary of Alphabet, Google's holding company.

Scientists said that the goal is to cut the numbers of *Aedes aegypti* mosquitoes -- the species responsible for spreading zika, dengue and chikungunya.

For 20 weeks, the company plans to release a million of the sterile, non-biting male mosquitoes in two neighbourhoods in Fresno county.

The male mosquitoes are bred and infected with *Wolbachia*, a bacterium that is naturally found in at least 40 per cent of all insect species, the report said.

"Over time, we hope to see a steep decline in the presence of *Aedes aegypti* in these communities," Verily was quoted as saying.

In a phenomenon called cytoplasmic incompatibility, "matings between *Wolbachia*-infected males and uninfected females result in embryo lethality or low hatch rates", William Sullivan and Scott L. O'Neill wrote in the journal *Nature*.

They said that the bacterium used to sterilise mosquitoes "is not known" to infect humans.

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Human antibodies produced in lab for first time - Times of India

BOSTON: In a first, scientists have produced human antibodies in the laboratory using a technique that could usher the rapid development of new vaccines to treat a wide range of infectious diseases.

Antibodies are produced by the body's B cells to fight off infections by bacteria, viruses, and other invasive pathogens.

When an individual B cell recognises a specific pathogen-derived "antigen" molecule, it can proliferate and develop into plasma cells that secrete large amounts of antibody capable of binding to the antigen and fending off the infection.

Researchers, including those from [Harvard University](#) and [Massachusetts Institute of Technology \(MIT\)](#) in the US, wanted to replicate this process in the laboratory to produce specific antibodies from B cells isolated from patient blood samples.

However, in addition to encountering a specific antigen, B cells need a second signal to start proliferating and developing into plasma cells.

This second signal can be provided by short DNA fragments called CpG oligonucleotides, which activate a protein inside B cells named TLR9.

However, treating patient-derived B cells with CpG oligonucleotides stimulates every B cell in the sample, not just the tiny fraction capable of producing a particular antibody.

Researchers, led by Facundo Batista from the [Francis Crick Institute](#) in the UK, produced specific human antibodies in the laboratory by treating patient-derived B cells with tiny nanoparticles coated with both CpG oligonucleotides and an antigen.

With this technique, CpG oligonucleotides are only internalised into B cells that recognise the specific antigen, and these cells are therefore the only ones in which TLR9 is activated to induce their proliferation and development into antibody-secreting plasma cells.

The team successfully demonstrated their approach using various bacterial and viral antigens, including the tetanus toxoid and proteins from several strains of influenza A.

In each case, the researchers were able to produce specific, high-affinity antibodies in just a few days. Some of the anti-influenza antibodies generated by the technique recognised multiple strains of the virus and were able to neutralise its ability to infect cells.

The procedure does not depend on the donors having been previously exposed to any of these antigens through vaccination or infection.

Researchers were able to generate anti-HIV antibodies from B cells isolated from HIV-free patients.

They hope that their approach will help researchers rapidly generate therapeutic antibodies for the treatment of infectious diseases and other conditions such as cancer.

"Specifically, it should allow the production of these antibodies within a shorter time frame in vitro and without the need for vaccination or blood/serum donation from recently infected or vaccinated individuals," Batista said.

"Our method offers the potential to accelerate the development of new vaccines by allowing the efficient evaluation of candidate target antigens," he said.

The research was published in The Journal of Experimental Medicine.

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Ministry of Health and Family Welfare (25-July, 2017 15:46 IST)

Amendment to NMC Bill

A four member Committee headed by Vice Chairman, NITI Aayog, was constituted on 28.03.2016 to examine all options for reforms in the Medical Council of India (MCI) and suggest a way forward. The Committee has framed a draft "National Medical Commission (NMC) Bill" which provides for constitution of NMC in place of MCI. The draft Bill has been relooked by a Group of Ministers (GoM) constituted for the purpose. The GoM has approved the draft Bill with some modifications.

The NITI Aayog Committee had consulted all the States/UTs while framing of the draft Bill. The opinion of

experts and academicians was elicited through discussions. The draft Bill was also hosted on the website of NitiAayog inviting public comments. Representation of IMA was also received in the matter which has been considered while framing the draft Bill.

The Minister of State (Health and Family Welfare), Sh Faggan Singh Kulaste stated this in a written reply in the Rajya Sabha here today.

MV/LK
(Release ID :168981)

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Policy boosts care for blood disorders

People living with Thalassaemia, sickle cell anaemia and other variant haemoglobins can now look forward to better screening and treatment, based on the Union Health and Family Welfare Ministry's new policy.

The Ministry recently released a policy on the Prevention and Control of haemoglobinopathies in India.

Supported by the National Health Mission, Blood Cell and the Rashtriya Bal Swasthya Karyakram, the guidelines provide for screening of pregnant women during antenatal check-up, pre-marital counselling at college level and one-time screening for variant anaemia in children.

The Minister of State (Health and Family Welfare) Anupriya Patel stated this in a written reply in the Rajya Sabha on July 18.

Thalassaemia and sickle cell anaemia are the most frequently encountered 'rare blood disorders' in the country and impose a significant economic burden on families. The policy aims at creating treatment protocol benchmarks, to improve the quality of life of patients.

It is also a guide on prevention and control, which includes antenatal and prenatal testing to reduce the incidence of live haemoglobin disorder births (currently pegged at 10,000-15,000 live births a year).

Using public health awareness programmes and education, it highlights various haemoglobinopathies. The guidelines include the creation of a national registry to plan future patient services. The registry will also collect useful data, such as the location of patients to identify areas of high concentration, ethnicity or other characteristics, age distribution, records of deaths and their cause.

Shobha Tuli, president of the Federation of Indian Thalassaemics, who contributed to the policy, said it was a big step to prevent haemoglobinopathies.

'Provide all drugs'

"Since not more than 20% of patients can afford treatment, the government should ensure that all patients get it free. Such free treatment is given in States such as Rajasthan, Uttar Pradesh, West Bengal, Odisha and Karnataka besides Delhi, and others should follow suit. All chelation drugs should be made available free because one drug does not suit all," she said.

The policy, however, makes no reference to carrier testing for relatives of patients.

Namitha A. Kumar from the Centre for Health Ecologies and Technology (CHET), who is also living with Thalassaemia said people with the genetic disorder unknowingly pass it on to their children, as preventive checks are not the norm in India.

"In Pakistan, a law making carrier testing compulsory for relatives of Thalassaemia patients was passed in February. A similar system is in place in Dubai, Abu Dhabi and Saudi Arabia. I wish it could be made compulsory here too," she said.

Cecil Reuben Ross, Head of the Department of Medicine and Haematology in St. John's Medical College Hospital, hailed the policy but said testing had to be voluntary.

“There is more awareness about the condition now, especially after the Indian Council of Medical Research took up screening of 50,000 antenatal mothers and 50,000 college students a few years ago. “Testing cannot be made compulsory and people should opt for it. A concerted effort by people as well as government will help ,” Dr. Ross said.

Lifestyle-related risk factors are being cited, compounded by an inadequate number of treatment centres in the region

Without policies to stop the worrying spread of antimicrobial resistance, the mortality rate could be disturbing

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CAC adopts Codex norms for three spices

In a significant move, the Codex Alimentarius Commission (CAC) adopted three Codex standards for black, white and green pepper, cumin and thyme paving the way for an universal agreement on identifying quality spices in various countries.

The CAC cleared these standards at its session held in Geneva recently.

The adoption of Codex standards for the three spices, it is pointed out, will help evolve a common standardisation process for their global trade and availability.

“This (Codex standard) will bring harmony to the global spice trade and ensure availability of high quality, clean and safe spices to the world,” said Union Commerce Minister Nirmala Sitharaman in a statement.

“It may be a small beginning considering the number of commodities waiting in the ranks for the standardisation process. But what is really heartening is that spices have made a definitive entry into the league of commodities having Codex standards, and India played a key role in achieving this objective,” she added.

‘Food code’

The Codex Alimentarius or “Food Code” is a collection of standards, guidelines and codes of practice adopted by the Codex Alimentarius Commission. The Commission, also known as CAC, is the central part of the joint FAO (Food and Agricultural Organization of the United Nations)/WHO (World Health Organisation) Food Standards Programme. It was established by FAO and WHO to protect consumer health and promote fair practices in food trade.

The CAC move is considered a crucial endorsement of the India’s initiatives to usher in a common standard across the globe for spices trade.

The adoption of Codex standards by CAC must be read in the context of the efforts put in by New Delhi in arriving at a common code for spices trade. India conducted three sessions of Codex Committee on Spices and Culinary Herbs (CCSCH) at Kochi (2014), Goa (2015) and Chennai (2017). The Chennai session especially succeeded in achieving this consensus. Subsequently, these drafts were placed before the CAC and the member-nations adopted them by consensus.

With the adoption of Codex standards, member-nations would now have reference points and benchmarks to align their national standards for spices with Codex.

Around 2013, the need for Codex standards for spices and herbs became a subject matter of increased concern owing to the increased level of issues in spice trade. At that time, there was no Codex committee exclusively for spices and culinary herbs. The first step in the development of Codex standards was taken with the establishment of a dedicated Codex committee for spices and herbs. Not surprisingly, the adoption of Codex standards is viewed as a major victory for India.

Such expenditure needs expeditious resolution of stressed loan problem: Crisil

END

Shri Bandaru Dattatreya attends the BRICS Labour & Employment Ministers' Meet in China**Shri Bandaru Dattatreya attends the BRICS Labour & Employment Ministers' Meet in China**

Indian delegation led by Shri Bandaru Dattatreya, the Minister of State (Independent Charge) for Labour & Employment participated in the BRICS Labour & Employment Ministers' Meet, held on 26-27th, July, 2017 at Chongqing, China. China is the chair for the BRICS Labour & Employment Ministers' Meet for the year 2017. The delegation included M Sathiyavathy, Secretary(Labour and Employment), Manish Gupta, Joint Secretary, Anuja Bapat, Director and Prof Sasikumar, Sr. Fellow, VVGNI.

The meeting concluded with the adoption of the BRICS Labour and Employment Ministerial Declaration by the BRICS Labour and Employment Ministers on 27th July 2017 in Chongqing, China. The Declaration covered a variety of areas that are of critical importance to all BRICS countries including India and called upon strengthening collaboration and cooperation on these through appropriate institutionalisation . These areas consisted of : "Governance in the Future of Work", "Skills for development in BRICS", "Universal and sustainable social security systems", "BRICS Network of Labour Research Institutions", "BRICS Social Security Cooperation Framework" and "BRICS entrepreneurship research".

On this occasion, Shri Bandaru Dattatreya said that the BRICS countries should collaborate to address the challenges of the 'Future of Work' emerging in the area of non-standard forms of employment like part-time work, temporary work, fixed term contracting and subcontracting, home based work, etc. that are changing the character of the labour markets in the BRICS countries. Networking of labour institutes of BRICS nations could create mechanisms for regular exchange of information and creating further areas of cooperation in this and other common areas.

Labour & Employment Minister reiterated that India has always adhered to the principle of CBDR in Global Supply Chain and was pleased that the BRICS countries echoed this policy stand. Shri Dattatreya added that technology could be a critical enabler for creating efficient and transparent labour governance structure and that in India ICT has been deployed to ensure effective, timely and efficient delivery of services and for creating simpler and transparent compliance structure in all areas including financial inclusion, social security, employment generation and skilling.

The Minister emphasized that skilling not only increases the employability of the workers but also the productivity of the employers which leads to a cycle of increased production, increased revenue stream and increased GDP of the country. India endorsed the BRICS Action Plan for Poverty Alleviation and reduction through Skills which inter alia includes policy recommendations to integrate poor into overall national plan for vocational training, improving lifelong vocational training and learning systems, promoting high quality apprenticeship systems, strengthening collaboration between Governments, sectors and enterprises for research initiatives, and leveraging the network of BRICS National Research Institutes for creating such alliances.

India complimented the Chinese Presidency for taking forward the commitments made collectively by BRICS during the previous presidencies in a very articulate manner. India supported the proposed institutionalization of Social Security Cooperation Framework for BRICS as it will help us understand strategies being followed by fellow BRICS countries towards universalisation of social security especially in respect of on standard forms of works. Minister said that asymmetry in labour market information is big challenge for all of us. In this context the network of National Labour Institutes presents significant possibilities for integrating research and information sharing. Shri Dattatreya said that the network will also help us to form common positions on relevant labour and employment issues. Encouraging innovation and Entrepreneurship is a key priority for India. India expressed her desire to work with BRICS partners in strengthening the BRICS Entrepreneurship Initiatives.

The BRICS Labour and Employment Ministerial Declaration would now be presented to the Leaders/ Head of the State summit scheduled to be held on 3-5th, 2017 Xiamen, China.

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Ministry of Health releases Operational Guidelines for Planning and Implementation of Family Participatory Care

Ministry of Health releases Operational Guidelines for Planning and Implementation of Family Participatory Care

Ministry of Health and Family Welfare recently released Operational Guidelines for Planning and Implementation of Family Participatory Care (FPC) for improving newborn health. The guidelines will serve as a guiding document for those intending to introduce FPC in their facility as an integral part of facility based newborn care. The document also provides details of infrastructure, training, role of health care providers and steps in the operationalization of FPC in the newborn care unit. The operational guidelines of FPC are for all stakeholders involved in the process of planning and delivering newborn care.

The guidelines also addresses various aspects of attitudes, infrastructural modifications and practice that will help in establishing FPC at Special Newborn Care Units (SNCU) such as sensitization of State and District Managers on FPC, prioritization of SNCUs for initiating FPC, making required infrastructural enhancement in SNCU, creating family participatory care environment in SNCU, ensuring availability of supplies for parents-attendants, training of SNCU staff for SNCU, role of healthcare providers for FPC implementation and institutional support for FPC.

Under FPC, the capacities of parents-attendants are built in newborn care through a structured training programme (audio -visual module and a training guide). The staff at newborn care unit will provide continuous supervision and support. Provisions for infrastructure and logistics strengthening required for implementing FPC are ensured in the annual state Program Implementation Plan (PIP). The guidelines will be shared with the States for implementation and it is expected that these guidelines when implemented by States would further improve the quality of care being provided in the SNCUs across the country.

Sick and newborn are highly vulnerable and require careful nurturing in order to survive the neonatal period and first year of life. Under National Health Mission, more than 700 state of the art Special Newborn Care Units (SNCU) have been established across the country to provide 24 X 7 comprehensive care to the newborns by dedicated trained staff.

In the recent years, it is realized that if parents are trained, during the stay of their babies in the hospital, to provide supportive care to their sick and newborns, it will help in not only improving survival of the babies after discharge but will also provide for psycho-social and developmental needs of the newborn. In this regard, Family Participatory Care has emerged as an important concept of health care which provides for partnership between health care staff and families in care of sick newborns admitted in the SNCU.

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Shri Mukhtar Abbas Naqvi launches “Jiyo Parsi Publicity Phase-2” in Mumbai**Shri Mukhtar Abbas Naqvi launches “Jiyo Parsi Publicity Phase-2” in Mumbai**

Union Minister of State (Independent Charge) for Minority Affairs & Parliamentary Affairs Shri Mukhtar Abbas Naqvi today said here that the NDA Government has been working with commitment to “inclusive growth” and “Antyodaya” to ensure prosperity, security and dignity of the last person of the society.

Addressing a large number of people from Parsi community and renowned personalities from various fields at the launch of “Jiyo Parsi Publicity Phase-2” at Mumbai, Shri Naqvi said that Parsi community has immense contribution in nation building and Parsi community has been a “role model” for other communities for its culture and traditions. The Parsi community has given so many great people who have been “architects of nation building”.

Shri Naqvi said that even though the Parsi community is a very small minority community in India, there is no doubt that the Parsi community is one of the most liberal, aware towards education and an example of “peace and harmony”.

Shri Naqvi said that Jamshetji Tata played a crucial role in industrial development of India; Dadabhai Naoroji and Madam Bhikaji Cama played an important role in India’s freedom struggle; Homi J Bhabha is “father of Indian nuclear programme. Field Marshall Sam Manekshaw’s service to the nation will be remembered always. Be it industry, military service, legal service, architecture or civil services, the Parsi community has always shown its talent.

Shri Naqvi said that declining population of Parsi community in India is a matter of concern. “Jiyo Parsi Publicity Phase-1” was initiated in 2013 for containing the declining trend of population of the Parsi community and reverse it to bring their population above the threshold level.

The main objective of the “Jiyo Parsi” scheme is to reverse the declining trend of Parsi population by adopting a scientific protocol and structured interventions, stabilize their population and increase the population of Parsis in India. Ministry of Minority Affairs’ scheme has two components: Medical Assistance and Advocacy/Counselling. The scheme has been successful. 101 babies have been born in Parsi community through “Jiyo Parsi” scheme.

Shri Naqvi said that Parzor Foundation was an important link between the Parsi community and the government in success of “Jiyo Parsi” scheme. And the Tata Institute of Social Sciences (TISS), Mumbai; the Bombay Parsi Punchayet (BPP) and Federation of Zoroastrian Anjumans of India have also played a key role in this regard.

These organisations have been publicising the scheme through outreach programmes like seminars, workshops, publicity, brochures, Parsi journals and other advocacy programmes and awareness campaign.

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The HEERA conundrum

The Central Government (CG) plans to dissolve the All India Council for Technical Education (AICTE) and the University Grants Commission (UGC) and replace them with a single body, tentatively titled Higher Education Empowerment Regulation Agency (HEERA). According to statements made by the Human Resource Development Minister, having a single statutory body for higher education will simplify and consolidate the mass of regulations and compliances that currently operate in the sector.

Background

Policy analysts and experts have been advocating replacement of AICTE and UGC with a more efficient regime for a long time. The National Knowledge Commission (NKC), which was constituted in 2005 under the chairmanship of Sam Pitroda to recommend reforms in the education sector, found that there was a multiplicity of regulators prescribing standards and minimum norms for higher education institutions. This meant that the barriers to entry for new higher education institutions were high and often overlapped with each other, leading to confusion and disorganisation. Accordingly, NKC recommended creation of an Independent Regulatory Authority for Higher Education (IRAHE), which would function at an arm's length from all concerned stakeholders, accord degree-granting status to universities, set standards for higher education and award licences to accreditation agencies.

Further, the Yashpal Committee, constituted in 2009 with the mandate of advising on "renovation and rejuvenation of the education sector", identified a need for a "drastic overhaul" of the higher education system. The committee concluded that if higher education was to be seen as an integrated whole, the governance of professional education could not be separated from that of general education; there ought to exist a "single, all-encompassing higher education authority", which could regulate the sector on a pan-India basis.

Considering the above, the CG's initiative for introduction of a single independent regulator in the higher education space is welcome. Details regarding the HEERA proposal are being ironed out. The National Institution for Transforming India and the Ministry of Human Resource Development are in the process of drafting both a formal proposal to introduce HEERA, and the legislation which would govern HEERA (HEERA Law).

Powers of UGC

At present, the UGC has two primary responsibilities: (a) providing funds to educational institutions; and (b) coordinating, determining and maintaining standards in institutions of higher education.

An indicative list of the functions covered under UGC's mandate is set out as follows: promoting and coordinating education in universities, determining and maintaining standards for teaching, examination and research in universities, framing regulations on minimum standards for education, disbursing grants to universities and colleges, liaising between the CG, State governments and higher educational institutions, and advising the CG and State governments on possible policy measures to improve higher education in India.

Powers of AICTE

AICTE is a professional council constituted by the CG to govern technical education in India. AICTE's objectives include: promoting quality in technical education, planning the co-ordination

and development of the technical education system and regulation of technical education and maintenance of norms and standards for technical education in India.

Necessity

The jurisdiction of AICTE and UGC often tends to overlap. Given that UGC governs universities and prescribes minimum standards for higher education, and AICTE performs similar functions for the stream of 'technical education', there are many cases where institutions fall under the domain of both UGC and AICTE, for example, a college affiliated to a university which is recognised by the UGC may also be called upon by AICTE to obtain its approval. This is where the problem of multiplicity arises leading to lack of clarity over which regulations to conform to.

It appears that often the idea of conforming to two sets of norms set out by both regulatory bodies can be a huge barrier for setting up of nascent institutions. Even for existing institutions, overlapping and complex regulations make regulatory compliance burdensome.

The multiple sets of rules and sub-regulations prescribed by UGC and AICTE, unfortunately, seem to have acted as a deterrent to the development of premier educational institutions. There has long been a need for change in the regime governing higher education in India. Industry players opine that there has been little room for business development in the area, while state authorities lament the difficulty they have faced in enforcing overlapping, often labyrinthine compliances. Further, the separation between the standards governing technical and non-technical education is seen as unnecessary and illusory.

Clearly there is a need to smoothen existing procedures and ensure their efficient enforcement. It is in this light that the CG has proposed to bring HEERA into existence. The introduction of a unified regulator would minimise administrative delays and remove jurisdictional ambiguity. Sponsoring bodies of institutes of higher education would no longer be required to approach multiple authorities for clearances, which is likely to promote ease of development of institutions of higher learning. Furthermore, HEERA is expected to have sharper teeth than the extant AICTE and UGC: the HEERA Law is likely to empower HEERA to take strict penal action against defaulting institutions. Thus far, both private players and governmental authorities seem pleased with the idea of a single, unified regulator to govern the higher education space.

However, these sentiments are in most part contingent on stakeholders' expectations regarding the manner in which HEERA will function on the ground, once formalised. In the immediate future, one could expect more complexity in an already complex sector once the interim reform measures by way of amendments to prevailing higher education regulations are announced.

The authors are executive director, principal associate and associate respectively at Khaitan & Co.

As the new academic session has begun, elections are not very far. Should colleges have student political parties? Freshers speak up.

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Scientists just created a flexible bio-glue for healing wounds

Scientists have developed a super strong, flexible adhesive material inspired by the glue secreted by slugs that sticks to biological tissues – even when wet – without causing toxicity. The "tough adhesive" is biocompatible and binds to tissues with a strength comparable to the body's own resilient cartilage, researchers said.

"The key feature of our material is the combination of a very strong adhesive force and the ability to transfer and dissipate stress, which have historically not been integrated into a single adhesive," said Dave Mooney, professor at Harvard University's Paulson School of Engineering and Applied Sciences (SEAS) in the US.

Slugs secrete a special kind of mucus when threatened that glue it in place, making it difficult for a predator to pry it off its surface.

This glue was previously determined to be composed of a tough matrix peppered with positively charged proteins, which inspired Jianyu Li, an assistant professor at McGill University in Canada and colleagues to create a double-layered hydrogel consisting of an alginate-polyacrylamide matrix supporting an adhesive layer that has positively-charged polymers protruding from its surface.

The polymers bond to biological tissues via three mechanisms – electrostatic attraction to negatively charged cell surfaces, covalent bonds between neighbouring atoms, and physical interpenetration – making the adhesive extremely strong.

"Most prior material designs have focused only on the interface between the tissue and the adhesive. Our adhesive is able to dissipate energy through its matrix layer, which enables it to deform much more before it breaks," said Li.

The team's design for the matrix layer includes calcium ions that are bound to the alginate hydrogel via ionic bonds. When stress is applied to the adhesive, those "sacrificial" ionic bonds break first, allowing the matrix to absorb a large amount of energy before its structure becomes compromised.

In experimental tests, more than three times the energy was needed to disrupt the tough adhesive's bonding compared with other medical-grade adhesives. When it did break, what failed was the hydrogel itself, not the bond between the adhesive and the tissue, demonstrating an unprecedented level of simultaneous high adhesion strength and matrix toughness.

The researchers tested their adhesive on a variety of both dry and wet pig tissues including skin, cartilage, heart, artery, and liver, and found that it bound to all of them with significantly greater strength than other medical adhesives.

The tough adhesive also maintained its stability and bonding when implanted into rats for two weeks, or when used to seal a hole in a pig heart that was mechanically inflated and deflated and then subjected to tens of thousands of cycles of stretching.

It also caused no tissue damage or adhesions to surrounding tissues when applied to a liver hemorrhage in mice – side effects that were observed with both super glue and a commercial thrombin-based adhesive.

Such a high-performance material has numerous potential applications in the medical field, either

as a patch that can be cut to desired sizes and applied to tissue surfaces or as an injectable solution for deeper injuries. The research was published in the journal Science.

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