

6 Apr 2020: UPSC Exam Comprehensive News Analysis

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Category: HEALTH

1. Rapid antibody testing for hotspots first: ICMR

Context:

- The Indian Council of Medical Research's (ICMR) approval for the use of antibody-based testing for COVID-19.

Background:

- So far, India has been employing the **real-time reverse transcription polymerase chain reaction (RT-PCR) method** for testing for COVID-19.
 - RT-PCR is a laboratory technique combining reverse transcription of RNA into DNA and amplification of specific DNA targets using polymerase chain reaction. It is primarily used to **measure the amount of a specific RNA.**

- ICMR officials have stated that the use of RT-PCR testing is increasing and that India would be approaching full capacity soon.
- Given the increasing number of cases and the calls for higher amount of testing, **ICMR has approved the use of antibody-based testing for COVID-19.**
- **RT-PCR test detects the virus and the antibody tests, which use blood, detect the body's response to the virus.** A positive result in the antibody test tells that the person was exposed to the virus.

For more information on this refer to:

[CNA dated 5th April, 2020](#)

Details:

- The Indian Council of Medical Research (ICMR) has stated that the rapid antibody-based blood test for COVID-19 would be **initially deployed in clusters and hotspots** showing high incidence of confirmed cases.
- The ICMR is emphasizing that the **testing has to be focussed and judiciously done** with contact-tracing being important to decide whom to test. The **AarogyaSetu App** would help in contact-tracing.
- Earlier the ICMR had issued guidelines for implementing antibody-based blood tests.

Additional information:

Pooled sampling:

- Studies conducted by the Center for Disease Dynamics on pooled sampling has observed that **pooled COVID-19 tests could help scale up testing** and identify and contain disease hotspots.
 - Pooled sampling involves **testing samples from multiple patients with a single PCR test.**
- This method has been used previously in the early stages of the HIV epidemic.
- This strategy could **reduce the time, cost, and resources required** whilst identifying infected people and estimating the infection rate. It would allow the health authorities to **identify community clusters for targeted public health interventions.**

2. The mystery of low German COVID-19 fatality rates

Context:

- Germany's low [COVID-19](#) fatality rates.

Background:

- The virus and the resulting disease, COVID-19, have hit Germany hard with more than 92,000 infections. But with 1,295 deaths, Germany's fatality rate stood at 1.4% compared with 12% in Italy and around 10% in Spain, France and Britain.

Factors for low fatality rate in Germany:

- The reasons for **Germany's low death rate** can be broadly divided into the following factors:

Statistical factors:

- The **average age of those infected is lower in Germany than in many other countries**. The average age of contracting the disease in Germany remains relatively low, at 49. In France, it is 62.5, and in Italy 62, according to their latest national reports.
- **Germany has been testing far more people than most nations**. That means it is able to identify more people with few or no symptoms, **increasing the number of known cases but not the number of fatalities**. Germany is conducting around 3,50,000 corona virus tests a week.

Higher level of engagement:

- There has been a **high level of engagement and a commitment of public resources**. **Proactive testing** has ensured that the health system has been able to **identify people with milder symptoms and suggest hospitalization** before they get into a steep decline of health and this has resulted in lower fatalities.

Medical interventions:

- There are also significant medical factors which have aided the low fatality rates. All across Germany, **hospitals have expanded their intensive care capacities**. The per capita intensive care beds equipped with ventilators stands at 34 per 1,00,000 people, much higher than Italy or Spain.
- **Early and widespread testing** has allowed authorities to **slow the spread of the pandemic** by isolating known cases while they are infectious. This helped **limit the surge impact on the health care facilities** allowing ample medical attention to the infected patients.

People's role:

- Given the **high level of trust in the government**, there was **strict observation of social distancing guidelines**, indicating the critical role of the people in the fight against the pandemic.

Category: GOVERNMENT SCHEMES

1. Tests, treatment free under Ayushman Bharat

Context:

- The Central government has decided to **provide free testing and treatment of COVID-19 patients under the Ayushman Bharat Scheme**.

Details:

- The announcement comes in the backdrop of increasing number of cases in India.
- Under this scheme, beneficiaries will be able to get **free services in designated private hospitals across India** under ICMR guidelines.
 - The empanelled hospitals can use their own authorized testing facilities or tie up with an authorized testing facility for the scheme. These tests would be carried out as per the protocol set by the Indian Council for Medical Research (ICMR).
 - Similarly, treatment of COVID-19 by private hospitals will be covered under AB-PMJAY.
- States are in the process of enlisting private sector hospitals that could be converted into COVID-19 only hospitals.

Significance:

Augment availability of facilities:

- The decision will help **increase the supply of testing and treatment facilities** and increase access by **increasing the private sector participation** through AB-PMJAY scheme.
- This will help involve the private sector as a key partner and stakeholder in the fight against COVID-19. It will help expand health system's capacities by including private sector hospitals and labs.

Ensure health security to a large section of population:

- This move of the central government will **benefit more than 50 crore Ayushman beneficiaries across India** to get free testing and treatment in designated private hospitals across India.
- This would allow beneficiaries to get **timely and standard treatment**.
- This will help **mitigate the adverse impact of the COVID-19 on the poor**.

Category: POLITY AND GOVERNANCE

1. Empowered group joins forces with private sector, UN & NGOs

Context:

- The formation of an **empowered group under the CEO of the NITLAayog**.

Details:

- The empowered group, chaired by NITI Aayog CEO Amitabh Kant, would undertake **discussions with the private sector and international organizations** on actions planned and challenges faced in dealing with COVID-19.
- The empowered group has already had several rounds of meetings with U.N. agencies, the World Bank, the [Asian Development Bank](#), **civil society organizations and development partners, and industry associations**.

Talks with Industries:

- The discussions are based on the participant's contribution to the response, their plans for the future and the issues they are facing. This would also **help the state gauge their expectations from the government**.
- The committee has opened up **cross-sectoral dialogue within the private sector and start-ups** to initiate collaboration among them to **produce health equipment and PPEs**.

Civil society's role:

- There has also been the reach out to over 92,000 NGOs/civil society organisations, appealing to them to **assist the government**.
- They have been asked to help identify hotspots, **depute volunteers and care givers** to deliver services to the vulnerable groups and **create awareness about prevention** and combat stigma. They have also been requested to **provide shelter to the homeless**, daily wage workers and urban poor families and set up community kitchens for migrants.

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Nothing here for today!!!

E. Editorials

Category: POLITY AND GOVERNANCE

1. Enemy at the gates

Context:

- Kerala's grievance over **Karnataka sealing its border with Kerala.**

Background:

Karnataka's restriction on cross border movement:

- **Kasaragod district** of Kerala has reported a very high number of COVID-19 cases and has **Kerala's largest number of positive cases.**
- The Karnataka government has a reasonable apprehension that allowing movement between Kasaragod and its bordering districts might result in the disease spreading to its territory.
- This led to **Karnataka imposing a complete restriction of movement** between Kerala and Karnataka even in case of emergency medical needs.
- Karnataka has argued that even other states have such measures in place. Karnataka has **argued that it is entitled to seal its borders** and restrict essential services.
 - It has quoted Kerala state's '**Kerala Epidemic Diseases Ordinance, 2020**' which arms the state with extraordinary powers to deal with the pandemic.
 - The State can **seal its borders** for such period as necessary and also **restrict** the duration of **essential or emergency services**, including health, food supply and fuel.

Kerala High Court's observation:

- The Kerala High Court took the view that **denying emergency medical aid amounts to a violation of the right to life and liberty.**
- It **addressed jurisdictional objections** from Karnataka that Kerala High Court has no territorial jurisdiction over Karnataka territory, by stating that its direction was to the Centre, as the case was against the closure of a national highway.
- The Kerala High Court further directed the Centre to **ensure free vehicular movement for those requiring urgent medical treatment on the national highway** that connects Kasaragod in Kerala to Mangaluru in Karnataka.

Concerns:

Kasaragod's connectivity:

- Given the geographical terrain of the region, Kasaragod, which lies in North Kerala suffers from **connectivity issues with Kerala**.
- Mangaluru, the neighbouring district in Karnataka is the closest and well connected centre to Kasaragod. The people of Kasaragod **depend on medical facilities in Mangaluru** for emergencies, and other districts south of Kasaragod also **rely on inter-state movement for essential medicines** to reach them. This includes even those battling [endosulfan](#) poisoning for many years.
- There have been numerous reports of Kasaragod district **suffering due to the highway closure**.

Key legal questions:

- The present situation has brought under focus the extent and the possible limits, of restrictions that may be imposed by the government to **deal with a public health emergency**.
- A key question that has arisen is whether legal measures taken by the State to prevent the further spread of an epidemic can extend to a point where there is **no exception even for medical needs**.
- Interestingly, **inter-state migration and quarantine are under the Union List**, while the **prevention of infectious diseases moving from one State to another is under the Concurrent List**.

Way forward:

Centre's role:

- Going by the division of powers as envisaged by the **7th Schedule of the Indian Constitution**, the **States do have the power to impose border restrictions**. However, it remains the **centre's responsibility to prevent a breakdown of inter-state relations** in light of restrictions.
- The centre should intervene to amicably solve the problems due to restrictions.

Supreme Court's observation:

- The [Supreme Court](#) has rightly directed the **Centre to confer with the States and formulate the norms for creating a passage at the border to cater to emergency needs**. This should lead to an amicable solution.

Taking a humane approach:

- Given Kasaragod's dependence on Mangaluru and given the fact that medical emergencies involve people who may travel across the border for urgent medical needs, ideally Karnataka should **allow movement in such cases with suitable safeguards in place**.

Category: AGRICULTURE

1. Reducing farm distress during a pandemic

Context:

- The national lockdown and its **impact on agriculture**.

Lockdown impact on rural economy:

- The economy has come to a complete halt in most of the informal and formal enterprises in urban areas. Apart from its evident effect on urban economy, **the lockdown is also likely to affect a large population in rural areas.**
- Even prior to the lockdown, the rural economy was **witnessing declining incomes**, both for casual workers and self-employed workers. Even the rural wages were declining in real terms. **The lockdown is only going to further hurt the rural economy.**
- The majority of the rural population is dependent on agriculture.

Lockdown impact on Agriculture:

Impact on supply chains:

- The restriction on movement and lockdown has led to the **breakdown of supply chains of agricultural produce** with no facilities for transportation of produce.
- This will affect the farmers involved in production of **fruits and vegetables**, which are **perishable goods and cannot be stored.**
- Over the last decade there has been a considerable increase in horticultural production with horticultural production exceeding food grain production. Farmers are likely to face **uncertain or no markets** for their produce. There have been media reports of some farmers destroying their produce due to lack of market.
- While the government has exempted operation of agricultural markets and mandis from the lockdown, government procurement is likely to be subdued.

Lack of labour:

- There will also be short-term impacts on food grains and other Rabi crops that were ready to be harvested at the beginning of April.
- It will be **difficult for farmers to harvest the agricultural produce** in the States of Punjab, Haryana and Uttar Pradesh in the **absence of migrant labourers.**
- Though harvesting may be postponed, it is difficult to do so beyond a week or a fortnight.
- **Labourers are also required for packing, processing, transporting and selling the produce.** 2020 is expected to register a record in the production of cereals, pulses, cotton and oilseeds. Most of these are labour-intensive crops and the absence of working labourers during the harvest and post-harvest season is likely to **affect agricultural activities.**

Reduced demand:

- The closure of restaurants, hotels and supermarkets has **reduced the demand for agricultural goods.**
- The **slowdown in the economy** domestically and the expected **recession worldwide** will contribute to lower demand for agricultural commodities.

Decline in prices:

- The **food price index of the Food and Agricultural Organization**, which registered a rising trend in food prices until January 2020, has a 1% decline in prices month-on-month in February 2020. This is likely to worsen further, particularly for cash crops.
 - **Commercial crop prices follow a similar pattern as other primary commodities**, particularly petroleum prices. With the sharp decline in petroleum prices, most of the commercial crops have seen a **downward pressure on prices**, which is likely to worsen in the coming months.
- For food grains and other crops too, there is likely to be downward pressure on prices **due to declining demand.**
- The real worry for farmers is going to be the decline in prices for the majority of agricultural produce.

Impact on agricultural income:

- Some of the short-term impact may **affect price realization by farmers**. The declining prices for the produce and the likely higher labour charges will adversely **affect the prospect of higher agricultural income**.
- It is the decline in prices which is likely to hurt the income of farmers in the long run more than the short-run supply disruptions and labour shortages.

Way forward:

- Given that agriculture will be affected due to **short-term disruptions and the long-term economic impact of the pandemic**, the government must help the farmers who are battling declining demand and lower prices through **state support**.

Enhanced state procurement under MSP scheme:

- As part of the economic package announced by the central government, for the next three months, 5 kg of free grains will be distributed in addition to what people are entitled to under the [National Food Security Act](#).
- This would free up the FCI godowns. This can enable the **government to increase its procurement under the MSP scheme for the forthcoming Rabi crops**.

Ensuring remunerative income to farmers:

- The state should intervene and **assure remunerative incomes to farmers**.
- The government can help **reduce the input costs** through existing schemes of subsidies such as the fertilizer subsidy and through price reduction in petrol/diesel meant for agricultural purposes.

Direct Income support:

- For the immediate short-term, **farmers need to be compensated for the loss of income**. While **income transfers** may not be the best way of supporting the agricultural sector, given the criticality of the moment they are the best available instruments.
- The government can use the existing framework of the [PM-KISAN scheme](#).
- Efforts should be made to not only **enhance the coverage monetarily** but also **include tenant farmers and wage labourers as well**.

Conclusion:

- The steps suggested are not only important for the survival of the agricultural sector but also for the overall economy which is expected to see a sharp slowdown and decline in demand.
- The **agricultural sector is important in the Indian context**. Given the large section of population it supports, a well functioning agricultural sector will help raise rural incomes and create demand, which can revive economic growth in India.

F. Prelims Facts

1. India bans export of hydroxychloroquine

- The **Directorate-General of Foreign Trade (DGFT)** had earlier prohibited the export of hydroxychloroquine, however it had left the option of export open to fulfil “export obligation” and on “humanitarian grounds”.
- India has now changed its official policy and **prohibited export of hydroxychloroquine and formulations made from hydroxychloroquine without any exceptions.**
- Hydroxychloroquine is a medication **used to prevent and treat malaria.** Other uses include treatment of **rheumatoid arthritis, lupus, etc.** It is an oral drug.
- Recent studies have indicated the possible usage of hydroxychloroquine in the treatment of COVID-19.

G. Tidbits

1. Anganwadi workers get online sessions on COVID-19 steps

- With an aim is to ensure safety of pregnant women and new mothers, the Women and Child Development Ministry is regularly **holding online interactive sessions with anganwadi workers.**
 - The anganwadi worker is a **community based front line worker of the Integrated Child Development Scheme (ICDS) programme.** She plays a crucial role in promoting child growth and development.
 - The main role of the Anganwadi worker is to assist health staff (such as the ANM) to maintain records, motivate the parents, and **organize immunization sessions.** An anganwadi worker is also required to **educate mothers** to look after the normal nutritional needs of their children.
- The Ministry has reached out to more than **two lakh anganwadi workers through the digital platforms.**
- These sessions focus on **increasing awareness** among the anganwadi workers. This involves introduction on the virus, the **preventive measures to be taken** and the psychosocial impact of COVID-19 on women and children.

2. Punjab villages self-isolate to fight COVID-19

- In the backdrop of the nationwide lockdown, **many villages in Punjab have gone into self-isolation mode.** As many as 7,842 of the total 13,240 villages have isolated themselves.
- Since many people were not taking the curfew seriously, it was decided that entry and exit should be restricted. Several youths are guarding the village entry and exit points day and night. This points to the **important role of people’s participation in ensuring the success of the governmental efforts** to limit the spread of COVID-19.
- The recently appointed **Village Police Officers (VPOs) are playing a pivotal role** in facilitating the self-isolation. The VPOs have become the **bridge between the villagers and the supply chain of essential items.**
- Notably, **drug peddling has also reduced significantly** due to the presence of village watchers.

H. UPSC Prelims Practice Questions

Q1. Which of the following statement/s is/are correct?

1. The Real-Time Reverse Transcription Polymerase Chain Reaction (RT-PCR) method helps measure the amount of a specific RNA in a sample.
2. It can identify both active cases as well as identify people with previous exposure to virus.

Options:

- a. 1 only
- b. 2 only
- c. Both 1 and 2
- d. Neither 1 nor 2

Answer:

Option a

Explanation:

- RT-PCR is a laboratory technique combining reverse transcription of RNA into DNA and amplification of specific DNA targets using polymerase chain reaction. It is primarily used to measure the amount of a specific RNA.
- RT-PCR test can only identify active cases and cannot identify people with previous exposure.
- Given the increasing number of cases and the calls for higher amount of testing, ICMR has approved the use of antibody-based testing for COVID-19.
- The antibody tests, which use blood, detect the body's response to the virus. A positive result in the antibody test tells that the person was exposed to the virus.

Q2. Which of the following statement/s is/are incorrect?

- 1. The AarogyaSetu App has been developed by the Ministry of Health and Family Welfare.
- 2. The AarogyaSetu App will help assess the risk of being infected by Coronavirus.

Options:

- a. 1 only
- b. 2 only
- c. Both 1 and 2
- d. Neither 1 nor 2

Answer:

Option a

Explanation:

- The Ministry of Electronics and IT has launched a mobile app called AarogyaSetu which will help assess the user's risk of getting affected by the Coronavirus.
- The app has been built through public private partnership. It will calculate the risk of infection based on the app user's interaction with others, using cutting edge Bluetooth technology, algorithms and artificial intelligence.

Q3. Which of the following statement/s is/are correct with respect to the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY)?

- 1. It provides free health coverage at the primary, secondary and tertiary level to the poor and vulnerable population.
- 2. The scheme provides a cover of 5 lakh per individual per year for medical treatment in empanelled hospitals, both public and private.

3. The National Health Authority is the apex body responsible for implementing AB PM-JAY.
4. All the states and union territories have adopted the scheme.

Options:

- a. 1 and 4 only
- b. 1, 2, 3 and 4
- c. 3 only
- d. None of the above

Answer:

Option c

Explanation:

- Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) is a flagship scheme of the Indian government's National Health Policy which aims to provide free health coverage at the secondary and tertiary level to its poor and vulnerable population.
- PM-JAY is the world's largest and fully state sponsored health assurance scheme. It was launched in September 2018, under the aegis of the Ministry of Health and Family Welfare in India.
- PM-JAY covers 10.74 crores households across India or approximately 50 crore Indians.
- **Major provisions:**
 - It provides a cover of 5 lakh per family per year for medical treatment in empanelled hospitals, both public and private.
 - It provides cashless and paperless service to its beneficiaries at the point of service.
 - Eligible beneficiaries are selected based on the deprivation and occupational criteria of the Socio-Economic Caste Census 2011 (SECC 2011).
 - It covers 3 days of hospitalisation and 15 days of post hospitalisation, including diagnostic care and expenses on medicines.
 - The scheme is portable and a beneficiary can avail medical treatment at any PM-JAY empanelled hospital outside their state and anywhere in the country.
- So far, 25 States and Union Territories have adopted the PM-JAY scheme, except three states: Odisha, West Bengal and Telangana and the Union Territory of Delhi.
- The National Health Authority or the NHA is the apex body responsible for implementing India's flagship public health insurance/assurance scheme 'Ayushman Bharat Pradhan Mantri Jan Arogya Yojana'.

Q4. Which of the following Indian Biosphere Reserves is not part of the UNESCO's World Network of Biospheres?

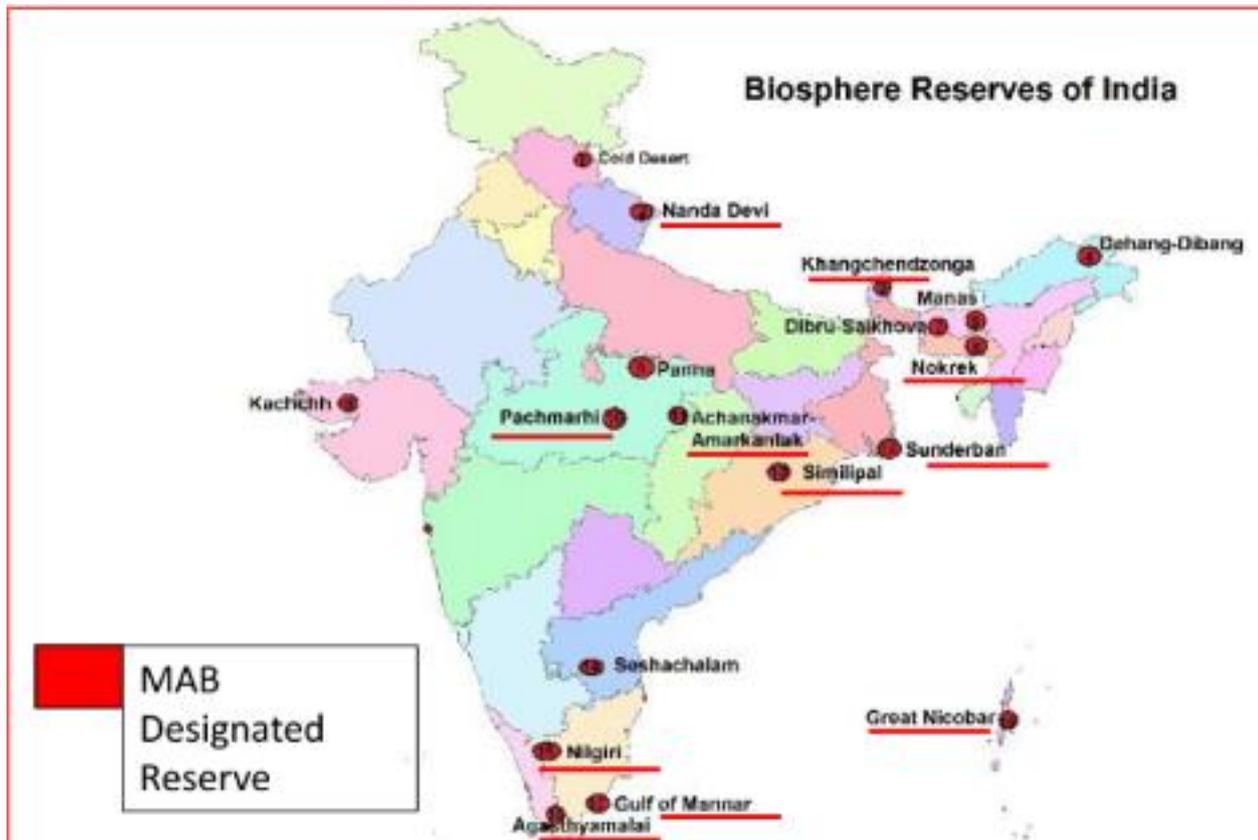
- a. Great Nicobar
- b. Nokrek
- c. Nilgiri
- d. Manas

Answer:

Option d

Explanation:

- India has a total of 18 Biosphere Reserves. 11 of these are part of UNESCO's World Network of Biospheres under its Man and Biosphere Mission.



I. UPSC Mains Practice Questions

- In the light of the Karnataka state sealing its border for movement from Kerala to avoid the spread of COVID-19 and the subsequent challenge by Kerala of this move in the Judiciary, analyze the associated legal questions and concerns. (10 marks, 150 words)
- Discuss the effect of the national lockdown on the agricultural sector and suggest suitable remedial measures to be taken. (15 marks, 250 words)

