

# 28 Dec 2020: UPSC Exam Comprehensive News Analysis

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## B. GS 2 Related

### Category: HEALTH

#### 1. Daily virus cases below 19,000 after 6 months

##### Context:

- India's daily new COVID-19 caseload dropped below 19,000 after six months.

##### Details:

- The total number of coronavirus cases in India have crossed 10.1 million, but there is a cause for optimism as the number of daily fresh cases has been steadily declining.
- The daily fresh cases hit a peak of 98,000 cases on September 16<sup>th</sup>; and December 26<sup>th</sup> witnessed a registering of 19,000 fresh cases.
- In terms of mortality, it has been noted that 10 States/Union Territories account for three-fourth of new deaths, with Maharashtra being in the pole position registering the most casualties (60) with West Bengal and Delhi following.

### **Total active caseload**

- As per the Health Ministry's data, India's total active caseload has declined to 2.78 lakh (2,78,690) currently. This is the lowest after 170 days.
- India has reported a trend of sustained decrease in the number of active cases. India's present active caseload consists of 2.74% of India's total positive cases.

### **Spatial spread**

- Presently, 76.52% of the new cases are concentrated in 10 states and UTs, with Kerala reporting the highest daily new cases at 3,527. It is followed by Maharashtra with 2,854 new cases.

### **Recovery cases**

- The total recovered cases stand at 97,61,538. The gap between recovered cases and active cases is nearing 95 lakhs and presently stands at 94,82,848, said the Ministry.
- Kerala reported the maximum number of single-day recoveries with 3,782, followed by West Bengal and Chhattisgarh.
- 72.37% of the new recovered cases are observed to be concentrated in 10 States/UTs.

### **Note of caution**

- At the national level, the cumulative test positivity rate is 6.1% and the number stretches beyond 8% in the northeastern states.
- The above numbers suggest that the end is not near.

### **Conclusion**

- The dip in daily fresh cases along with data suggesting that there was no spike nationally despite the festive season, winter and large gatherings without masks, and physical distancing, is a piece of positive news but people and the health authorities cannot get complacent with the emergence of the new coronavirus strain.

## **2. EU nations roll out mass vaccination**

### **Context:**

- The vaccination drive began in European Union countries with the goal of ensuring vaccine coverage for all adults through 2021.

### **Details:**

- Hope has been expressed by several leaders and medical experts that vaccination is a potent weapon in the fight against the virus.
- The EU population is around 450 million and arrangements have been made to secure more than two billion doses with a long term goal of injecting all adults during the course of 2021.
- The vaccination drive has prioritized frontline workers and the elderly owing to their increased vulnerability.

### **Vaccination across the union**

- The lack of coordination among the European governments in the wake of the spread of coronavirus in early 2020 was criticized by many.
- The EU is a political and economic union with 27 countries with well established institutional structures and yet the lack of coordination and communication in the initial phases of the pandemic was astonishing.
- The governments have arrived at a common goal to ensure that there is equal access to the vaccines across the region.
- But even before the vaccination drive kick-started, there were signs of lack of cohesion with Hungary rolling out the vaccine a day prior to what was decided.
- This appeared to have a domino effect with Slovakia and Germany following suit.

## Challenges

### 1. *Vaccine storage*

- The distribution of the Pfizer-BioNTech shot presents tough challenges. The vaccine uses mRNA technology and has to be stored at very low temperatures of about -70 degrees Celsius.
- Maintaining such a low temperature for a long time is bound with difficulties.

### 2. *Vaccine hesitancy*

- Refers to delay in acceptance or refusal of vaccines despite the availability of vaccine services.
- Is complex and context-specific varying across time, place and vaccines.
- Is influenced by factors such as complacency, convenience and confidence.
- Preliminary surveys pointed out to high levels of hesitancy towards the vaccine in countries from France to Poland. Leaders of the 27-country EU are promoting the vaccine and trying to reduce vaccine hesitancy.

## **Category: POLITY**

### **1. Inner-Line Permit is Centre's 'biggest gift to Manipur'**

#### Context:

- The Inner Line Permit was granted to Manipur in 2019.

#### Details:

- The concept of Inner Line Permit (ILP) originates from the Bengal Eastern Frontier Regulation Act (BEFR), 1873.
- A concept drawn by colonial rulers, the Inner Line separated the tribal-populated hill areas in the Northeast from the plains.
- To enter and stay for any duration in these areas, Indian citizens from other areas need an Inner Line Permit (ILP). Arunachal Pradesh, Nagaland and Mizoram are protected by the Inner Line, and lately, Manipur was added.

#### ILP

- The Inner Line Permit (ILP) is an official travel document issued by the concerned state government to allow inward travel of an Indian citizen into a protected area for a limited period. It is

obligatory for Indian citizens from outside those states to obtain a permit for entering into the protected state.

- The ILP keeps an account of people entering the state (good for security issue), can help people with permits move freely, can protect indigenous culture and identity.
- However, the issue of ILP is questionable in the context of a democratic system of governance. Also, several studies have stated that it is not effective for economic growth and case studies have revealed that it has not helped the Nagaland state.

### **Conclusion:**

- It is often said that the present ILP system is based on the archaic laws of the country, and the states with ILP system have not shown any significant performance with regard to the protection of identity and property rights of the indigenous people.
- Apart from that, there seem to be some dilemmas between the market economy, democracy and ILP system.
- Experts have called for discussion over the implementation of the ILP system involving all stakeholders.

## **C. GS 3 Related**

### **Category: ECONOMY**

#### **1. Govt. defends new rule under GST**

##### **Context:**

- The new GST rule has come under scrutiny for being biased against small businesses.

##### **Details:**

- The new rule introduced by the Government under the Goods and Services Tax (GST) regime mandates cash payment of at least 1% of tax liabilities for businesses with a turnover of over ₹50 lakh a month, instead of using their input tax credits to discharge their entire tax dues.

##### **Government's stand**

- The Central government has defended the new rule stating that these fears were unwarranted and “only risky or suspicious dealers and fly-by-night operators” would be affected by the new rule.
- Revenue Department sources claim that the move intends to curb fake GST invoice fraud. Several entities with a turnover of ₹6 crores a year (or ₹50 lakh a month) would be excluded from the ambit of the rule.
- Official data suggest that just four lakh taxpayers supply a value greater than ₹50 lakhs a month, while only around 1.5 lakh of those pay less than 1% tax in cash.
- Further, it was said that the new rule will impact 45,000 units and this amounts to 0.37% of the total businesses registered in the GST system.

##### **Concerns**

- The criticism came in from all quarters. Several chartered accountants and taxpayers over social media have expressed concerns that the mandatory cash payment would adversely affect small businesses.
- This could lead to an increase in their working capital requirement and make GST a more complex indirect tax system than what it already is.

## D. GS 4 Related

*Nothing here for today!!!*

## E. Editorials

**Category: HEALTH**

### 1. Towards an effective vaccination distribution policy

#### Context:

- The vaccination drive in India is expected to take off soon, with the government already releasing the guidelines outlining the priorities to be accorded to certain sections of the population.

#### Details:

- India is aiming to vaccinate around 300 million people against COVID-19 during the course of 6-7 months.
- The vaccine drive will hope to diminish the pace at which the virus spreads as there is no conclusive cure available as of today.
- The vaccine strategy has to be reinforced by a robust mechanism to deliver and also adequate manpower to carry out the vaccination drive.

#### Fine prints of the vaccine drive

- The scale of vaccination is set to be graded with identified beneficiaries to be given preference.
- The health care workers have been given the priority as they are the frontline personnel and are exposed to the virus on a very frequent basis and at a proximate distance.
- The elderly population follow the health care workers, people above the age of 50 are considered under this, with preference being given to those that are aged 60 and above.
- This first phase of vaccination is expected to cover up to 30 crore people. This will mean that roughly 20% of the population will be vaccinated by July or August 2021.

#### Vaccine dosage

- The vaccines that are presently earmarked for administering require two doses, thus the government will have to procure 600 million doses.
- The Pune's Serum Institute of India is the world's largest producer of vaccines. According to several reports, the government has already struck a deal with the Serum Institute to acquire 500 million doses of the AstraZeneca vaccine.
- Emergency authorization for this vaccine is expected to be granted to meet the exigencies.
  - Under exceptional circumstances such as

- A 'Rare Disease'
- Massive disease outbreak
- No proven vaccine or drug available
- Evidence of a drug or vaccine that is tested in a country and has yielded desired results
- A country neither has the financial resources nor the personnel to conduct solid clinical trials to a drug/vaccine that has undergone thorough clinical trials in another country
- The above-mentioned circumstances allow health regulators to issue accelerated approvals under EUA.
- There are options elsewhere as well, with the development of Bharat Biotech's Covaxin and the Russian Sputnik V whose clinical trials in India are being conducted by Reddy's Labs.
- The concerns of supply shock are unwarranted and misplaced.
- There have been several observations made with regard to the proposed triage scheme in administering the COVID-19 vaccine, one such observation being the cost-benefit ratio of giving priority to the elderly population.

### Who gets priority?

- The government's strategy of giving priority to front-line workers and elderly people has been prevalent in countries like the US and the U.K, the two major countries that have been the leaders in the COVID-19 vaccination drive.
- The priority accorded to them is based on the vulnerability they encounter.
- Core objectives that underline a vaccination drive are:
  - Ensuring protection to those vaccinated, and
  - Minimization or at least slow down the speed and spread of the viral transmission.
- The objectives can be broadly summarized as providing vaccination to those who have high levels of exposure and also act as active disease vectors since they interact with large numbers of people.
- The above two objectives align in case of the frontline workers, in terms of vulnerability they face and their infecting capacity owing to them coming in contact with the infected people on a daily basis.
- However, the priority given to older people may not actually be justified along with the objectives of a vaccination drive highlighted above.
- The elderly are less mobile, have a lower level of social interaction, and are hence less likely to spread the virus.
- It is common knowledge that a younger person who interacts with a larger number of people is both more likely to be infected and subsequently infect others.
- The above analysis suggests that densely populated areas with poor health access must be accorded first priority.
- A case in point will be the Dharavi slum — should be receiving far more attention than they are likely to get under the current strategy.
- However, this appears to be a difficult trade-off but one that could be more potent in dealing with the pandemic

### Involving private hospitals

- The government's procurement and distribution strategy has been limited to procuring solely from domestic sources and to depend entirely on public resources for distribution without any participation from private hospitals.
- The government appears to have planned to carry the full burden of the cost of vaccination. It is a commendable step because it will ensure accessibility to all.



- However, the Government has not taken into the equation a possibility of a foreign pharmaceutical company offering to be a part of the vaccination drive and also seeking permission to import and sell (for a profit) to those who can afford it.

### **How will private sector participation benefit?**

- A move to allow private players to be a part of the procurement and distribution mechanism based on the ability to pay will attract criticism on the grounds that it is catering to the interests of the richer groups in the population.
1. ***Additional supplies***
    - a. However, objective analysis will reveal that allowing the private sector to provide additional supplies of the vaccine would be beneficial.
    - b. The grant of authorization to private providers will increase the availability of medicine to the general population.
    - c. This has to be also backed with the government continuing to procure all available domestically produced vaccines and supply them through its own distribution channels.
    - d. The Government's distribution strategy should not waver, it has the responsibility to ensure the availability of vaccine for the poor.
    - e. This move could potentially clear the decks for quicker and more efficient vaccine administration as the individuals who can afford would opt out of the government distribution system.
  2. ***Check on transmission***
    - a. With a potential increase in the number of people falling under the umbrella of vaccination, the lower will be the speed of virus transmission amongst the non-vaccinated, thus providing wider protection.

### **Will private suppliers be willing to participate?**

1. ***A healthy supply of vaccines***
  - The fact that regulatory authorities have authorised the emergency use of the Moderna vaccine across the U.S. showcases that vaccine supply in future will be able to meet the demand.
  - Numerous other vaccines have also been conducting Phase 3 trials and there is a strong possibility that there will be a major boost in the global supply of COVID-19 vaccines.
2. ***The cost of vaccines***
  - The vaccination drive has begun in the European Union with the goal to vaccinate all adults during the course of 2021.
  - The prices that the European Union has agreed to pay for leading COVID-19 vaccines are actually substantially lower than the prices that Moderna and Pfizer, for example, have been quoting to other countries.
  - Thus with the cost going down, the procurement is not going to be an expensive process.
  - Centralised purchasing will be essential to utilise the bargaining power associated with the size of the market.

### **Conclusion**

- The government must examine the principle underlying the triage scheme and whether private players should be allowed space.

## 2. Essential dry run

### Context:

- The phase-3 data of two COVID-19 vaccines developed by Indian manufacturers will be submitted to allow health regulators to issue accelerated approvals under Emergency Use Approvals (EUA).

### Details:

- As India prepares to roll out vaccination against the coronavirus, the submission of phase-3 data by two indigenous manufacturers bodes well.
- In the event of even one vaccine getting the regulatory approval, a countrywide immunization programme shall begin soon after.
- Constant, long-term monitoring of adverse events after vaccination is essential.

### Unique vaccination exercise

- Vaccination of different sections of the population has been prevalent in India for years together.
- Government of India programmes like Pulse polio programme or [Universal Immunization Programme](#) have been carried out for a number of years on a large scale.
- However, the COVID-19 vaccine rollout will be unique as it is going to be implemented independently.
- Since numerous aspects of the COVID-19 vaccination programme are new and untested — vaccinating millions of adults belonging to specific groups, administering two doses of the vaccine a few weeks apart, and the process of enrolling the recipients and rolling out the immunisation programme — the government has rightly decided to undertake a dry run for vaccine administration.

### COVID-19 vaccination dry run

- Four states, namely, Andhra Pradesh, Assam, Gujarat, and Punjab will witness the dry run in the following weeks.
- The dry run is expected to provide the administrators with an opportunity to test the vaccination process and ascertain the usage of the Co-WIN IT platform for the management of the entire vaccination process.
- The Co-WIN IT platform will be useful for tasks such as data entry, allocation of date and time and a drill of session sites with test beneficiaries.
- The linkages between planning, implementation and reporting mechanisms will also be tested.
- The individuals belonging to prioritized four high-risk groups have to register themselves as the recipients on the Co-WIN platform.
- The COVID-19 vaccine will be administered to 100 adults at each designated site on a pre-defined date and time unlike the vaccination of children under the Universal Immunization Programme.
- Prior to vaccination, the bonafide of the registered adults are to be determined. The IT platform has to generate the date and time when people can receive the second dose.

### Monitoring and follow-up of the vaccinated

- When more than one vaccine becomes ready to be administered, it is pertinent to ensure that people receive the same vaccine twice.
- As the COVID-19 vaccine has not undergone a long-term investigation during the clinical trials, it is important that those who have been administered the vaccine are followed up for any adverse reaction and a clear reporting mechanism has to be set up.
- The indigenously manufactured vaccines that are at advanced stages of testing do not require ultra-low temperatures for delivery and storage, unlike the Pfizer-BioNTech.



- The Pfizer-BioNTech vaccine uses mRNA technology and has to be stored at very low temperatures of about -70 degrees Celsius.

### **Conclusion**

- The already existing infrastructure of the Universal Immunisation Programme in most districts can be utilized for storing the vaccines.
- The Phase-1 of vaccination programme aims to vaccinate 300 million people across the four high-risk groups, thus a total of 600 million doses will be required in the first phase.
- This exercise should therefore look at creating additional storage capacity at these facilities to store millions of COVID-19 vaccines, as facilities for vaccine storage cannot be dedicated to a single vaccine.

## **F. Prelims Facts**

*Nothing here for today!!!*

## **G. Tidbits**

*Nothing here for today!!!*

## **H. UPSC Prelims Practice Questions**

**Q1. Consider the following statements:**

1. Sudan opens to the Persian Gulf.
2. Sudan shares its land borders with Somalia.

**Which of the following statement is/are *incorrect*?**

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

**CHECK ANSWERS:-**

**Answer: c**

**Explanation:**



Q2. Human Freedom Index is released by

- a) World Bank
- b) World Economic Forum
- c) International Monetary Fund
- d) None of the above

**CHECK ANSWERS:-**

**Answer: d**

Explanation:

The index was published by an American think tank Cato Institute and the Fraser Institute in Canada. It takes into account 76 indicators of personal, civil, and economic freedoms to rank 162 countries from 2008 to 2018.

Q3. Consider the following statements about the Inner Line Permit (ILP):

- 1. The Inner Line Permit (ILP) has its genesis in the State Reorganization Act 1956.
- 2. All the states in the northeast have the Inner Line Permit.

**Which of the following statements is/are correct?**

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

**CHECK ANSWERS:-**

**Answer: d**

Explanation:

- Arunachal Pradesh, Nagaland and Mizoram are protected by the Inner Line, and lately, Manipur was added (in December last year).
- The concept originates from the Bengal Eastern Frontier Regulation Act (BEFR), 1873.

Q4. If one is travelling from Andhra Pradesh to Punjab, what is the minimum number of states one has to pass through including the source and destination states?

- a) 6
- b) 7
- c) 5
- d) 4

**CHECK ANSWERS:-**

**Answer: c**

Explanation:

Self-explanatory.

## I. UPSC Mains Practice Questions

1. Discuss the administrative challenges associated with carrying out the COVID-19 vaccination drive across the country. (10 marks, 150 words) [GS-2 Health]
2. What is Inner Line Permit? Explain its importance to the northeastern states of India. (15 marks, 250 words) [GS-2 Polity]