

TATHASTU ICS

CURRENT AFFAIRS

16 AUGUST

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REBOOTING THE CODES: ON THE IPC, CRPC AND EVIDENCE ACT

SOURCE: [TH](#), [PIB](#)

WHY IN NEWS?

The Centre on August 11 introduced three new Bills in the Lok Sabha that propose a complete overhaul of the country's criminal justice system. The three Bills are set to replace the Indian Penal Code (IPC), 1860; the Code of Criminal Procedure (CrPC), 1973 and the Indian Evidence Act, 1872.

DETAILS OF THE BILL:

Centre introduces three new Bills in Lok Sabha for comprehensive criminal justice system overhaul.

1. Indian Penal Code (IPC), 1860 replaced by Bharatiya Nyaya Sanhita, 2023.
2. Code of Criminal Procedure (CrPC), 1973 replaced by Bharatiya Nagarik Suraksha Sanhita, 2023.
3. Indian Evidence Act, 1872 replaced by Bharatiya Sakshya Bill, 2023.

Three bills introduced in Lok Sabha

Indian Penal Code (IPC), 1860
TO BE REPLACED BY
Bharatiya Nyaya Sanhita Bill, 2023

- It will have **356 sections** (instead of 511 sections in IPC)
- 175 sections have been amended
- 8 sections have been added, and 22 sections have been repealed

Code of Criminal Procedure (CrPC), 1973
TO BE REPLACED BY
Bharatiya Nagarik Suraksha Sanhita, 2023

- It will have **533 sections** (instead of 478 sections in CrPC)
- 160 sections have been changed
- 9 sections have been added, and 9 sections have been repealed

Indian Evidence Act, 1872
TO BE REPLACED BY
Bharatiya Sakshya Bill, 2023

- It will have **170 sections** (instead of 167 sections in IEA)
- 23 sections have been changed
- 1 section has been added, and 5 sections have been repealed

"From 1860 to 2023, the country's criminal justice system functioned as per the laws made by the British. I can assure the House that these bills will transform our criminal justice system. The aim will not be to punish, it will be to provide justice."
— AMIT SHAH

WHAT NEXT
The three bills will be studied by the standing committee on home affairs, which is chaired by BJP MP Brijlal (who is a retd IPS officer).

111th and 128th reports of Parliamentary Standing Committee emphasized need for criminal law reform through comprehensive legislation

BHARATIYA NYAYA SANHITA BILL, 2023:

Bharatiya Nyaya Sanhita Bill introduces Section **150 criminalizing acts** endangering India's sovereignty, unity, and integrity.

- **Replaces IPC with 356 provisions.**
- **Gang rape punishment** includes 20 years/life imprisonment; minor rape includes Death penalty.
- Offences made **gender-neutral**; introduces capital punishment for mob lynching
- Criminalizes **sexual intercourse** under false marriage pretext, introduces maximum 10-year imprisonment.

- Omission of **adultery offence** in line with Supreme Court's ruling.
- No punishment for '**unnatural sexual offences** against men' due to Navtej Singh Johar ruling.
- **Marital rape exception** retained; constitutional validity challenged in Supreme Court.

BHARATIYA NAGARIK SURAKSHA SANHITA BILL, 2023

- **Replaces CrPC with 533 sections.**
- Ensures **free FIR copies** to accused and victim within 14 days.
- Allows **accused examination** via electronic means; mandates summary trials for petty cases.
- Streamlines **magisterial system** for efficiency.

PRELIMS SPECIFIC

- The Indian Penal Code (IPC) originated during British colonial rule in India in 1860.
- The First Law Commission, led by **Thomas Babington Macaulay**, formulated the IPC in 1837 under the **Charter Act of 1833**.
- After revisions, it was completed in 1850 and presented to the Governor-General of India Council.
- Due to the 1857 Indian Rebellion, its enactment was delayed until October 6, 1860, after further revision **by Barnes Peacock**, who later became the first Chief Justice of Calcutta High Court.
- It became effective on January 1, 1862, across British India, but princely states retained their own systems until the 1940s.

BHARATIYA SAKSHYA BILL, 2023

- Replaces Indian Evidence Act with 170 sections.
- Admits electronic/digital records as evidence with legal validity.
- Expands secondary evidence to include mechanical copies, oral accounts, etc.

ISSUES WITH THE PREVIOUS ACTS:

- **Outdated definitions:** Some of the definitions in the IPC are outdated and do not reflect the realities of modern life.
For example, the definition of "rape" still only includes penile penetration, even though other forms of sexual assault are just as harmful.
- **Inadequate punishments:** The punishments for some crimes in the IPC are inadequate, especially for serious crimes like rape and murder.
- **Over criminalization:** The IPC contains a wide range of offenses, many of which are rarely or never prosecuted.
- **Lack of transparency:** The CrPC does not provide enough transparency about how the criminal justice system works. This can make it difficult for people to hold the police and courts accountable.

- **Lack of flexibility:** The Evidence Act is not flexible enough to adapt to new technologies and changing social norms. This can make it difficult to get justice in cases involving new crimes or emerging technologies.

CONCLUSION:

There are a number of reasons why it might be considered to remove the IPC, CrPC, and Evidence Act. One reason is that they are outdated and do not reflect the realities of modern life. Additionally, the punishments for some crimes in the IPC are inadequate, especially for serious crimes like rape and murder. This can lead to a lack of deterrence and a sense of impunity among criminals.

VALUE ADDITION

YEAR	CHANGES INTRODUCED
1898	The CrPC was first enacted.
1950	Bail was introduced.
1973	Anticipatory bail and speedy trial were introduced.
2005	Gender-sensitive justice was introduced.
2008	Cybercrime was introduced.

IS ANTIMICROBIAL RESISTANCE BEING MADE WORSE BY AIR POLLUTION?

SOURCE: [THE WASHINGTON POST](#) , [NATIONAL LIBRARY OF MEDICINE](#) , [UNEP](#)

WHY IN NEWS?

A new global analysis suggests a correlation between environmental pollution and rising antibiotic resistance, which is the 'next global threat' according to experts.

CORRELATION BETWEEN AIR POLLUTION AND AMR

- PM2.5, tiny particles causing health issues globally, could lead to the emergence of antimicrobial resistance (AMR). - **Each 1% rise in PM2.5 leads to 0.5-1.9% AMR increase.**
- **A 10% rise in air pollution linked to a 1.1% increase in AMR across countries.**

ANTIMICROBIAL RESISTANCE:

- Antimicrobial resistance (AMR) **arises when microorganisms develop strategies to defend against the impacts of antimicrobial agents** (medications employed for treating infections).
- Fungi, bacteria, viruses, and protozoa can develop resistance to antibiotics, and if they exhibit **resistance to multiple antimicrobials**, they are categorized as **multidrug resistant**.
- AMR is accountable for a **higher mortality rate** than the combined toll of malaria and HIV/AIDS.
- Linked to **1.27 million direct fatalities** and approximately 4.95 million related fatalities worldwide.



CAUSES OF AMR:

1. **Overuse and Misuse of Antibiotics:** A study published in the journal BMC Public Health found that nearly 73% of antibiotic sales in India occur without a prescription.
2. **Inadequate Infection Control:** Lack of proper sanitation and hygiene practices in healthcare facilities. The Indian Journal of Medical Microbiology reported that

WHAT'S AMR?

Resistance of a micro-organism to an antibiotic that was originally effective in treating infections caused by it

Why India needs to curb antibiotic overuse

- India's bacterial disease burden is highest in the world
- Large population suffers from diseases like diabetes, heart ailments and cancer, making them prone to infections
- 40% children are malnourished and at risk of infections
- More and more drug-resistant bacteria are being identified



3. hospital-acquired infections are a significant concern due to poor infection control practices.
4. **Lack of Awareness and Education:** Limited public knowledge about the appropriate use of antibiotics. According to a study in the Indian Journal of Community Medicine, only around
5. 38% of respondents knew that antibiotics are ineffective against viral infections.
6. **High Burden of Infectious Diseases:** Widespread infections like tuberculosis and diarrheal diseases leading to high antibiotic use. India has the highest global burden of tuberculosis, according to the WHO, necessitating extensive antibiotic use.
7. **Inadequate Regulatory Oversight:** Lack of stringent regulations on antibiotic sales and prescriptions.
8. **Agricultural Antibiotic Use:** A study published in Environmental Health Perspectives indicated that India consumes a significant amount of antibiotics for food animal production.
9. **Self-Medication Practices:** A study in the Journal of Clinical and Diagnostic Research found that 58% of respondents engaged in self-medication practices with antibiotics.
10. **Inadequate Diagnostic Capacity:** A study published in PLOS ONE showed that over 50% of patients with suspected tuberculosis in India receive antibiotics before a diagnosis.

PRELIMS SPECIFIC

HEALTH SECTOR :

- **The State List:** It includes subjects under which the state may make laws. Public order, police, public health and sanitation; hospitals and dispensaries are few subjects that come under the state list.
- The health sector was shifted to the State List through the 42nd Amendment of the Constitution of India, which was passed in 1976. The amendment added five subjects to the State List, including **health, education, forests, weights and measures, and protection of wild animals and birds.**

GLOBAL ANTIMICROBIAL RESISTANCE SURVEILLANCE SYSTEM :

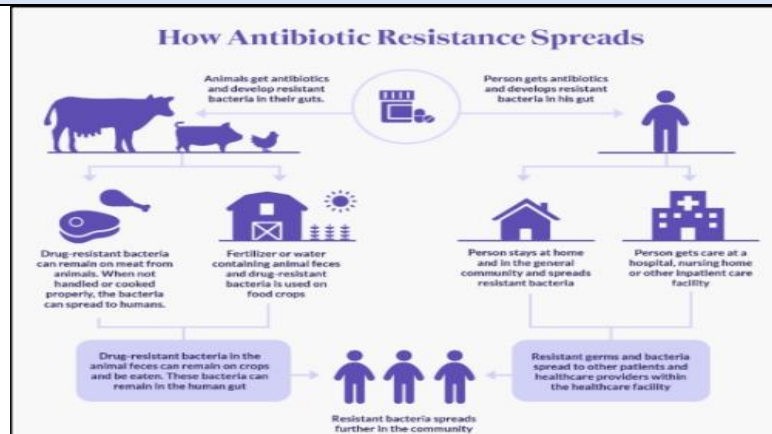
The Global Antimicrobial Resistance Surveillance System (GLASS) is a global initiative led by the World Health Organization (WHO) to collect and analyze data on antimicrobial resistance (AMR). GLASS aims to provide countries with the information they need to develop and implement effective AMR control measures.

GLASS collects data on a range of AMR indicators, including:

- The prevalence of AMR in different pathogens, such as bacteria, viruses, and parasites.
- The use of antimicrobials in humans and animals.
- The impact of AMR on human health.

IMPACTS OF ANTIMICROBIAL RESISTANCE:

1. **Increased Mortality:** AMR is responsible for more than 700,000 deaths globally each year. By 2050, this number could surge to 10 million deaths annually if AMR is not adequately addressed.
2. **Treatment Complications:** Resistant infections are harder to treat and may require longer hospital stays, leading to increased healthcare costs and patient suffering.
3. **Limited Treatment Options:** As resistance grows, existing antibiotics become ineffective, limiting the options available for treating infections.
 - a. Example: Antibiotic-resistant gonorrhoea strains have emerged, making it challenging to treat this common sexually transmitted infection.
4. **Economic Burden:** AMR places a substantial financial burden on healthcare systems and economies. The global economic impact of AMR is estimated to be around \$100 trillion by 2050 if not addressed effectively.
5. **Agricultural Impact:** AMR affects livestock health, impacting food production and safety.
6. **Diminished Surgical Procedures:** Antimicrobial resistance can lead to increased post-surgery infections and complications, discouraging medical interventions.
7. **Reduced Effectiveness of Medical Interventions:** Procedures like chemotherapy, organ transplantation, and surgeries become riskier due to the potential for infection.
8. **Global Health Security Threat:** AMR jeopardizes the control of infectious diseases, undermining healthcare systems and increasing the risk of outbreaks.
 - a. Example: Multi-drug resistant strains of tuberculosis are a global health security concern, hindering efforts to eradicate the disease.
9. **Increased Healthcare Costs:** The need for specialized treatments and longer hospital stays drives up healthcare expenses. Treating antibiotic-resistant infections can be up to 60% more expensive than treating non-resistant infections.



AIRBORNE TRANSMISSION OF PM 2.5 :

- Airborne spread linked to premature deaths, economic losses and environmental pollution.
- Airborne pollutants facilitate transport of antibiotic-resistant bacteria and genes.
- Pollutants carry antibiotic-resistant genes, inhaled by humans, strengthening bacteria's resistance.
- PM2.5 particles penetrate bodies, causing chronic conditions like cancer, heart disease, and asthma

EFFORTS DONE BY INDIA TO TACKLE AMR:		
Efforts to Tackle AMR in India	Description	Impact/Outcome
National Action Plan on Antimicrobial Resistance (2017-21)	Launched in 2017, the plan outlines strategies for AMR containment in healthcare, animal husbandry, and agriculture sectors. It emphasizes prudent use of antibiotics, infection prevention, and surveillance.	Increased awareness and coordinated actions across sectors to tackle AMR.
Promotion of Responsible Antibiotic Use	Guidelines issued for rational use of antibiotics in healthcare, agriculture, and veterinary sectors. Regulatory mechanisms set up to restrict over-the-counter sales of antibiotics.	Improved antibiotic stewardship and reduced inappropriate antibiotic usage.
Strengthening Surveillance	Establishment of the Indian Council of Medical Research (ICMR) Antimicrobial Resistance Surveillance Network (AMRSN) to monitor trends of drug resistance in hospitals.	Enhanced monitoring of drug resistance patterns for informed decision-making.
National Health Policy 2017	The policy provides specific guidelines to curb over-the-counter antibiotic sales and encourages stringent prescription practices.	Improved regulation of antibiotic use and reduced misuse.
Infection Prevention and Control	Implementation of infection control practices in healthcare settings to prevent hospital-acquired infections and reduce the need for antibiotics.	Reduced infection rates and dependence on antibiotics for treatment.
Education and Awareness	Campaigns to raise awareness among healthcare professionals, veterinarians, farmers, and the public about AMR, its consequences, and prevention measures.	Increased knowledge about AMR and improved public health practices.
Research and Development	Government initiatives to support research on new antibiotics, diagnostics, and alternative therapies. Encouragement of innovation through collaborations with academia and industry.	Development of new treatment options and technologies to combat drug-resistant infections.
Regulation of Veterinary Antibiotics	Implementation of the National Action Plan for Containment of Antimicrobial Resistance in Veterinary Sector to regulate the use of antibiotics in animal husbandry.	Control over inappropriate antibiotic use in animals and reduction of AMR transmission to humans.

NATIONAL EDUCATION POLICY, 2020 & PM-USHA

SOURCE: [TH](#), [Ministry of Education](#), [PIB](#)

WHY IN NEWS?

Kerala, Tamil Nadu, and West Bengal, along with other states, have not yet signed an MoU with the Union Education Ministry for implementing the **National Education Policy, 2020**, to receive funds totalling ₹13,000 crore over three years under the **Pradhan Mantri Uchchatar Shiksha Abhiyan (PM-USHA)**. The scheme aims to enhance access, equity, and quality in higher education institutions, replacing the **Rashtriya Uchchatar Shiksha Abhiyan (RUSA) initiative**. The RUSA scheme, launched in 2013 and 2018, has now evolved into PM-USHA to align with the National Education Policy.

ABOUT NATIONAL EDUCATION POLICY 2020:

- **NEP 2020 Introduction:**
 - The National Education Policy (NEP) 2020 is India's inaugural education policy of the 21st century.
 - It replaces the previous National Policy on Education (NPE) 1986.
 - The policy was developed under the guidance of a committee led by **Dr. K Kasturirangan** from the Ministry of Education.
- **Reforms and Scope:**
 - NEP 2020 introduces a series of reforms for both school and higher education.
 - It includes adjustments in technical education to address contemporary requirements.
- **Fundamental Pillars:**
 - NEP 2020 is founded on **five essential pillars: Access, Equity, Quality, Affordability, and Accountability**.
- **Alignment with Sustainable Development:**
 - The policy is aligned with the 2030 Agenda for Sustainable Development.
 - Its objective is to transform India into a thriving knowledge society and a global knowledge superpower.
- **Educational Vision:**
 - NEP 2020 aims to foster a more comprehensive, adaptable, and interdisciplinary educational system.
 - This approach applies to both schools and colleges, fostering the development of each student's distinctive potential.

TARGETS UNDER NEP:

- a. Ensure comprehensive education coverage from **Early Childhood Care and Education (ECCE)** to Secondary Education **by 2030**, in accordance with SDG 4.
- b. Achieve the acquisition of **Fundamental Learning & Numeracy Skills through a National Mission by 2025**.
- c. Attain a **100% Gross Enrolment Ratio (GER)** from Pre-School to Secondary Level by 2030.
- d. Aim for a **50% GER in Higher Education by 2035**.
- e. **Reintegrate 2 Crore children into mainstream education** using the open schooling system.
- f. Prepare teachers for assessment reforms by the year 2023.
- g. Establish an inclusive and equitable education system by 2030.

WHAT IS THE NEED FOR MOU AND CONCERNS RAISED BY STATES?

- The Memorandum of Understanding (MoU) encompasses clauses that cover the planning, execution, and monitoring aspects, aligning the proposals put forth by the States with the National Education Policy (NEP) to achieve better cohesion.
- The program introduces flexibility for States and Union Territories to customize activities in accordance with their specific requirements, streamlining various components to enhance the allocation of resources with improved efficiency.
- Furthermore, States have the authority to identify focus districts based on indicators such as enrolment ratios, gender parity, and the proportions of marginalized communities within the population.

CONSTITUTIONAL PROVISIONS ON EDUCATION

Article 45: This article states that the state shall endeavour to provide free and compulsory education for all children until they complete the age of fourteen years.

Article 21A: This article, which was inserted by the **86th Amendment in 2002**, declares that the right to education is a fundamental right for all children between the ages of six and fourteen years.

Article 30: This article guarantees the right of minorities to establish and administer educational institutions of their choice.

Article 350A: This article, which was inserted by the 86th Amendment in 2002, requires the state to provide instruction in the mother-tongue at the primary stage of education to children belonging to linguistic minorities.

VALUE ADDITION: Under the NEP 2020, the name of the Ministry of Human Resource and Development (MHRD) was changed to Ministry of Education (MoE).

Concerns Raised:

- Some State governments have expressed dissatisfaction with the MoU, as **it fails to address the crucial necessity for additional funding** to effectively implement the reforms mandated by the NEP.
- Despite being accountable for 40% of the expenses under the Pradhan Mantri Uchchatar Shiksha Abhiyan (PM-USHA), the **MoU does not offer clear insights into the funding mechanisms designed to support the changes aligned with the NEP.**

PROS OF NEP 2020	CONS OF NEP 2020
1. Holistic Education: Emphasizes holistic development and critical thinking.	Language Barrier: Promoting regional languages could be difficult in linguistically diverse regions.
2. Flexibility: Offers flexibility in choosing subjects and interdisciplinary studies.	Resource Allocation: Adequate funding might be a challenge for full implementation.
3. Early Childhood Education: Focuses on early childhood care and foundational learning.	Commercialization Risk: Increased privatization could lead to inequality.
4. Vocational Skills: Integrates vocational training to enhance employability.	Implementation Challenges: Enforcing policy changes uniformly across diverse regions can be difficult.
5. Assessment Reforms: Shifts from rote learning to competency-based assessment	Infrastructure Gap: Resource disparities might hinder effective implementation

KEY FEATURES OF PM-USHA SCHEME:

Feature	Description
Objective	Enhance access, equity, and excellence in State higher education institutions with increased efficiency, transparency, accountability, and responsiveness.
Phases	Phase 1 launched in 2013, Phase 2 launched in 2018.
Renamed as	The scheme has been renamed from Rashtriya Uchchatar Shiksha Abhiyan (RUSA) to Pradhan Mantri Uchchatar Shiksha Abhiyan (PM-USHA).
Funding	Centrally Sponsored Scheme with funding shared between the central government and the States/UTs.
Components	Supports various components like infrastructure development, creation of research centers, faculty recruitment, curriculum reforms, etc.
Flexibility	States/UTs have flexibility to tailor activities according to their specific needs.
Focus Districts	States can identify focus districts based on indicators like enrollment ratios, gender parity, and marginalized community proportions.
Higher Education System	Aims to improve overall higher education system, enhance quality, and promote holistic development.
Alignment with NEP	Aims to align State proposals with the National Education Policy for better integration and implementation.
Accountability	Emphasizes transparency, efficiency, and accountability in utilizing allocated funds.
Monitoring	Includes provisions for planning, implementation, and monitoring of the scheme's progress.

WAY FORWARD:

Radhakrishnan Commission (1948–1949): The commission recommended the integration of secondary education and higher education by setting up UGC. It was set up to inquire into the requirements of higher education in India to develop democratic values, peace and harmony.

- **Kothari Commission (1964-1966):** It was headed by D.S. Kothari, the former chairman of the University Grants Commission. The commission recommended a 10+2+3 structure for school education and a 3+3+2+3 structure for higher education. It also recommended the establishment of the National Council of Educational Research and Training (NCERT)
- **National Policy on Education (1986):** This policy was adopted by the Government of India in 1986. It set out a number of goals for the education sector, including universalization of primary education, improvement of the quality of education, and expansion of higher education
- **Acharya Narendra Deva Committee (1971):** This committee was set up in 1971 to review the functioning of the University Grants Commission (UGC). It was headed by Acharya Narendra Deva, the former Vice Chancellor of Lucknow University. The committee recommended that the UGC should be given more autonomy and that it should be given a wider range of responsibilities.
- **TSR Subramanian Committee** made a number of recommendations on education, including:

Universalization of education: The committee recommended that the government should focus on universalizing education by providing free and compulsory education to all children up to the age of 18 years.

Improvement of quality of education: The committee recommended that the government should focus on improving the quality of education by providing better infrastructure, more qualified teachers, and more innovative teaching methods.

Restructuring of the education system: The committee recommended that the government should restructure the education system by introducing a 5+3+3+4 model, which would make school education more flexible and cater to the needs of different learners.