



# DAILY CURRENT AFFAIRS

**03 OCTOBER, 2023**

**S.NO. TOPIC**

1.	COUNTING DEATHS IN INDIA'S PRISONS
2.	BIHAR CASTE CENSUS
3.	NOBEL PRIZE IN PHYSIOLOGY OR MEDICINE (2023)

## COUNTING DEATHS IN INDIA'S PRISONS

 SOURCE: [TH](#)

### WHY IN NEWS?

The Supreme Court Committee on Prison Reforms found that **suicide is the leading cause of 'unnatural' deaths in prisons**. These 'unnatural' deaths encompass **suicides**, as well as deaths due to various other causes such as **assaults, accidents, and natural calamities**.

### REASONS FOR HIGH DEATH RATES IN INDIAN PRISONS:

- **Mental health challenges** and neglect are significant factors contributing to a substantial number of suicides among incarcerated individuals.

- In India, a 2021 report revealed that 69% of prison suicides were linked to mental health issues, highlighting the urgent need for mental health support.

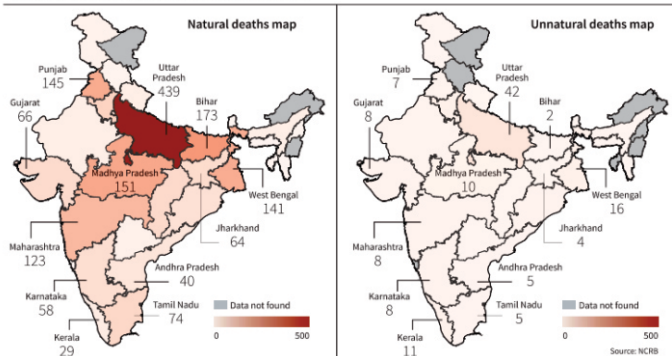
- **Overcrowding in Prisons:** Prisons in India frequently operate well beyond their intended capacity, leading to deplorable conditions and heightened tensions.

- Many prisons are overcrowded at rates exceeding 150%, exacerbating issues related to sanitation and safety.

- **Inadequate Healthcare Facilities:** A lack of adequate medical facilities and trained healthcare personnel results in preventable deaths among inmates.
- **Neglect and Delayed Medical Attention:** Instances of delayed medical responses and substandard care contribute to avoidable fatalities in the prisons.
- **Violence and Assaults in Indian Prisons:** Incidents of inmate-on-inmate violence and altercations involving prison staff can lead to fatalities. Several high-profile incidents in Indian prisons have highlighted the dangers of violence within these facilities.
- **Limited Access to Legal Aid:** Challenges in accessing legal representation affect the medical care and overall outcomes of inmates in the prisons.
- **Poor Infrastructure:** Inadequate safety measures and deficiencies in prison infrastructure heighten risks faced by inmates.

### The deaths of inmates in prisons in 2021

The two maps below show the number of 'natural' and 'unnatural' deaths of inmates in prison in some of the major States in the country. U.P. recorded the highest number of overall deaths, with 481 inmates dying in 2021.



### WHAT HAS GOVERNMENT DONE SO FAR AND FUTURE STEPS FOR REDUCING THE DEATH RATES?

- ❖ **RIGHTS TO HEALTHCARE IN INDIAN PRISONS:** The **Model Prison Manual of 2016** and the **Mental Healthcare Act of 2017** recognize inmates' rights to healthcare, including investing in healthcare facilities, establishing mental health units, training officers in basic and emergency care, and implementing suicide prevention programs.

- The Supreme Court, in a 1996 judgment, highlighted the unique challenges faced by prisoners' health. They suffer from a "double handicap" due to limited access to medical expertise and exposure to more health hazards in incarceration.
- ❖ **NHRC ADVISORY ON RISING SUICIDES:** NHRC issued a comprehensive 21-page advisory in June, it emphasized that **suicides in prisons result from both medical and mental health issues.**
- ❖ **STAFFING CHALLENGES IN OVERCROWDED PRISONS:** Reports indicate overflowing prisons in at least 26 states, necessitating a significant increase in both the quantity and quality of staff. The NHRC recommended filling positions such as Prison Welfare Officers, Probation Officers, Psychologists, and Medical Staff, including Mental Health professionals.
- ❖ **STAFF SHORTAGES AND UNEVEN DISTRIBUTION:** sanctioned staff of 3,497 people responsible for over 5.7 lakh prisoners as of September 2023. Moreover, vacancies are unevenly distributed, with some states, like Bihar and Uttarakhand, having over 60% of positions vacant.
- ❖ **ACCESS TO COMMUNICATION AND LITERATURE:** providing inmates with an adequate number of telephones to contact friends and family and granting access to newspapers or periodicals to reduce isolation and harmful activities.
- ❖ **SUICIDE PREVENTION MEASURES:** stringent checks on tools that could be used for self-harm, initial mental health screening upon entry into jail, and the installation of CCTV cameras to monitor high-risk inmates.

#### COMMITTEE AND RECOMMENDATIONS ON PRISON REFORMS:

COMMITTEE	RECOMMENDATIONS
<b><i>ALL INDIA COMMITTEE ON PRISON REFORMS</i></b>	<ol style="list-style-type: none"> <li>1. Improve jail conditions by providing <u>proper accommodations for clothing, hygiene, food, and ventilation.</u></li> <li>2. Create an <u>All-India Service named the Indian Prisons and Correctional Service</u> to ensure proper training and division of prison staff nationwide.</li> <li>3. Encourage <u>regular public and media visits to prisons for firsthand insights and collaboration on rehabilitation initiatives.</u></li> <li>4. <u>Minimize the number of prisoners awaiting trial</u> and separate them from convicts.</li> <li>5. <u>Expedite trials and liberalize bail provisions</u> to reduce the population of undertrials.</li> <li>6. <u>Establish open jails in each state and UT.</u> Send lifers with a positive prognosis to semi-open and open prisons.</li> </ol>

**LAW COMMISSION OF INDIA (268TH REPORT)**

1. Suggested releasing persons arrested for crimes with sentences of up to seven years after serving one-third of their time and those with longer sentences after serving half of their time.

2. Discouraged mechanical remand orders and unnecessary arrests by magistrates and police.

**JUSTICE AMITAVA ROY COMMITTEE**

1. Proposed the establishment of special fast-track courts to handle minor offences pending for over five years.

2. Recommended the release of individuals charged with minor crimes, granted bail, but unable to secure surety, on a Personal Recognizance (PR) Bond.

3. Called for the creation of a national mission for legal reforms and justice delivery.

**KRISHNA IYER COMMITTEE ON PRISON REFORMS**

1. Advocated for the recruitment of more women into the police force, recognizing their unique role in dealing with women and child criminals.

**WAY FORWARD AND BEST PRACTICES AROUND THE WORLD:**

1. **MENTAL HEALTH INTEGRATION:** Example: Norway emphasizes rehabilitation and offers mental health support to inmates.
2. **OVERCROWDING REDUCTION:** Example: Germany's approach by investing in alternatives to imprisonment, such as community service and electronic monitoring, to reduce overcrowding.
3. **HEALTHCARE ENHANCEMENT:** Example: Netherlands, where healthcare services within prisons are comparable to those outside. Invest in well-equipped medical facilities and trained staff.
4. **TRANSPARENCY AND OVERSIGHT:** Example: UK's Independent Monitoring Boards, comprised of volunteers who regularly inspect prisons and report on conditions, ensuring transparency and accountability.
5. **STAFF TRAINING:** Example: Canada's Correctional Service, which provides extensive training to its staff, including medical professionals, on emergency response and inmate well-being.
6. **SUICIDE PREVENTION PROGRAMS:** Example: Sweden, includes comprehensive risk assessments, mental health care, and dedicated staff for at-risk inmates.
7. **LEGAL REFORMS:** Example: New Zealand's approach to bail reforms, prioritizing community-based options over pre-trial detention and ensuring fair treatment of undertrial prisoners.
8. **HUMAN RIGHTS COMPLIANCE:** Example: Embrace the principles outlined in the United Nations Nelson Mandela Rules, which set international standards for the treatment of prisoners.
9. **COMMUNITY ENGAGEMENT:** Example: Sweden's practice of allowing inmates to maintain family ties and community connections, which aids in rehabilitation and reintegration.

## BIHAR CASTE CENSUS

SOURCE: [TH](#)

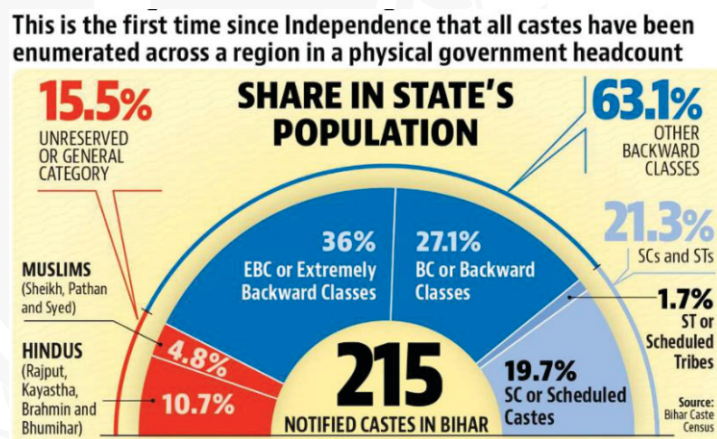
### WHY IN NEWS?

The Bihar government revealed the results of its caste survey, putting the combined **OBC strength in the state at 63%** which is a 10% leap over their share estimated by the 1931 census, the last time caste enumeration was done in the country.

- ❖ A caste census involves the incorporation of a caste-wise breakdown of India's entire population, encompassing all castes, particularly the Other Backward Classes (OBCs), and not exclusively the Scheduled Castes (SCs) and Scheduled Tribes (STs).
- ❖ The initial separate data on Scheduled Castes (SCs) and Scheduled Tribes (STs) was made available during the 1952 census.
- ❖ The first set of caste census information was disclosed in 1931.
- ❖ In the 2011 census, although a caste census was conducted, the data was not made public.
- ❖ The decennial Census is conducted by the Office of the Registrar General and Census Commissioner, Ministry of Home Affairs.

### KEY FINDINGS OF THE REPORT:

- According to the data released Bihar's total population now stands at a little over 13.07 crore, up from 10-odd crore in the 2011 Census.
- The EBCs (Extremely Backward Classes) makeup 36.01% of this, and OBCs an additional 27.13%.
- The survey also found that Yadavs are the largest group, accounting for 14.27% of the total population.
- The Dalits, or Scheduled Castes, account for 19.65%, higher than expected, while STs comprise 1.68%.
- Those belonging to the "unreserved" category, or the "upper castes", comprise 15.52% of the total population.
- The Muslims, comprise 17.70% of the population while the other religious minorities have a minuscule presence.



### LEGAL TUSSELE IN BIHAR'S CASTE CENSUS:

- ❖ **CRITICS' OPPOSITION TO THE CASTE-BASED SURVEY:**
  - Various petitioners challenged the caste-based survey in the Patna High Court on several grounds, including constitutional violations, privacy infringement, exceeding the state government's authority, political motivations, and unreliable methods.

- The petitioners argued that the state government lacks legal competence to appoint District Magistrates and local authorities for data collection without a notification under Section 3 of the Census Act, 1948, issued by the Central government.
- Assigning a caste identity to all citizens, irrespective of their intention to use state benefits, is deemed unconstitutional, violating the right to identity, dignity, informational privacy, and choice guaranteed by Article 21.

- 📌 Note: Constitution's Entry 69 in the Seventh Schedule's Union List grants sole authority to the central government for conducting a census.
- 📌 The court ruled that the state government lacked the authority to carry out a census since it would encroach upon the legislative authority of the parliament.
- 📌 Distinguishing between a survey and a census - A census involves gathering precise, substantiated information, whereas a survey focuses on gathering and analysing public opinions and perceptions, often targeted towards a particular community.
- 📌 Therefore, the ongoing initiative in Bihar is essentially a census conducted under the guise of a survey.

#### ❖ **HIGH COURT'S VALIDATION OF THE SURVEY:**

- High Court dismissed all petitions opposing the survey
- The Court relied on the Indra Sawhney Case's ruling, stating that identifying caste to address social backwardness under Article 16(4) of the Constitution is not in violation.
- Several petitions have also been filed in the Supreme Court, contesting the Patna High Court's decision upholding the ongoing caste survey.

#### **POSITIVES AND NEGATIVES OF CASTE CENSUS:**

Positives of Caste Census	Negatives of Caste Census
1. <b>SOCIAL INCLUSION:</b> Helps in addressing historical inequalities by identifying marginalized communities and allocating resources accordingly.  <u>The Mandal Commission's recommendations for OBC reservations were based on caste data.</u>	1. <b>PRIVACY CONCERNS:</b> Intrusion into individuals' privacy, as it involves collecting caste-related information.
2. <b>TARGETED WELFARE:</b> Enables targeted welfare programs and affirmative action policies to uplift disadvantaged groups.  <u>EXAMPLE: Kerala's social development initiatives benefiting marginalized groups.</u>	2. <b>POLITICAL MANIPULATION:</b> Can be exploited for political gains, leading to <u>vote-bank politics</u> .
3. <b>DATA-DRIVEN POLICIES:</b> Allows evidence-based policymaking and resource allocation.  <u>EXAMPLE: Tamil Nadu's reservation policies that have improved the socio-economic status of Dalits.</u>	3. <b>COMPLEXITY:</b> India's vast diversity makes it challenging to collect and analyse caste data accurately.
4. <b>EMPOWERMENT:</b> Empowers marginalized communities to assert their rights and demand equitable representation.	4. <b>ETHICAL CONCERNS:</b> Ethical dilemmas related to categorizing individuals by caste.

**EXAMPLE: The Panchayati Raj system ensuring reserved seats for women and marginalized groups.**

**CONCLUSION:**

- ❖ A well-rounded approach to conducting a survey based on caste should focus on creating a transparent ethical framework that gives precedence to safeguarding the privacy and dignity of participants. This can be achieved by obtaining informed consent and upholding confidentiality.
- ❖ Moreover, promoting public awareness through campaigns, conducting periodic assessments, and enhancing capabilities can play a crucial role in achieving a lasting goal of diminishing disparities and promoting societal inclusiveness, in accordance with the principles outlined in the United Nations Sustainable Development Goal-10.

**SOCIO-ECONOMIC AND CASTE CENSUS (SECC):**

The SECC, **conducted in 2011 for the first time since 1931**, aims to survey every Indian family in rural and urban areas. It collects information regarding:

- **Economic Status:** This information helps Central and State authorities establish various deprivation indicators, aiding them in identifying individuals in need of government assistance due to economic hardship.
- **Specific Caste Name:** The survey captures caste details to facilitate the government in reevaluating the economic status of various caste groups, distinguishing those facing greater economic challenges from those in a relatively better position.

**Distinguishing Census from SECC:**

- **Field of Coverage:** While the Census offers a comprehensive portrait of India's population, the SECC functions as a tool for identifying recipients of state support, focusing on socioeconomic conditions.
- **Confidentiality of Data:** Census data is held confidential, whereas SECC data is accessible to government departments for determining eligibility for, or denial of, government benefits.

## NOBEL PRIZE IN PHYSIOLOGY OR MEDICINE (2023)

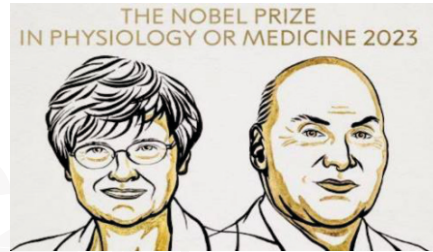
Source: [The Hindu](#), [IE](#)

### WHY IN NEWS?

- **Hungarian** Biochemist **Katalin Kariko** and **American** Physician – Scientist **Drew Weissman** won the **2023 Nobel for Physiology or Medicine** for the development of effective mRNA vaccines against COVID-19.
- In **2022**, the honour went to **Swedish geneticist Svante Pääbo** for his research in the field of **genomes of extinct hominins and human evolution**.

### KEY HIGHLIGHTS:

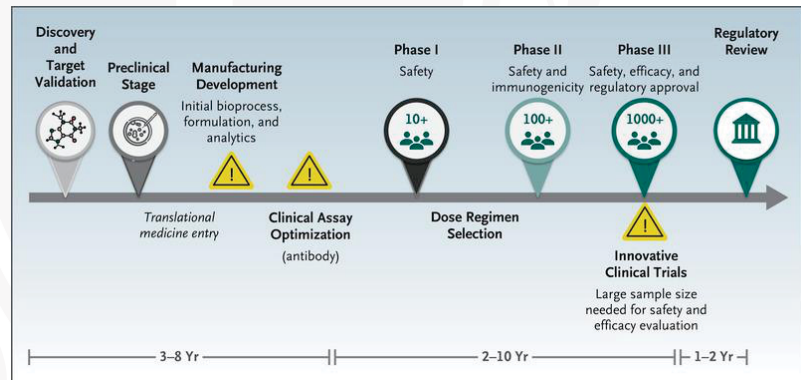
- **Laureates:** Hungarian biochemist Katalin Karikó and American physician-scientist Drew Weissman.
- **Awarded by:** The **Royal Swedish Academy of Science**.
- **Citation:** Awarded for "discoveries concerning **nucleoside base modification** that enabled the **development of effective mRNA vaccines against COVID-19**."



### BASIC PRINCIPLES BEHIND VACCINE FUNCTIONING:

- **Principle of Vaccination:** The main idea of vaccination is to provide protection against a disease-causing pathogen.

- **Antigens in Vaccines:** vaccines contain antigens, these antigens can be derived from the actual pathogen or created synthetically to resemble parts of the pathogen.



- **Stimulate Immune Response:**

- ✓ The weakened or inactivated pathogen is used to create a vaccine that stimulates the immune system.
- ✓ The vaccine is given to individuals through injection or other methods.
- ✓ The immune system recognizes the harmless pathogen and creates antibodies to fight it.

**mRNA Basics:** mRNA stands for **messenger RNA**, a molecule that carries instructions from DNA to a cell's cytoplasm for protein synthesis



- **Memory Cells Formation:** The immune system also forms "memory cells" that remember how to fight the pathogen in the future.
- **Future Protection:** If the person is later exposed to the real pathogen, the immune system remembers how to fight it off effectively.
- **Herd Immunity:** Widespread vaccination can create herd immunity, protecting even those who can't be vaccinated.

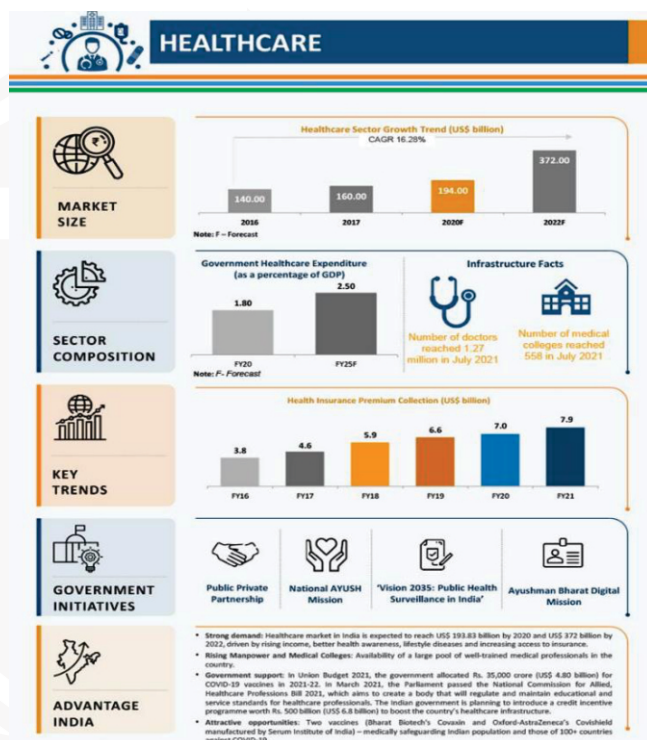
**Late 1980s:** Scientists realized the potential of using modified mRNA for vaccines.

**Vaccine Concept:** The idea was to **inject modified mRNA** to instruct cells to **produce a specific protein**, triggering the immune system to respond and prepare for future encounters.

**COVID-19 Spike Protein:** In the case of **COVID-19**, the spike protein of **SARS-CoV-2** was the target.

### CHALLENGES IN INDIA'S HEALTHCARE SECTOR:

- **INADEQUATE ACCESSIBILITY**
  - ✓ Shortage of Medical Professionals
  - ✓ Lack of **Quality Assurance**
  - ✓ Insufficient **Health Spending**
- **INSUFFICIENT FUNDING**
  - ✓ Limited Financial Resources
  - ✓ Lack of Funding for Research and Development
  - ✓ **Low Healthcare Expenditure (2.1% of GDP)**
- **OPTIMAL INSURANCE**
  - ✓ Lack of Clarity in Health Insurance Concepts
  - ✓ **Underdeveloped Health Insurance Market**
  - ✓ **Rural-Urban Disparity: Unequal distribution of healthcare facilities and professionals.**
- **AGING POPULATION:** Challenges related to **elderly healthcare.**



### WAY FORWARD:

- **Katalin Karikó and Drew Weissman's ground breaking research:**
  - ✓ It paved the way for mRNA vaccines, revolutionizing our ability to combat diseases like COVID-19 and offering potential solutions for other health challenges in the future.
- **Future Prospects:**
  - ✓ Ongoing research is exploring the use of mRNA vaccines for other diseases such as **influenza, dengue, various cancers, and autoimmune diseases.**
- **Versatile Technology:**
  - ✓ The flexibility and speed of mRNA vaccine development have opened doors to combat other infectious diseases.
  - ✓ Future applications may include delivering therapeutic proteins and treating specific cancer types.

**GOVERNMENT RECENT INITIATIVES IN HEALTH SECTOR:**

Initiative	Objective
Allocation of Rs. 89,155 crores in Union Budget 2023-24	Increase budgetary support for the health sector.
Establishment of 22 new All India Institute of Medical Sciences (AIIMS)	Enhance healthcare infrastructure and medical education.
National Health Mission budget increase in 2023-24	Strengthen primary healthcare and disease control programs.
Increased funds for autonomous bodies	Support various healthcare-related organizations and initiatives.
Extension of e-medical visa facility to citizens of 156 countries	Boost medical tourism in India.
Establishment of National Medical & Wellness Tourism Board	Promote medical and wellness tourism in India.
MoU between India and Denmark on cooperation in health and medicine	Foster collaboration and technology development in the health sector.
Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (PM-JAY)	Provide health insurance coverage to economically vulnerable families.
Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)	Ensure quality antenatal care for pregnant women.
National Tuberculosis Elimination Program (NTEP)	Eliminate tuberculosis (TB) from India by 2025.

## **PRELIMS-SPECIFIC**

### **HISTORY OF NOBEL PRIZE:**

- ✓ The Nobel Prizes were **established** in the will of **Alfred Nobel**, a Swedish inventor, engineer, and industrialist.
- ✓ **The first Nobel Prizes** were awarded in **1901**. They included prizes in Physics, Chemistry, Medicine, Literature, and Peace.
- ✓ **Nobel Prizes are awarded in six categories:** Physics, Chemistry, Medicine, Literature, Peace, and **Economic Sciences (added later in 1968)**.
- ✓ **Peace Prize:** The **Nobel Peace Prize is unique** because it is **awarded in Oslo, Norway, unlike the other prizes** which are presented in **Stockholm, Sweden**.
- ✓ **Malala Yousafzai (age 17 years then)** is the **youngest Nobel Prize laureate** among all categories who received the peace prize in **2014 with Kailash Satyarthi**.

### **DIFFERENT TYPES OF VACCINE:**

Type of Vaccine	Purpose	Examples
Inactivated Vaccine	Inactivate pathogen while keeping it recognizable by the immune system	Polio (Salk vaccine), Hepatitis A
Attenuated Vaccine	Weaken pathogen's ability to replicate while triggering an immune response	Measles, Mumps, Rubella (MMR)
Toxoid Vaccine	Target bacterial toxins that cause disease	Diphtheria, Tetanus (DTaP), Pertussis (Tdap)
Subunit Vaccine	Use a specific part of a pathogen, like a protein, to provoke an immune response	Human Papillomavirus (HPV), Hepatitis B
Conjugate Vaccine	Combine bacterial coats with carrier proteins for enhanced immune response	Haemophilus influenzae type B (Hib), Pneumococcal conjugate vaccine (PCV)
Valence Vaccine	Immunize against a single or multiple strains of the same microorganism	Influenza (different strains in a single vaccine)
Heterotypic Vaccine	Use pathogens from other animals to provide protection or mild disease	Cowpox (used by Edward Jenner for smallpox vaccination)
mRNA Vaccine	Utilize genetic material (RNA) to stimulate an immune response	Pfizer-BioNTech (Comirnaty), Moderna