MAINS MATRIX

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Crimes against children surge in Assam, Rajasthan, and Kerala

Source

> **Data Source:** National Crime Records Bureau (NCRB)

- **Time Period Covered:** 2020–2023

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1. **Overall Trend**

   - In **2023**, crimes against children **increased sharply** in:
     - **Assam**
     - **Rajasthan**
     - **Kerala**
   - Overall, crimes against children **rose by 29%** in India (2020–2023).
   - **Key Insight:**
     A rise in the number of cases does not always indicate more crimes — it may also reflect **improved reporting mechanisms**.

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2. **State-wise Summary**

State	% Increase in Crimes Against Children (2023 vs avg 2018–2022)	Key Highlights
Assam	+99.5%	Large jump in child marriage cases after legal reclassification under Prohibition of Child Marriage Act (PCMA).
Rajasthan	+70.1%	Increase mainly under kidnapping and POCSO provisions.
Kerala	+105.9%	Rise mainly in cases registered under POCSO Act.

3. Assam – Child Marriage & Legal Classification Shift

- **Recorded cases doubled** — from ~5,100 (avg 2018–2022) → **>10,000 in 2023.**

- **Major reason:** Reclassification of child marriage cases.
    - Earlier, such cases were registered under POCSO.
    - From 2022 onwards, they were recorded under the **Prohibition of Child Marriage Act (PCMA)**.

- **Child Marriage Act cases:**
    - 2020: 138
    - 2021: 155
    - 2022: 163
    - **2023: 5,267** (share = **51.7%** of all crimes against children).

- Child marriage accounted for nearly **52% of crimes against children** in Assam in 2023.

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4. Rajasthan – Rise in POCSO and Kidnapping Cases

- **Recorded cases increased 70%** — from ~6,200 (avg 2018–2022) → **>10,500 in 2023.**

- Crimes under **POCSO Act** and **kidnapping/abduction** drove the rise.

- **POCSO-related cases:**

- 2020: 3.7% (244 cases)
- 2021: 7.8% (601 cases)
- 2022: 39.8% (3,713 cases)
- **2023: 34% (3,602 cases)**

- **Kidnapping/abduction:**
    - 2020: 2,769
    - 2021: 3,593
    - 2022: 4,339
    - **2023: 5,738** (share = **54.2%** of total crimes against children).

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5. Kerala – Surge in POCSO Cases

- **Recorded cases increased 106%** — from ~2,800 (avg 2018–2022) → **>5,800 in 2023.**

- Main driver: **POCSO Act violations.**
    - 2020: 2,163 cases (share 54.8%)
    - 2021: 2,647 cases (57.8%)
    - 2022: 3,334 cases (59.1%)
    - **2023: 4,295 cases (74.2%)**

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6. Infographic Breakdown

Map 1:

- Depicts percentage change in crimes against children (2023 vs avg 2018–2022).

- **>50% rise:** Assam, Rajasthan, Kerala.

- **<50% rise or decline:** Other states.

- **UTs excluded** (e.g., Delhi).

Chart 2 (Assam):

- Rise in cases under the **Prohibition of Child Marriage Act (PCMA)**.

- 2023 share: **51.7%** of total crimes against children.

Chart 3 (Rajasthan):

- Rise in **POCSO Act** cases — 34% of total child crime cases in 2023.

Chart 4 (Rajasthan):

- Rise in **kidnapping and abduction** cases — 54.2% of total in 2023.

Chart 5 (Kerala):

- Steady rise in **POCSO cases**, reaching **74.2% share** of total in 2023.

7. **Interpretation**

- Increase in numbers does **not necessarily mean** more crimes — it may reflect:

  - Better reporting systems.

  - Reclassification of offences (e.g., child marriage in Assam).

  - Enhanced legal enforcement of POCSO provisions.

- **Common Pattern (2020–2023):**

  - Rise in **POCSO-related offences** in all three states.

  - **Digital awareness + media coverage** → better reporting.

  - **Social sensitivity and stricter policing** also contributed.

8. **Conclusion**

- The data reveals a **three-state convergence** — Assam, Rajasthan, and Kerala — all witnessing a steep rise in child-related crime statistics.

- While **some of the rise may be administrative (classification, reporting)**, the figures underscore the **vulnerability of children** and the **need for stronger preventive mechanisms, social awareness, and judicial sensitivity**.

HOW TO USE IT

Primary Relevance: GS Paper I (Indian Society)

This is the strongest fit, as it deals with social problems and their regional patterns.

1. Salient Features of Indian Society & Social Empowerment:

- **How to use:** The data reveals stark regional variations in a critical social issue.

  - **Regional Disparities in Social Issues:** The surge in different types of crimes in different states (Child Marriage in Assam, POCSO in Kerala, Kidnapping in Rajasthan) shows that **social problems are not uniform** across India. This allows for a nuanced analysis rather than a generalized statement.

  - **Women and Child Issues:** This is a direct issue concerning the safety and empowerment of children, a vulnerable section of society. The data can be used to argue for more targeted, state-specific policies for child protection.

Primary Relevance: GS Paper II (Governance & Social Justice)

This data is a report card on governance and the implementation of laws.

1. Government Policies and Interventions for Development in various sectors:

- **How to use:** The data provides a critical lens to evaluate the implementation of key laws.

  - **Evaluation of POCSO Act:** The rise in POCSO cases, especially in Kerala (74.2% of all child crimes), can be interpreted in two ways: as a **failure of prevention** or as a **success in reporting and enforcement**. This shows a sophisticated understanding of how data can reflect both a problem and a solution.

  - **Policy Implementation:** The spike in child marriage cases in Assam due to **reclassification under the Prohibition of Child Marriage Act (PCMA)** is a perfect example of how a **change in administrative procedure** can dramatically alter crime statistics, revealing a previously underreported problem.

2. Welfare Schemes for Vulnerable Sections:

- **How to use:** The data underscores the urgent need for robust child protection schemes and institutions like the **Juvenile Justice Board** and **Child Welfare Committees** to function effectively.

Reforming Passive Euthanasia in India

Context

- In **June**, the **U.K. House of Commons** passed the *Terminally Ill Adults (End of Life) Bill*, reigniting global debate on euthanasia.

- The Bill allows **physician-assisted dying** for terminally ill adults with less than six months to live (subject to certification and oversight).

- Awaiting approval from the **U.K. House of Lords**, it marks a major legal and moral step — already adopted in several Western countries.

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2. Indian Context

- India has recognized **passive euthanasia** through multiple **Supreme Court judgments**, drawing a **clear line against active euthanasia**.

- However, India's:

  - **Cultural values**

  - **Institutional weaknesses**

  - **Socio-economic disparities**
    make it **unlikely** to follow the U.K.'s active euthanasia model soon.

- Reform is needed, but **within India's own realities**.

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3. Current Legal Status — Passive Euthanasia

Definition:

Withdrawal of life-sustaining treatment when recovery is impossible — **not killing, but allowing death naturally**.

Practical Barriers:

- Legal recognition exists, but **accessibility is difficult**.

- Requirements include:

  - Advance directives

  - Dual medical board clearance

  - Occasional court approval

- Result: **Painfully slow** and bureaucratic, especially for terminally ill patients.

Ground Reality:

- Families often make critical decisions informally, **without legal clarity**.

- Hospitals and doctors are hesitant due to fear of liability.
- Lack of a **uniform implementation system** undermines the law's intent to preserve dignity.

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4. Systemic Challenges

Challenge	Details
Healthcare System	Fragmented, under-resourced, and unequal.
Societal Context	Dominated by family influence, religious sensitivities, and literacy variations — makes end-of-life choices complex.
Medical Infrastructure	Inadequate palliative care; high cost of medical care leads to ethical dilemmas and coercion risks.
Ethical Dilemma	When patients are poor, elderly, or dependent, they may feel pressured to opt for death.

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5. Jurisprudential Concerns

- **Article 21** of the Constitution guarantees *Right to Life and Dignity*.
- However, courts have held:
  - The *right to die* cannot automatically stem from *right to life*.
  - A fine line exists between **omission (allowing death)** and **commission (causing death)**.
- Supreme Court adopts a **cautious approach**, reflecting **ethical conservatism** suited to Indian realities.

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6. Charting India's Own Course

Rather than moving toward **active euthanasia**, India should:

1. **Reform and simplify passive euthanasia procedures.**
2. Use **digital tools** and **streamlined protocols** to make end-of-life care humane and accessible.

Recommended Reforms:

- **Digital Advance Directive Portal:**
  - Linked with Aadhaar for biometric authentication.
  - Enables patients to create, modify, and verify directives digitally.
  - Accessible to treating doctors and families.
- **Digital Oversight Framework:**
  - Decentralized system using **hospital-based**

ethics committees and **local medical boards**.

- o Avoid excessive legal intervention and delays.

- **Independent Oversight:**

  - o Medical auditors and health commissioners (statutory backing).

  - o Use of **digital dashboards** to monitor and prevent misuse.

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7. Proposed Safeguards

Safeguard	Purpose
48-hour cooling-off period	Ensures decisions are fully informed.
Mandatory palliative care review	Ensures no patient chooses death due to lack of treatment.
Psychological counselling	Protects mental well-being of patients and families.
Medical audit mechanisms	Tracks end-of-life decisions for ethical compliance.

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8. 💬 India's Constitutional Promise

"India's constitutional promise of dignity in life must extend to dignity in dying."

- The right to die with dignity flows naturally from **Article 21** (Right to Life).

- Reforming passive euthanasia **aligns with human dignity**, not against it.

- The law must make the process **humane, efficient, and corruption-free**, not cumbersome.

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9. Global Comparisons

U.K.	India
Legalizing active euthanasia through new law.	Permits only passive euthanasia (withdrawal of support).
Robust healthcare, clear oversight.	Fragmented system, moral sensitivities, weak implementation.
Emphasis on patient autonomy.	Emphasis on family, religion, and moral caution.

10. Way Forward

1. **Digitize and decentralize** end-of-life documentation and decision-making.

2. **Integrate medical ethics and law** into end-of-life training.

3. **Public awareness campaigns** to:

- o Destigmatize euthanasia discussions.

- o Encourage advance care planning.

4. **Balance compassion with caution** — avoid exploitation, ensure patient protection.

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11. Conclusion

- India's passive euthanasia framework **needs reform**, not reversal.

- Aim: **"Dignity in dying"** — balancing compassion, legality, and ethics.

- The focus should be on:

  - o Digital simplification.

  - o Decentralized oversight.

  - o Human-centered safeguards.

- In doing so, India can achieve a **humane, equitable, and practical** end-of-life care model consistent with its **constitutional values**.

HOW TO USE

Primary Relevance: GS Paper II (Governance, Constitution, Polity)

1. Indian Constitution—Fundamental Rights:

- **How to use:** The entire debate revolves around the

interpretation of **Article 21 (Right to Life and Personal Liberty)**.

- o **Evolution of Article 21:** The Supreme Court's recognition of "passive euthanasia" as part of the right to "die with dignity" is a classic example of the **judicial expansion of fundamental rights**. You can contrast this with the earlier stance that the "right to life does not include the right to die."

- o **Judicial Activism vs. Legislative Gap:** The Court stepped in to create a legal framework for passive euthanasia in the absence of a law, highlighting the phenomenon of **judicial activism filling a legislative vacuum**. This is a recurring theme in Indian polity.

2. Government Policies and Interventions:

- **How to use:** The article highlights the **implementation gap** between a progressive judicial verdict and ground reality.

- o **Policy Analysis:** The "Systemic Challenges" and "Current Legal Status" sections provide a ready-made critique. The

process is "painfully slow and bureaucratic," and hospitals are "hesitant due to fear of liability." This is a common problem with many well-intentioned policies.

- **Governance Solutions:** The "Proposed Reforms" section offers concrete, tech-based governance solutions:

    - **Digital Advance Directive Portal** linked to Aadhaar.

    - **Decentralized oversight** via hospital ethics committees.

    - These suggestions show an understanding of using **e-governance to simplify processes and improve accessibility**.

Strong Relevance: GS Paper IV (Ethics, Integrity and Aptitude)

1. Ethical Dilemmas and Conundrums:

- **How to use:** The core of the debate presents a conflict between two ethical principles.

    - **Autonomy vs. Sanctity of Life:** The right of an individual to choose a dignified death (autonomy) versus the ethical and religious principle that life is sacred and must be preserved at all costs.

    - **Compassion vs. Potential for Abuse:** The ethical duty to alleviate suffering (compassion) versus the risk that legalizing euthanasia could lead to coercion of the elderly, poor, or disabled (maleficence).

    - **Acts vs. Omissions:** The ethical distinction the Court draws between *allowing someone to die* (passive euthanasia/omission) and *causing death* (active euthanasia/commission).

2. Probity in Governance:

- **How to use:** The proposed safeguards are essential for ensuring ethical governance.

    - A public servant designing this policy must ensure **probity** by building in mechanisms like **cooling-off periods, mandatory palliative care review, and medical audits** to prevent misuse

and protect the most vulnerable.

Calling out the criticism of the Indian judiciary

Central Theme

The article defends the Indian judiciary against **misinformed and vague criticism,** particularly by policymakers who wrongly attribute India's governance and economic inefficiencies to judicial delays and activism. The author argues that such criticism ignores structural and legislative flaws that burden the judiciary.

Structure & Key Points

1. Introduction: Courts as Convenient Scapegoats

- In India, policymakers often blame courts for obstructing development.

- Suhirth refers to comments by **Sanjeev Sanyal (Economic Advisory Council)** who said the judiciary is the "single biggest hurdle" to India becoming *Viksit Bharat* (Developed India).

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2. Critique of Sanjeev Sanyal's Remarks

- Such remarks reduce the judiciary to a caricature.

- Courts are **overstretched and under-resourced**, not obstructionist.

- Blaming them deflects from deeper **governance failures**.

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3. Example of Misunderstanding: Section 12A of the Commercial Courts Act (2015)

- Sanyal cited **Section 12A**, which mandates pre-suit mediation.

- Courts are blamed for not enforcing this — but the issue lies in:

  o Poor **drafting and legislative clarity**.

  o Courts trying to interpret **ambiguous provisions**.

- The problem is not judicial inefficiency but **legislative vagueness**.

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4. India's Judicial System Mirrors Governance Failures

- Judiciary reflects the same inefficiencies seen in the broader governance structure.

- Burden comes from vague, unclear laws and **arbitrary executive actions**.

- Tax laws, land regulations, and bureaucratic procedures often generate **avoidable litigation**.

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5. Systemic & Legislative Causes of Delay

- Overregulation and constant legislative changes add caseloads.

- Example: **New Income Tax Act**—though marketed as simplification, it often **repackages old problems**.

- Vague drafting → multiple interpretations → more litigation.

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6. Court System Itself

- Working hours of courts (Supreme Court: 10:30 am – 4:00 pm; High Courts slightly longer) often cited as inefficiency.

- Reality: Judges spend significant time on:

    o Reading, drafting, and studying case law.

    o Working beyond official hours.

    o Administrative and chamber work.

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7. Most Acute Problems: Lower Judiciary

- Major backlog is in **district courts**—where citizens first seek justice.

- Delays stem from:

    o Lack of infrastructure.

    o Insufficient judges.

    o Administrative neglect.

- Yet public anger is misdirected at the judiciary instead of legislative and executive lapses.

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8. Conclusion: A Misplaced Blame

- Criticizing judiciary for slow pace or activism is a **simplistic narrative**.

- True reform requires:

    o Better laws and drafting.

    o Administrative and infrastructural reform.

    o Recognition that judiciary operates within systemic constraints.

Summary Chart

Aspect	Critic's View (e.g., Sanyal)	Author's Rebuttal
Judiciary = hurdle to growth	Courts delay projects & decisions	Delays stem from vague laws, overburdened system
Courts ignore law (Sec 12A)	Judiciary not enforcing	Law poorly drafted; courts interpret unclear provisions

Aspect	Critic's View (e.g., Sanyal)	Author's Rebuttal
	mediation	
Court hours are short	Judges not working enough	Judges work long hours off-bench; handle massive caseload
Main source of inefficiency	Judicial process	Legislative/executive mismanagement
Solution	Criticize and reform judiciary	Reform drafting, reduce vague legislation, strengthen lower courts

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Core Takeaway

"India's judicial system mirrors the same failures that afflict the rest of its governance."

Criticism must be directed not at judges but at **systemic design flaws**—vague laws, poor governance, and weak administrative infrastructure—that overload the judiciary and distort public perception.

HOW TO USE

Primary Relevance: GS Paper II (Governance, Constitution, Polity)

This is the most direct and powerful fit. The topic falls under "Judiciary" and "Separation of Powers."

1. Structure, Organization and Functioning of the Judiciary:

- **How to use:** The article provides a powerful rebuttal to the simplistic narrative that blames the judiciary for all delays.

  o **Shifting the Blame:** Instead of just listing the problems of the judiciary (pendency, vacancies), you can use this article to argue that the **executive and legislature are equally, if not more, responsible**. The judiciary is a "mirror" of broader governance failures.

  o **Root Cause Analysis:** The core argument is that **vague and poorly drafted laws** (like the example of Section 12A of the Commercial Courts Act) are a primary source of litigation. When laws are unclear, they invite multiple interpretations and disputes, which inevitably end up in court. This is a more profound point than just saying "there are too many cases."

2. Separation of Powers between various organs:

- **How to use:** The criticism from a member of the Prime Minister's Economic Advisory Council (Sanjeev Sanyal) exemplifies the tension between the executive and the judiciary.

    o You can use this to discuss how the executive often blames the judiciary for slowing down development projects, while the judiciary's role is to uphold the rule of law and fundamental rights, which sometimes requires scrutinizing executive actions.

3. Role of Civil Services in Democracy:

- **How to use:** The article implicitly highlights the role of the bureaucracy (the executive) in creating the problem.

    o **Quality of Drafting:** The "vague drafting" of laws points to a failure within the ministries and legislative departments of the government. A civil servant has a duty to ensure that policies and laws are clear, precise, and minimally litigious.

    o **Administrative Neglect:** The neglect of the lower judiciary

(infrastructure, staff) is also an executive failure. A responsive administration would prioritize strengthening the justice delivery system.

Ensure compliance

Firms that make poor quality drugs must face consequences

1. Core Issue & Context

- **Primary Concern:** Poor quality control and non-compliance in India's pharmaceutical sector.

- **Specific Incident:** Contaminated cough syrup (Coldrif) linked to the deaths of at least 14 children in Rajasthan and Madhya Pradesh.

- **Broader Problem:** Repeated issues with cough syrup quality, threatening India's ambition to be a global pharmaceutical leader ("making in India").

2. Key Findings & Actions

- **Contaminant Identified:** Diethylene glycol (DEG) was found above permissible limits in samples of the Coldrif syrup by the Tamil Nadu Drugs Control Department.

- **Contradictory Results:** The Union Health Ministry's initial tests on samples from Rajasthan and MP ruled out DEG, but Tamil

Nadu's tests confirmed it in one batch.

- **Source of Contamination:** The contaminated batch used **non-pharmacopoeial grade propylene glycol** as an excipient, which may have introduced DEG and ethylene glycol (known nephrotoxic substances).

- **Regulatory Non-Compliance:** The manufacturing facility violated **Good Manufacturing Practices (GMP)** and **Good Laboratory Practices (GLP)**.

- **Actions Taken:**

    o The Central Drugs Standard Control Organisation (CDSCO) recommended cancellation of the firm's manufacturing licence.

    o A doctor in Madhya Pradesh who recommended the syrup was arrested.

3. Regulatory Response

- **Trigger:** The incident and the Tamil Nadu report prompted a directive from the Union Health Ministry.

- **Directive:** It sought strict drug compliance from all Indian manufacturers in line with the **revised Schedule M** norms.

4. Recommendations & Call to Action

- **Zero Tolerance:** The government must adopt a "zero threshold for poor quality drugs."

- **Proactive Monitoring:** Implement "hawk-like monitoring" with regular, surprise inspections of drug batches.

- **Strict Enforcement:** Show "seriousness" in handling all reported violations and take "appropriate action for every violation," not just after deaths occur.

- **Deterrence:** Send a strong message to the industry that shoddiness and violations endangering lives will not be tolerated.

HOW TO USE IT

 Primary Relevance: GS Paper II (Governance)

1. Important Aspects of Governance, Transparency and Accountability:

- **How to use:** The incident is a classic case of a **governance and regulatory failure**.

    o **Implementation Gap:** India has a regulatory framework (CDSCO, Schedule M norms) but its enforcement is weak. The fact that a firm could use "non-pharmacopoeial grade" ingredients shows a breakdown in the

oversight mechanism. This is a common theme in Indian governance—**strong laws, weak implementation**.

- o **Lack of Accountability:** The contradictory test results between the Union Ministry and the Tamil Nadu agency point to a lack of **standardized protocols and transparency**, undermining accountability.

2. Role of Civil Services in Democracy:

- **How to use:** This case presents a clear ethical and administrative challenge for civil servants in bodies like the CDSCO and state drug control departments.

  - o **Duty vs. Pressure:** Their duty is to ensure public safety through "hawk-like monitoring." However, they may face pressure to not stifle industry or from political/industry lobbies. Upholding **integrity and probity** in such a scenario is their fundamental responsibility.

Primary Relevance: GS Paper III (Economy & Security)

The issue has significant economic and security dimensions.

1. Indian Economy and issues relating to Planning:

- **How to use:** This incident directly threatens a key national economic ambition.

  - o **Brand India:** India aims to be the "Pharmacy of the World." Such quality failures severely damage this reputation and can lead to **loss of export markets**, impacting a high-growth industry.

  - o **Ease of Doing Business:** For genuine manufacturers, a weak regulatory environment that allows rogue players to operate creates an unfair playing field and undermines the "Ease of Doing Business."

2. Disaster Management:

- **How to use:** The death of children due to a contaminated drug is a **man-made disaster**.

  - o It highlights the failure of **disaster risk reduction** in the public health sector. Proactive monitoring and strict enforcement, as recommended in the article, are forms of **disaster preparedness** that could have prevented this tragedy.