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DAILY NEWS ANALYSIS

POLITY

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TECHNOLOGY

ECOLOGY

31 killed in U.S. strikes on Yemen; Houthis hit back

INTERNATIONAL RELATIONS



The U.S. conducted airstrikes on Yemen's Houthis, killing 31 people, after the group attacked shipping in the Red Sea. The Houthis retaliated by targeting the U.S. aircraft carrier USS Harry Truman with missiles and drones. President Trump warned of "overwhelming lethal force" if the attacks continued and called on Iran to stop supporting the Houthis. Iran condemned the U.S. strikes as a violation of international law, denying involvement in the Houthi attacks but promising a decisive response to any threats. Hamas also condemned the U.S. action, calling it an assault on Yemen's sovereignty. The Houthis vowed further retaliation.

Global intelligence chiefs converge in Delhi meet

The fourth conference of global intelligence and security chiefs, hosted by India's National Security Adviser Ajit Doval, focused on counterterrorism, Indo-Pacific cooperation, global security, intelligence-sharing, immigration, extradition, transnational crimes, narcotics, and terror funding. Held before the Raisina Dialogue, the meeting saw participation from over 28 attendees, including the Five Eyes nations and U.S. Director of National Intelligence Tulsi Gabbard, who also held talks with Mr. Doval. The event, organized by India's RAW and NSCS, aimed to strengthen global cooperation amid rising geopolitical uncertainties and tensions, notably India's strained ties with Canada. The conference has been held annually since 2022.

New Bill proposes jail term up to 7 years for using forged passport

POLITY & GOVERNANCE

India's proposed Immigration and Foreigners Bill, 2025, introduces stricter penalties for using forged passports or visas, with imprisonment of 2 to 7 years and fines up to ₹10 lakh. Foreigners entering without valid documents may face up to 5 years in jail and fines up to ₹5 lakh. The Bill also mandates hotels, educational institutions, and hospitals to report foreign nationals and requires airlines and ships to submit passenger and crew manifests, aiming to regulate immigration and track overstaying foreigners.

India's proposed Immigration and Foreigners Bill, 2025, aims to replace four existing laws governing immigration and foreigners. The new legislation aligns with the government's goal of simplifying laws, easing business, and reducing compliance while balancing national security with economic growth and tourism. Currently, foreigners on long-term visas exceeding 180 days must register with the relevant authorities within 14 days of arrival. According to existing laws, all foreigners on long-term – more than 180 days – student, medical, research, employment, missionary and project visas are required to register with the Foreigners Regional Registration Officer (FRRO) or the Foreigners Registration Officer (FRO) concerned, having jurisdiction over the place, within 14 days of arrival.



"If you invest more in your education, then you are likely to get more interest in it."

–Benjamin Franklin

In a 2014 judgment, Supreme Court had favoured 'linguistic secularism'

POLITY & GOVERNANCE

The debate over the language policy in India continues, with Tamil Nadu CM M.K. Stalin accusing the Centre of imposing Hindi through the National Education Policy, potentially harming Tamil Nadu's educational progress. A 2014 Supreme Court judgment supported "linguistic secularism," emphasizing the need to accommodate diverse linguistic aspirations. The court referenced the 1949 Constituent Assembly debate over Hindi as the national language, which resulted in a compromise through the Munshi-Ayyangar formula, leading to Article 343, declaring Hindi in Devanagari script as the Union's official language.

'Official language'

Hindi was chosen as India's official language, not its national language, as it wasn't spoken across all regions and its speakers didn't form the majority. Regional languages like Bengali, Tamil, Marathi, and Gujarati were considered more developed at the time, leading to Hindi being designated as the official language.

Article 351 mandates the Union to promote Hindi's spread, aiming to develop it as a medium for India's diverse culture. However, the Allahabad High Court, in its 1982 judgment in Sunil K.R. Sahastrabudhey vs Director, IIT Kanpur, observed that "although Hindi is the national language of India and Article 351 lays down a duty on the Union to promote the spread of Hindi language to develop it so that it may serve as a medium of expression for all the elements of the composite culture of India, there is no right conferred on any citizen to compel an institution to impart education in that particular language".

Article 29(1) of the Constitution recognised that "every section of the society which has a distinct language script or culture of its own" has the fundamental right to conserve the same.

The Supreme court, while responding to whether a student or a parent or a citizen has a right to choose the medium of instruction at primary school level in State of Karnataka vs Associated Management of Primary & Secondary Schools, said the fundamental right to speech and expression under Article 19 included the freedom of a primary class student to choose the language of instruction. The court said the state cannot impose control over such a choice. In this, the court had taken a leaf from the U.S. Supreme Court's conclusion in Pierce v. Society of Sisters of Holy Names in 1924 that "a child is not a

India, New Zealand resume trade deal talks after decade



INTERNATIONAL RELATIONS

India and New Zealand have resumed negotiations for a Free Trade Agreement (FTA) after a 10-year gap, aiming to boost economic ties by enhancing supply chain integration and market access. Talks initially began in 2010 but stalled in 2015 after 10 rounds. The announcement followed a meeting between Indian Commerce Minister Piyush Goyal and New Zealand's Trade Minister Todd McClay, during PM Christopher Luxon's visit to India. Bilateral trade surpassed \$1 billion in April-January 2025, and while the FTA aims to create new business opportunities, tariff structure disparities pose a challenge.

Common ground

India and New Zealand face challenges in their renewed FTA talks due to tariff disparities and market access demands. New Zealand's average import tariff is low at 2.3%, with over half its goods already duty-free, giving Indian products substantial access. In contrast, India's average tariff is 17.8%, making reductions less appealing. New Zealand seeks greater

access to India's dairy market, which India resists to protect its farmers. India also hesitates to lower tariffs on dairy, meat, and wine, while pushing for easier movement of skilled professionals and better access for its IT and services sectors. U.S. pressure on India to open its dairy and agriculture markets may further impact negotiations.

The challenges of public health education in India

POLITY & GOVERNANCE

The U.S. withdrawal from the WHO and reduction of USAID funding has disrupted health services in many countries, but India remains largely unaffected as international aid makes up only 1% of its health expenditure. However, this move threatens India's already limited public health development sector and reduces job opportunities for public health graduates. Public health is crucial for national well-being, as highlighted by Article 47 of the Indian Constitution, and the COVID-19 pandemic underscored the urgent need for a dedicated public health workforce in government, civil society, academia, and research.

The evolution of training and jobs in India

Public health education in India has its roots in the colonial era, initially embedded within medical training. Despite the establishment of the All India Institute of Hygiene and Public Health in 1932 and the introduction of community medicine in medical education, the number of trained public health professionals remained limited. Many students pursued MPH courses abroad, but the demand for public health experts outpaced supply. Recognizing this need, India eventually expanded its MPH programs and public health teaching.

The number of institutions offering MPH courses in India has grown rapidly from just one in 2000 to over 100 today, driven by initiatives like the National Rural Health Mission (NRHM) in 2005. However, government recruitment for public health specialists has plateaued, making jobs harder to secure despite the rising number of graduates. Challenges include non-standardized training, limited practical learning, faculty shortages, and uneven distribution of institutions, leaving some populous states with few or no public health education opportunities.

Hurdles graduates face, issues in education

Public health graduates in India face a growing mismatch between supply and demand, with limited job opportunities and intense competition for entry-level roles. Public sector positions are shrinking, and efforts to establish public health management cadres have stalled. The private sector prioritizes hospital and business management over public health specialists, leaving research and development as the main employer. However, these sectors depend on foreign grants, which are dwindling as India is no longer a priority for international funding. National funding is still underdeveloped, worsening job scarcity for public health professionals.

India's MPH education faces quality concerns due to rapid expansion and lack of regulation. Competition among schools has lowered admission standards, with many students enrolling without a clear understanding of the field. Faculty often lack proper training and practical experience, while the absence of a standardized curriculum and outcome measures worsens the issue. No regulatory body, such as the NMC or UGC, oversees MPH training, impacting the overall quality of graduates despite the Health Ministry's model course framework.

Approaches to consider

Addressing India's public health challenges requires a multi-pronged approach. Key priorities include creating public health jobs at all levels and establishing a dedicated public health cadre within State governments to strengthen health systems. Additionally, a robust regulatory mechanism is needed, either through a new body or within existing agencies like the NMC or UGC, to standardize curricula and training. Public health education should integrate practical learning opportunities, and more institutions should be established in underserved States. Strengthening local ecosystems is essential for sustainable health development.

From insurance-driven private health care to equity

POLITY & GOVERNANCE

India, committed to 'Health for All' under the WHO's Universal Health Coverage (UHC) framework, focuses on primary health care (PHC) and reducing out-of-pocket expenditure (OOPE). The Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) addresses OOPE by covering hospitalisation and tertiary care, improving financial protection. However, it sidelines PHC, discourages its use, weakens public health infrastructure, and promotes market-driven private health care, diverging from UHC's core principles.

Neglect of primary health-care systems

A strong primary health care (PHC) system reduces costs and reliance on higher-level care, but the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) shifts focus to hospital-based care, increasing long-term expenses and private hospital dependence. This contradicts the Bhore Committee's vision of a PHC-focused system. Since 2018, over 36 crore Ayushman cards have been issued, and 31,000+ hospitals empanelled. Though health is a state subject, PM-JAY

channels funds to private insurers, limiting state control. The 2025 Budget allocates ₹9,406 crore to AB-PMJAY, further promoting privatisation, with unclear benefits for marginalised groups or PHC strengthening.

Budget, privatisation, insurance overhaul

The health budget allocates ₹95,957.87 crore to Health and Family Welfare and ₹3,900.69 crore to Health Research, prioritising digital infrastructure and medical education over primary health care (PHC). The National Health Mission's shrinking share signals a shift from universal health care towards private sector reliance. Additionally, the foreign direct investment (FDI) cap in the insurance sector has been raised from 74% to 100%, aiming to boost India's low insurance penetration, attract investment, and expand coverage, with the goal of achieving "Insurance for All" by 2047.

Policy changes raise concerns for India's informal workforce and marginalised urban populations, as the lack of universal health coverage leaves millions without health security. Insurance illiteracy and reliance on middlemen further limit access, while weak private sector regulation may increase out-of-pocket expenses (OOPE). Coverage for ASHA workers and grass-roots health providers remains uncertain. Additionally, outdated data from the 2011 Census and the 2020-21 Labour Force Survey hinders effective allocation of social protection schemes.

Lessons from global models

Global experiences show the risks of relying on private insurance, as seen in the U.S., where it has led to rising healthcare costs, inequalities, and limited access for the uninsured. In contrast, countries like Thailand and Costa Rica prioritize primary care through tax-funded or mandatory insurance schemes, backed by strong public health investments and regulated private insurance. India could adopt similar models to strengthen its healthcare system.

India must shift its focus from tertiary private healthcare to preventive, community-based care to ensure accessibility for all, especially informal workers, migrants, and vulnerable populations facing rising climate-related health risks. Achieving Universal Health Coverage (UHC) requires comprehensive public health benefits, cost-control measures, and efforts to reduce out-of-pocket expenses. Safeguards are needed to prevent private insurance from inflating healthcare costs, ensuring that "Health for All" becomes a reality, not just a slogan.

Terror on the train

INTERNATIONAL RELATIONS

The March 11 attack on the Jaffar Express in Balochistan by the Baloch Liberation Army (BLA) highlights Pakistan's growing internal security challenges. The BLA, demanding the release of Baloch militants, engaged in a 36-hour standoff, resulting in dozens of deaths. Pakistan blamed India and Afghan handlers for supporting the separatists, but the rising frequency of BLA attacks — including targeting Chinese workers and a deadly 2024 Quetta bombing — shows Pakistan's struggle to contain the insurgency despite heavy military responses.

Pakistan Prime Minister Shehbaz Sharif acknowledged that Balochistan's lack of development hinders efforts to eliminate terrorism. Baloch separatists argue that the Pakistani state exploits the province's resources while neglecting its people, with security agencies accused of enforced disappearances and extrajudicial killings. Pakistan has blamed India and Afghanistan for supporting Baloch rebels, though its reliance on military force has only fuelled separatist narratives. Additionally, Pakistan now claims that Baloch militants and the Tehreek-e-Taliban Pakistan (TTP) operate from Taliban-controlled Afghanistan, posing severe security challenges amid economic and political instability. The passage emphasizes that military action alone cannot ensure peace; Pakistan must address Balochistan's political and economic grievances to achieve long-term stability.



Tackling the problem of nutrition

POLITY & GOVERNANCE

Nutrition in India is not just about food insecurity, but also about dietary habits shaped by culture, caste, and gender relations. Only one aspect of the nutrition challenge receives most of the policy focus - malnutrition among women and children. Women outside of the reproductive age, men, and senior citizens rarely figure in national nutrition policy discussions. More importantly, we ignore diabetes, hypertension, and other lifestyle-induced non-communicable diseases which are really another manifestation of under nutrition. One type of nutrition deficiency is because some people just don't have enough to eat and the other type is because people are not eating sufficient nutritionally rich food. The outcomes are damning in unique ways.

India has among the world's highest share of malnourished children and anaemic women. According to the National Family Health Survey-5, 36% of children under five are stunted and a meagre 11% who are breastfed between the ages of 6 months and 23 months receive an adequate diet. Fifty-seven percent of women in the 15-49 age group are anaemic. There is a rise in the share of those with diabetes, hypertension, and other such lifestyle-diet induced non-communicable diseases (NCDs). 24% of women and 23% men in India are overweight or obese and 14% take medicines for diabetes.

A comprehensive agenda

Poshan 2.0 and Saksham Anganwadi focus on targeted interventions like take-home rations and tracking malnutrition, emphasizing certain regions and populations. However, a broader nutrition agenda is needed, recognizing malnutrition as a public health issue affecting all social strata. This requires identifying diverse nutritional needs, offering locally rooted solutions, and establishing community-based facilities for delivering nutrition services. Health and wellness centres (HWCs) are highlighted as the ideal institutions to implement these initiatives at the local level.

Current nutrition programs focus on pregnant and lactating mothers, young children, and adolescent girls through take-home rations, iron and folic acid tablets, and mid-day meals. However, nutrition initiatives should be expanded to all population segments, involving health and Anganwadi workers. Nutrient-rich local foods should be promoted, even among the middle class, to reduce reliance on unhealthy packaged foods.

Health and Wellness Centres (HWCs) need better distribution to cover the entire population, as their current spread is uneven, with some rural areas having more coverage than others and urban areas being underserved. Nutrition services are limited and inconsistently implemented, despite being meant to support various groups like pregnant women, children, adolescents, the elderly, and those recovering from illness or trauma. Additionally, dedicated staff are needed to provide nutrition services, as they currently form only a small part of the multi-purpose worker's responsibilities.

Factors for success

The success of India's nutrition agenda depends on engaging local elites and linking nutrition practices with local cuisines. Research shows that countries with local elite ownership and integration with local health practices achieved faster vaccination uptake. India should adopt a Health and Wellness Centre (HWC) approach, viewing health as overall well-being, not just the absence of illness. A locally-owned, comprehensive nutrition plan delivered through the primary health system is key to achieving this vision.

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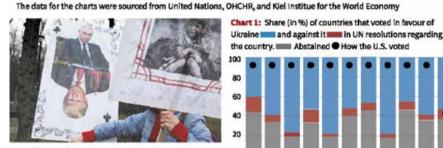


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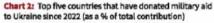
A U-turn that has left a void in Ukraine's defence against Russia

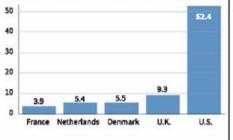
INTERNATIONAL RELATIONS

Left high and dry



alate: A demonstrator holds signs during a protest outside the U.S. Embassy as President Trump holds talks regarding a possible ceasefi amid Russia's on Ukraine, in Kviv, Ukraine March 15, 2025, REUTERS





HON-2022 Dec. 2022 Dec. 2017 00.202 Feb. 2023 Dec. 2013 July-2024 Mar. 2022 Feb. 2005 April 2022 Chart 3: U.S.'s share (in %) in Ukraine's Imports across

various categories of weapons since the start of the war

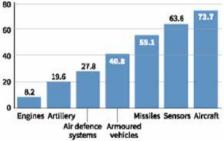
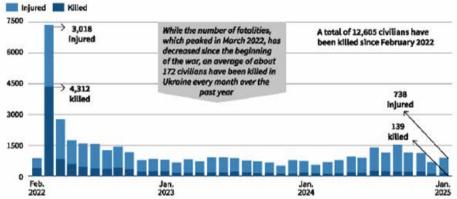


Chart 4: Number of civilian fatalities and injuries in Ukraine per month since February 24, 2022



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On February 24, for the first time, the U.S. voted against the peaceful resolution of the Russia-Ukraine war. This vote, along with its decision on March 4 to pause military aid, shows a marked shift in the U.S.'s policy towards Ukraine, which has depended heavily on it throughout the war for its military needs.

Among the 176 member countries of the United Nations General Assembly (UNGA) that participated in the draft resolution, Advancing a comprehensive, just and lasting peace in Ukraine, 93 voted in favour, while 65 countries, including India, abstained from voting. Only 18 countries voted against the resolution. The U.S. was joined by Russia, North Korea, and Belarus, countries with which it has never once agreed on Ukraine-related decisions. Its decision clashed with those of countries that had aligned with the U.S. in over 80% of the UNGA resolutions in the past, including Canada, Britain, Australia, and France.

Chart 1 shows the share (in %) of countries which voted in favour of Ukraine and against it in UN resolutions regarding the country.

Ever since Russia's initial occupation of the Crimean Peninsula in 2014, over 40 countries have extended financial, humanitarian, and military aid to Ukraine. The U.S.'s total contribution of €114 billion is the largest since the start of Russia's full-scale invasion in 2022. It remains the leading donor in military, humanitarian, and financial aid to Ukraine in this period. European nations have together contributed €132 billion.

Chart 2 shows the top five countries that have donated military aid to Ukraine since 2022 (in %).

The U.S. has donated €64 billion, more than half of all the military aid received by Ukraine during the war.

The U.K. is at a distant second, having donated about 10% of the total amount. In fact, backed mainly by the U.S., Ukraine became the largest importer of major arms in the world in the 2020-24 period, a nearly 100-fold rise compared with the figures of 2015-19. U.S. military aid has given Ukraine some vital arms and ammunition, especially missiles, which Ukraine President Volodymyr Zelenskyy said "will do all the talking".

Chart 3 shows the U.S.'s share in Ukraine's imports across various categories of weapons since the start of the war.

The U.S. supplies over 70% of the aircraft used by Ukraine in the war and leads in providing weapons across most categories, including sensors (63%), missiles (55%), armoured vehicles (41%), and air defence systems (28%). However, it does not hold the largest share in artillery, which is primarily supplied by Poland, or in engines, where Germany accounts for about 40% of the supply. The arms supply data includes arms supplied and arms that countries have committed to supplying. U.S. President Donald Trump's announcement that the U.S. will be pausing military aid following his clash with Mr. Zelenskyy at the White House comes at a critical time. The outnumbered Ukrainian military forces and civilians continue to suffer casualties.

Chart 4 shows the number of civilian fatalities and injuries in Ukraine per month since February 24, 2022.

While the number of fatalities, which peaked in March 2022, has decreased since the beginning of the war, an average of about 172 civilians have been killed in Ukraine every month over the past year. A total of 12,605 civilians have been killed since February 2022.

What is Elon Musk's Starlink all about?

SCIENCE & TECHNOLOGY

Bharti Airtel and Reliance Jio have signed distribution pacts with SpaceX Corp.'s Starlink service to bring satellite internet access to India. The distribution pacts are a reversal from the telecom industry's reluctance to quickly make the Starlink service available in India without auctions for the satellite airwaves.

What is Starlink?

Starlink, a SpaceX project, is a low-earth orbit satellite network providing internet access through ground terminals, already available in about 40 countries. It offers speeds around 100 Mbps, comparable to home broadband, though with higher latency. Satellites connect to ground stations that are linked to the internet, relaying signals wirelessly. In India, Starlink's impact may be limited in urban areas with strong 5G and broadband coverage but could significantly improve connectivity in rural and remote regions lacking terrestrial networks.

How much does Starlink cost?

Starlink has two main costs: the user terminal and a monthly access fee. In the U.S., residential kits cost \$149, and portable "roaming" kits cost \$349. In India, import duties and taxes could raise hardware prices to ₹17,000–₹40,000, excluding shipping. Monthly plans in the U.S. range from \$120 to \$165, and Indian prices may be similar, as seen in Bhutan, where plans cost 4,200–8,400 ngultrum (on par with the rupee). A premium "mobile priority" plan costs 21,000 ngultrum, offering priority access during network congestion.

When will Starlink be available in India?

Starlink faces regulatory hurdles in India due to strict oversight of internet services, especially technologies enabling access anywhere. SpaceX needs a Global Mobile Personal Communications by Satellite (GMPCS) authorisation under the Telecommunications Act, 2023. However, updated rules under the new Act are yet to be published, creating uncertainty about obtaining the authorisation under the previous law's provisions, which are still technically in force.

SpaceX faced hurdles in obtaining authorisation for Starlink in India, needing to disclose corporate ownership data, which it resisted abroad. While reports suggest this issue has been resolved, the company still requires security clearance from the Ministry of Home Affairs. Additionally, it is unclear if Starlink's ground stations in India are operational, as they must comply with the Telecom Act's requirement to install tapping equipment for law enforcement access, similar to other internet networks.

Starlink needs wireless spectrum allocation to operate in India. The government plans to allocate it without an auction, as satellite beams can be shared, unlike terrestrial telecom signals. However, telecom companies previously demanded an auction, with Reliance Jio citing the Supreme Court's 2012 2G scam ruling that all scarce natural resources must be allocated through auctions.



Is Syria heading toward peace or more chaos?

INTERNATIONAL RELATIONS

Syria faces political and military uncertainty after Bashar al-Assad's fall in December 2024. Interim President Ahmed al-Sharaa seeks international legitimacy while managing internal instability. A key agreement integrates U.S.-backed Kurdish SDF forces into the Syrian state, but conflict continues as Israel expands control in the Golan Heights. Sanctions from the Assad era further cripple the economy, hindering reconstruction.

Who leads the Syrian government?

After Assad's fall, power shifted to an interim government led by Ahmed al-Sharaa of Hay'at Tahrir al-Sham (HTS), which has rebranded as a governing authority, pledging to respect minority rights. However, the administration lacks full control, with Assad loyalists in Latakia and the SDF operating in the semi-independent Rojava region.

What is the current state of conflict

After Assad's departure, loyalist cells continue resisting in Latakia, while Turkish-backed SNA forces shell SDF positions in the northeast to curb Kurdish influence. Israel has intensified military operations, launching over 400 airstrikes in December 2024 and advancing beyond the UNDOF buffer zone in the Golan Heights, drawing UN condemnation for violating international law. Prime Minister Netanyahu defended the actions as counter-terrorism and demanded Syria demilitarise the region south of Damascus.

What about reports of Alawite massacres?

Sectarian violence in Latakia has surged, with reports of massacres against the Alawite community and 1,383 civilian deaths since December. Concerns of revenge killings have risen due to HTS's Sunni Islamist roots and claims of government security officers being HTS loyalists. Interim President al-Sharaa denied state involvement, blaming misinformation campaigns allegedly tied to Russia and Iran.

Why is Syria at risk of further violence?

Syria remains one of the world's poorest nations, with over 90% of its population living in poverty and many former combatants unemployed, creating a volatile situation. Assad-era sanctions continue to hinder economic recovery, though the U.K. and Canada have begun easing restrictions. Interim President al-Sharaa has called for a broader reconsideration of sanctions. Syria's future depends on drafting a new constitution that ensures minority rights and national sovereignty, with the coming months being crucial for stabilisation, international recognition, and economic rebuilding.

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