

Prelims Exam Topics

THEWA ART

Context

During PM Modi's visit to Slovakia, he gifted Thewa motif cufflinks to the Slovak President.

About Thewa Art

- **What it is:** A traditional craft involving fusion of hand-carved **23-carat gold foil** onto specially treated **molten glass**, without glue, solder, or synthetic adhesives. Uses a secret **thermal bonding process**.
- **Region:** Exclusively practiced in **Pratapgarh district, Rajasthan**.
- Awarded GI tag in **2013–14**.
- **Origin:** ~400 years old; invented in **1707** by master goldsmith **Nathulal Soni**, during the Mughal-Rajput era.
- **Royal Patronage:** **Maharaja Samant Singh of Pratapgarh (1760s)** patronized the craft, granted a **jagir** to the family, and conferred the title "**Rajsoni**" (**Royal Goldsmith**).
- **Transmission:** Craft secrets passed **strictly father to son** - kept exclusively within the male lineage of the Rajsoni family to prevent commercial imitation.



INTERNATIONAL SCIENTIFIC PANEL ON AI

Context

The United Nations established its first global scientific body on AI.

About International Scientific Panel on AI

- Established under United Nations General Assembly (UNGA)
- Composition: 40 globally recognized experts
- Term: Fixed 3-year term
- Indian Representative: Prof. B. Ravindran, IIT Madras
- Conduct objective, periodic scientific assessments of AI globally
- Decouple technical facts from geopolitics - analyzes science only; policy/politics left to state representatives in the Global Dialogue

THE VIJAYANAGARA-ERA INSCRIPTIONS

Context

An ASI expert team discovered three rare 16th-century inscriptions deep inside the Seshachalam forest range, Andhra Pradesh documenting King Sadasiva Raya's royal visit, donations, and temple construction.

About the discovered Vijayanagara-Era Inscriptions

- Three epigraphical records carved in stone, dated to the 16th century
- Written in trilingual format — Telugu, Tamil, and Kannada
- Documents King Sadasiva Raya's personal visit to Sadasivakona for a holy bath
- Records a royal donation (grant) and construction of a Siva temple + monastery (mutt) at Papavinasa in Sadasivakona

About King Sadasiva Raya:

Sadasiva Raya (1542–1570 CE) was the final sovereign ruler of the Tuluva Dynasty, which governed the powerful Vijayanagara Empire in southern India.

BHARATI PROGRAMME

Context

APEDA (Agricultural and Processed Food Products Export Development Authority) has successfully concluded the first cohort of the BHARATI Programme.

About BHARATI Programme

Objective: Foster innovation-led growth in India's agri-food export sector

Target: Empower 100 agri-food startups; boost APEDA-scheduled product exports to USD 50 billion by 2030

Programme Structure: 3-month acceleration covering product development, export readiness, regulatory compliance, market access

PM SHRI SCHOOL

Context:

Political disagreement in Kerala Assembly over participation in PM SHRI Scheme; State reconsidering after previously withdrawing from the MoU.

About PM SHRI School:

- Type: Centrally Sponsored Scheme (CSS)
- Nodal: Ministry of Education
- Objective: Transform selected schools into model institutions implementing NEP 2020
- Basis: Schools selected at Block/District level; MoU required between Centre and State/UT

EBOLA VIRUS

Context

Artisanal gold miners in Ituri Province, DRC continue working amid an Ebola outbreak.

About Ebola Virus

- Ebola disease is a severe, often fatal illness in humans.
- Ebola disease is caused by viruses that belong to the Orthoebolavirus genus of the filoviridae family.
- Three different viruses are known to cause large Ebola disease outbreaks: Ebola virus, Sudan virus and Bundibugyo virus.
- It is thought that fruit bats are natural hosts of the Orthoebolavirus.
- The virus can get into the human population when people have close contact with the blood, secretions, organs or other bodily fluids of infected animals such as fruit bats, chimpanzees, gorillas, monkeys, forest antelope or porcupines found ill or dead or in the rainforest.
- People can get infected with the virus from another person by direct contact.
- The symptoms of Ebola disease can be sudden and include fever, fatigue, malaise, muscle pain, headache and sore throat.

About DRC

- **Geographical features**
 - Second-largest country in Africa by area
 - Bordering Countries: Republic of Congo & Central African Republic (north/northwest), South Sudan & Uganda (northeast), Rwanda, Burundi & Tanzania (east), Zambia & Angola (south).
 - Congo River - second longest river in Africa; deepest river in the world.
 - Congo Rainforest - second largest tropical rainforest in the world (after Amazon).



- **Resources**

- Holds approximately 70% of global cobalt reserves - critical mineral for EV batteries.
- Ituri Province is rich in gold, coltan, and cassiterite. Coltan is used in capacitors for smartphones and electronics.

KIRTHAI-II HYDROELECTRIC PROJECT

Context

The Forest Advisory Committee (FAC) granted in-principle forest clearance for the 824 MW Kirthai-II Hydroelectric Project, part of India's accelerated push to maximise utilisation of western rivers following the suspension of the Indus Waters Treaty (IWT) framework with Pakistan.

About Kirthai-II Hydroelectric Project

- Type: Run-of-the-River (RoR) Hydroelectric Project
- River: Chenab River
- Location: Jammu & Kashmir

About Indus Waters Treaty (IWT), 1960

- Brokered by the World Bank between India and Pakistan
- Eastern Rivers (Ravi, Beas, Sutlej) → allocated to India
- Western Rivers (Indus, Jhelum, Chenab) → primarily to Pakistan
- India permitted limited non-consumptive use of western rivers — including run-of-the-river hydropower
- India recently suspended the IWT framework amid deteriorating bilateral relations

About Forest Advisory Committee (FAC)

- Statutory body under the Forest (Conservation) Act, 1980
- Examines proposals for diversion of forest land for non-forest purposes
- Functions under the Ministry of Environment, Forest and Climate Change (MoEFCC)

Mains Exam Topics

TRAUMA CARE IN INDIA

Context

The Supreme Court's ruling in the **Savelife Foundation case** transforms trauma care from a welfare measure into a **justiciable right under Article 21**, compelling state accountability in emergency healthcare.

Why Is It Important?

- **Preventable Deaths:** The first 60 minutes (Golden Hour) after an injury are the most important. If a person receives medical care during this time, the chances of survival increase greatly. In India, many victims do not get treatment within this period because of poor trauma care systems.
- **Right to Life as a Constitutional Duty:** The Supreme Court has made it clear that **Article 21** is not only about protecting people from government interference. It also requires the government to provide proper emergency trauma care.
- **Equal Access to Healthcare:** A standard trauma care system ensures that everyone can receive life-saving treatment, regardless of where they live or how much they earn.
- **Better Preparedness for Disasters:** A strong trauma care system with ambulances, and trained first responders, improves the country's ability to respond to floods, industrial accidents, terrorist attacks, and other major emergencies.
- **Supports Road Safety:** Trauma care is an important part of road safety. Better roads and stricter traffic rules can reduce accidents.

Key Challenges / Issues

- **Absence of a Uniform Trauma Framework:** Trauma care differs across States. India has no common national system for treatment, or referral. The Supreme Court has asked for a uniform framework.

- **Bystander Fear and Legal Concerns:** Many people do not help accident victims. They fear police questioning, court visits, or legal problems. This delays treatment during the golden hour.
eg., The **Good Samaritan Rules, 2020** protect helpers. However, they lack an effective grievance redressal system. The Supreme Court has now directed States to create one.
- **Poor Ambulance Infrastructure**
Many ambulances do not meet **AIS-125** standards. They lack proper equipment, trained staff, and GPS tracking.
- **Poor Implementation of PM RAHAT:** The **PM RAHAT** scheme provides cashless treatment for road accident victims. However, it is not fully implemented across all States and UTs. As a result, many victims cannot get immediate treatment.
- **Lack of Trauma Registries:** India has no national trauma registry. There is no real-time data on injuries, treatment, or patient outcomes. This makes planning and improving trauma care difficult.
- **Fragmented Emergency Response:** Helpline **112** is not fully operational across the country. Different emergency numbers such as **108**, **100**, and **101** work separately. This delays coordinated emergency response.
- **Weak Implementation of Existing Laws:** Laws such as **Section 162** (cashless treatment), **Section 134A** (Good Samaritan protection), and the **Good Samaritan Rules** already exist. However, they are not enforced properly. This shows a major gap between law and implementation.

Way Forward:

- **Integrate trauma care into Medical Education:** Mandate basic trauma life support (BLS) training for all medical graduates and paramedics
- **First Responder Training at Scale:** Train police, fire personnel, and highway workers in certified first aid — they often reach accident sites before ambulances
- **Rural Last-Mile Connectivity:** Deploy motorcycle-based first responders on accident-prone highway stretches where ambulance response is slow

- **Legislative Consolidation:** Enact a dedicated **Emergency and Trauma Care Act** consolidating scattered provisions across Motor Vehicles Act, Clinical Establishments Act, and NHM guidelines into a single enforceable framework
- **Private Hospital Obligation:** Mandate all registered private hospitals to provide stabilization care in trauma emergencies without precondition of payment, with government reimbursement through PM RAHAT

