

## Medical Devices Park, Genome Valley expansion plans in limbo

Hyderabad: The Medical Devices Park at Sultanpur and the Genome Valley at Shamirpet have played a crucial role in taking Telangana's life sciences sector footprint to a new level in the global market. That was in the past. Now, the expansion of these hubs is inexplicably getting delayed even as the demand for space continues to increase. The 'Made in Telangana' stents and other medical equipment, including surgical, ophthalmic and cosmetic medical devices and medical dressings, manufactured at the Medical Devices Park are being exported to over 89 countries. Similarly, the Genome Valley is now a hub for nearly 200 leading life sciences R&D institutions, incubators, clean manufacturing companies like Novartis, Glaxosmithkline and others.

Considering the growing demand for space and the potential for inviting more companies to set up their units, the Telangana government in the past had envisaged grand plans for expanding both the Medical Devices Park and Genome Valley. It has been one year since the Congress government

came to power in the State, but the expansion of Sultanpur Park and Genome Valley has not fructified so far.

Launched in 2017, the Medical Devices Park at Sultanpur in Patancheru is the country's largest medtech R&D, innovation and manufacturing cluster. Spread over 300 acres, it is also Asia's largest stent manufacturing facility with a capacity of a million stents and 1.25 million balloon catheters. The Medical Devices Park is strategically located with a 40 minute-drive from theHITEC city and a 50 minute-drive from the international airport. The BRS government had planned to expand the park by pooling in an additional 300 to 400 acres. To this effect, the Telangana State Industrial Infrastructure Corporation (TGIIC) was entrusted with the task to execute the expansion plans, particularly land acquisition.

According to TGIIC officials, the exercise got delayed due to land litigation. Things were being expedited, they said. On the other hand, the Genome Valley expansion also continues to get delayed for reasons better



known to the officials. In February this year, the State government had announced plans for expansion of the Genome Valley project with Rs.2,000 crore. In fact, at the inauguration of the BioAsia 2024 meet in the city,

Chief Minister A Revanth Reddy had declared that the State government would promote a 300-acre second phase of the project. After all these months, the plans remain confined to papers.

## Floating solar plant slowly moving towards reality in Lower Manair Dam



Hyderabad: As part of the plan of the State government to explore the possibilities of floating solar power plants in major reservoirs and pumped storage hydro-electric generation to meet the growing energy needs of the State through renewable resources, steps are being taken to set up a 300 MW floating solar plant on the Lower Manair Dam at Alugunur village of Thimmapur mandal in Karimnagar District. The Singareni Collieries Company Limited (SCCL) has already prepared the Detailed Project Report (DPR) for setting up a 300 MW solar plant on Lower Manair Dam. Delhi-based Power and Energy

Consultants Limited was entrusted with the task of preparing a pre-feasibility study to set up a 300 MW floating solar plant on the water of Lower Manair Dam at a cost of Rs. 1,640.66 crore and DPR for setting up 500 megawatt (2X250 MW) floating solar plants on the Mallanna Sagar reservoir. The company has reportedly sought permission of the State government to take up construction work on the reservoir. While the entire reservoir has an area of 81 square kilometres, it is learnt that Singareni has prepared for setting up a plant in about 9 square km.

The DPR has been reportedly designed

in such a way that even when the minimum water levels are maintained in the dam, the solar panels remain in the water. The LMD floating solar plant project is likely to cost around Rs. 3,000 crore. Singareni commissioned its first floating solar power plant with 5 megawatt capacity last January. The floating solar power plant has been established with a cost of Rs.26 crore on the reservoir waters of the company's 2x600 MW ther-

mal power plant at Pegadapalli in Jaipur mandal of Mancherial district. Local fishing communities fear that the installation of solar panels will disrupt aquatic ecosystems, reduce fish populations, and ultimately deprive them of their primary source of income and sustenance. However, the officials claimed that as the solar plant would be set up only on 10 percent of the reservoir water area, there would be no difficulties in fishing.

## Rising HIV, AIDS cases in Telangana's Khammam trigger concern

Khammam: There has been an upward trend in terms of human immunodeficiency virus (HIV)/ acquired immunodeficiency syndrome (AIDS) positive cases in the district in the last three years. Every month, as many as 40 new HIV positive cases are being registered. This year from April to October, blood samples of about 61,056 persons have been tested for HIV and of them, the blood samples of 285 persons came out to be positive. Similarly, the blood samples of as many as 17,628 pregnant women attending antenatal care (ANC) have been tested during the above period and of them, samples of 12 women tested positive for HIV, according to official data. District Medical and Health Officer Dr. B Kalavathi Bai informed that 6,732 persons who are tested positive for

HIV got registered at the Antiretroviral Therapy (ART) Centre at the Government General Hospital in Khammam to receive medication. ART pension is being given to 2,584 eligible persons. There are around 2,595 persons with high risk behaviour in the district, including 1,788 female sex workers, 727 homosexuals and 80 transgender persons. A non-governmental organisation, Jagruthi, has been making efforts to bring change in their behaviour while the YR Gaitonde Centre for AIDS Research and Education (YRGCARE) is working for the Link Workers Scheme (LWS), a community-based programme aimed at providing information and services to high risk persons in rural areas to reduce the risk of HIV/AIDS.



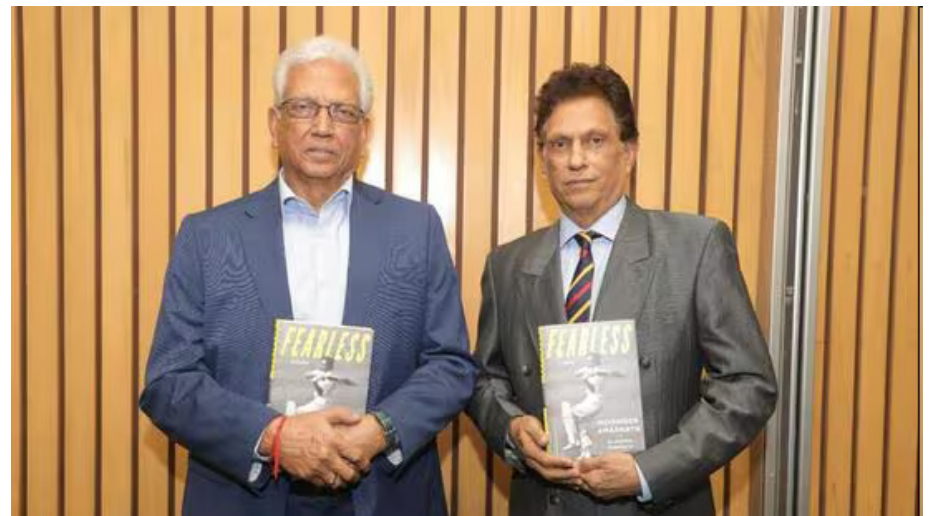
# 'Fearless' Jimmy Amarnath turns back the clock

New Delhi: Throughout a 19-year India career, Mohinder Amarnath was an epitome of guts and courage for his batting through the pre-helmet and post-helmet eras of cricket. He was equally hailed for his remarkable spirit, making a number of comebacks into the India team after suffering at the hands of the national selectors many times. A remarkable phase in the early 1980s saw Amarnath excel with the bat in Pakistan, the West Indies, and then help India rock the cricketing world by winning the 1983 World Cup, chosen the Player-of-the-Match in the semi-finals and final no less. His dubbing the national selectors a "Bunch of Jokers" after being snubbed for the home series against New Zealand in 1988 is part of Indian cricketing folklore. Around 36 years after his international retirement, 'Jimmy' Amarnath, now 74, with younger brother Rajender, has published *Fearless*, A Memoir, an engrossing narration of a rollercoaster 69-Test career in which the quality of performances -- 4378 runs; 9 of his 11 centuries came away from home -- make up for all those games he didn't get to play. And, of course, as the forceful figure in transforming Indian cricket's direction on that magical summer day at Lord's. We knew this series would be tougher than 1971. The obvious reason was that the West Indies had been humbled by Australia and they were desperate to salvage their reputation. Apart from that, memories of the series loss to India in 1971 had troubled them for years. The West Indies' cricket had found itself at a critical juncture; the captain along with several players were under the microscope. We were conscious that they would unleash their battery of fast bowlers against us. India lost the Barbados Test not because of destructive pace bowling but because of our poor handling of the spinners, Holford and Jumadeen. The pressure to take advantage of slow bowlers after facing express deliveries led to the downfall of many of our batsmen. Trinidad Test...

Once Bishan had the ball in his hand, he crafted a web so strong and effective that one batsman after another fell into his trap... Richards had gone past the half-century mark and his team was still in deep trouble. At this stage, Bishan enticed him with a flighted delivery, beating Richards with a vicious turn. Before he could regain his footing in the crease, the wicketkeeper had removed the bails. It was a big wicket for us. However, our jubilation was ruined by the leg umpire, Sang Hue, wearing dark glasses; he rejected the appeal. The close-in fielders were bewildered with the decision; ...After Bishan completed the over, he too could not hold back his disappointment; he went to the umpire in question and asked him about the decision. The umpire was frank and brief. He said, 'Bishan, you are here for a short time, but I have to live here!' Richards scored 130 before Bishan could get his revenge. Chasing world record 4th innings target I was happy to occupy the crease and frustrate the bowlers. To be honest, we were not chasing the target, but rather trying to save the Test match. My job at number three was to seal one end, no matter if runs merely trickled from my bat. Though it may sound strange, I smelled the leather more often than hitting the ball... When India achieved the milestone, celebrations commenced from the stands. Acknowledging the support of the ethnic Indians, I moved inside and removed my pads. Swelling with emotion, I covered my face with

a towel and tears instantly rolled down my cheeks! For the first time, I realized the importance of representing my country and tasting victory against all odds... Kingston Test 1976 The previous day, moisture on the pitch had not allowed the ball to skid and gather speed, but the conditions had changed. Seeing this, Clive Lloyd instructed the slip cordon to move a few yards back and he signalled the bowler to come round the wicket. It shocked everyone, including Gaekwad and me. We knew sighting the ball from this angle would be challenging. The sight screen could not be adjusted to spot the ball. Added to this were the hanging branches of a tree above the sight screen, occupied by enthusiastic spectators in multicoloured shirts, constantly shifting to get a better view, which drew our attention. The first session of the second day proved we were not playing cricket; we were at war... India managed to get 306 runs for the loss of six wickets, when Bishan decided enough was enough; he declared the innings at that score.

World Cup 1983 When the Indian team was finally announced, I had no idea about the squad. I received the news of my selection not from the BCCI, but through a friend in England! The general atmosphere around the event indicated little interest from the BCCI. For them, this World Cup was a mere formality and no more... I believe there was no farewell function or even any token encouragement from the higher-ups! The preparation for this event was the board's last priority, so they didn't bother holding any sort of conditioning camp. They felt it was an unnecessary expenditure. Before the start of the World Cup, it was customary for all the teams to assemble at Lord's for a get-together. Different shades of blazers made this event colourful. However, the BCCI created an embarrassing situation for the captain and vice-captain. Ours was the only team that exhibited the title of captain and vice-captain embroidered on the blazers in block letters. When I met Dennis Lillee, he seemed rather amused with the title and said, 'Oh, so you are the vice-captain of the Indian team?' The remark made me uncomfortable. After Lillee's comment, humorous as it may have been, I covered the pocket of my blazer with my left hand, fearing a similar question from someone else... Semis v England While bowlers cast magic spells on the English batsmen, the brilliant minds of Gavaskar and Yashpal came into action as well. They swapped positions without informing the captain. Allan Lamb and Gatting did not notice it either; they tried to steal another quick single, a decision that proved suicidal. Yashpal Sharma's direct throw at the bowler's end got rid of the dangerous Allan Lamb. After a brilliant start, England was crippled by our performance and managed to put up a rather modest total of 213. The British sports media was baffled by this result. They couldn't believe India could ever defeat England. My dreams were coming true. I had watched the 1975 World Cup final at Lord's and, ever since then, I'd dreamed of playing the finals at this venue. I pinched myself to check if it was all true. Final v WI We were disappointed with our performance; we failed to last the full 60 overs and were bowled out for 183. Before going to the field, Kapil addressed the team in a typical Punjabi accent: 'Chalo, jawano, ladte hain (Come on, boys, let's fight it out)!' Akin to soldiers, we marched out of the dressing



room and through the packed Long Room at Lord's... The winning moment

When the last pair of Holding and Garner occupied the crease, we sensed history in the making. We, the underdogs of the tournament, casually dismissed by pundits and critics, and the public, could see the shores of the promised land! The last pair kept us waiting for some time. When Kapil operated from the pavilion end, I muttered a prayer: 'God, please don't let Kapil take the last wicket!' This was not for reasons of personal glory but for safety. I wondered how I would cover the distance from the point boundary to the pavilion through the excited crowd! The frenzied images of the Manchester semi-final flashed back to me. After the victory I could have picked the ball or bails, but got so nervous seeing the tsunami of people running towards the pitch. I left everything and ran for my life like Carl Lewis. My mad dash to the pavilion was probably the fastest 100-

metre sprint of my life! ... The dressing room was like an open house; hundreds of people thronged to greet us. I did not recognize half of them, each eager to hug the nearest player. The celebrations continued outside the pavilion too. Thousands of Indian supporters gathered below the Lord's dressing room's balcony, waving their Indian flags and repeatedly chanting, 'India! India! Bunch of Jokers after snub v N Zealand Tests, 1988 The Indian team was staying at Taj West End; hence the presence of the media. It was a perfect place to express my feelings... The news spread like wildfire amongst the journalists and they reached the designated room for a much-awaited press conference. I did not waste any time and said, 'I have undergone disappointments in my career, but this one takes the cake. Time has come to set the record straight and speak my mind. The present set of selectors are unfit for this job. They are a BUNCH OF JOKERS!'

## Good sleep linked to healthy aging: Study



New Delhi: A team of Chinese researchers found that healthy and successful ageing is determined by sleep patterns. The team from Wenzhou Medical University in China defined successful ageing, as the absence of major chronic diseases such as diabetes, cancer, chronic lung diseases, heart disease, and stroke; having good cognitive and mental health; and with no physical impairments. The study called for maintaining stable and adequate sleep durations to promote healthy ageing. "The findings underscore the critical importance of monitoring dynamic changes in sleep duration in middle-aged and older adults," said the team in the

paper, published in the journal BMC Public Health. In the study, the team analysed 3,306 participants who were free of major chronic diseases in 2011 and had reached age 60 or older by 2020. The team combined nighttime sleep and daytime naps to calculate total daily sleep hours in 2011, 2013, and 2015. The researchers identified five distinct sleep duration trajectories: normal-stable (26.1 per cent of participants), long-stable (26.7 per cent), decreasing (7.3 per cent), increasing (13.7 per cent), and short-stable (26.2 per cent). People with increasing and short stable sleep trajectories exhibited significantly lower odds of successful ageing.



# Finnish Independence Day: Finland's journey from Cold War neutrality to NATO membership

During the cold war, Finland was known as the border country between East and West. Neutrality was the key word. There was a Treaty of Friendship and Mutual Assistance with the Soviet Union, but Finland was a Nordic democracy with Western values. Today, Finland is firmly anchored in Western structures. The Nordic countries remain our closest cultural reference group. We have been full members of the European Union since 1995, and last year Finland joined the NATO defence alliance.

For many years Finland cooperated closely with NATO without applying for membership. The so called NATO option, to apply if needed, was included in many government programmes. The Russian attack on Ukraine in February 2022 changed the mindset of both political parties as well as the wider public. Along with Sweden, Finland applied to become a member of NATO and became the 31st member of the alliance in April 2023.

Today, Finland's foreign and security policy is found on value-based realism. We stand by the values that we believe are important: such as democracy, the rule of law, human rights, equality and non-discrimination. We think that international law and universal norms are in the interest of all humanity. However, a realistic worldview suggests that not everyone agrees to these

views. This means that it may be necessary to seek compromises, or to make concessions to be able to solve major global crises. Compromises are required to end wars and tackle climate change, and compromises are needed for the global economy to function. All of this can be achieved only through dignified and respectful communication based on international diplomacy.

A realistic view also means that it is important to be prepared for conflict. Finland's defence is based on a strong national defence capability as part of the NATO's collective deterrence. Although the population is small, Finland maintains a general conscript service and a credible air force, among other things. The present Government will complete the Defence Forces' strategic capability projects in the coming years. Rules-based order Finland believes that a rules-based international order with guiding principles regarding trade, peace and security, human rights and development are in everyone's interest. Without universally agreed rules and norms we cannot tackle global challenges like climate change. We all know that melting ice and rising temperatures do not respect national borders. As multilateral co-operation structures are challenged, bilateral cooperation and various groupings become increasingly important. The Global South will play a decisive role in



what the future of multilateral cooperation will be. Here, India is a very important and active player. Owing to its size, India's policy decisions and actions are always global in nature. This year, Finland and India celebrate 75 years of bilateral diplomatic relations. As far back as 1949 – just two years after India gained independence in August 1947 – our countries established full diplomatic relations. In September 2022 the Consulate General in Mumbai was established. The decision to establish a presence in Mumbai reflects the growing and strengthening ties between our

countries across various sectors. The second diplomatic mission of Finland to India is still the youngest Finnish representation in the world. On the global stage, Finland recognizes the growing importance of India and values its active role. The G-20 Presidency in 2023 was a notable success. Indian initiatives like the International Solar Alliance and the International Biofuel Alliance are laudable. In turn, Finland will take on significant responsibilities by chairing both the Organization for Security and Cooperation Europe (OSCE) and the Nordic Ministerial Council in 2025.

## The syndemic of tuberculosis and mental health

In 2022, 2.42 million Indians were diagnosed with tuberculosis. A silent crisis, TB is associated with a deep stigma, and those affected have stories of being ostracised and mistreated by families, communities, and even the health system. All of this has a significant impact on the mental health of those fighting TB. In truth, TB and mental illness are co-epidemics. Evidence suggests that people with mental health issues are more likely to develop TB. Also, TB-related stigma adversely impacts a TB-affected individual's mental health from diagnosis through treatment and its side effects. TB-related mental health issues also significantly diminish an individual's quality of life. Why does this happen? TB is stigmatised due to the fear of contagiousness, association of the disease with poverty, and unhealthy behaviour. This leads to both social and self-stigma, which leads to mental health challenges. These mental health issues lead to general feelings of hopelessness, despair, and impaired decision-making skills, which can also lead the individual to lose hope in recovery, not be able to follow medical advice, discontinue treatment, etc.

Physical scars TB treatment is long and comes with extreme side effects. This leads to several mental health issues that affect the individual and sometimes even families who are providing care. Those affected see changes in physical appearance, extreme side effects from rashes to psychotic episodes, and loss of self-confidence. It comes

as no surprise that the mental toll often parallels the physical damage. Up to 84% of patients with TB have concomitant depression. It's important for policy and programmes to recognise that the association of TB and poor mental health is bidirectional. While the TB stigma, prolonged treatment, and adverse side effects can have deleterious effects on an individual's mental health, poor mental health can also predispose a person to TB. A weakened immune system known to be associated with mental stress and depression possibly contributes to vulnerability. In addition, addiction to tobacco, alcohol, and narcotics, all associated with mental health disorders, has been associated with a high incidence of TB, suggesting a causal association. The global burden of disease study estimates that in 2017, 197.3 million (95% UI 178.4–216.4) Indians had mental health disorders, making such persons a sizable TB high-risk population. Standards of care in TB now mandate screening for diabetes and HIV infection among those diagnosed. Shouldn't we also screen for depression and other mental health issues? In a global survey of national TB programmes (NTPs) of 26 countries, it was found that only two NTPs included routine screening for any mental disorder, four assessed alcohol or drug use, and five had standard protocols for the co-management of disorders. India needs to lead the way with a comprehensive framework and policy on TB and mental health. This should incorpo-

rate mental health screening as part of TB care. Studies have used simple questionnaires to screen all patients with TB at the time of diagnosis and these have yielded a good sensitivity. These questionnaires can be self-administered, or administered by community health workers or DOTS providers. Offering psychological support during treatment should also be a standard of care, with the knowledge that treatment can be arduous and stressful. Screening for mental stress

Offering mental health supportive services is needed not only from the perspective of the individual patient but also from a perspective of arresting TB transmission. Studies have demonstrated that those with unaddressed mental health disorders are less likely to adhere to treatment, more likely to drop out of the treatment programme, and have a higher risk of poorer outcomes.

Once screened, we need to address the need for psychological support. While the challenges of limited personnel numbers remain, multiple studies have demonstrated the effectiveness of remote digital therapies such as cognitive behavior therapy for mild depression. App-based solutions, augmented with artificial intelligence, have been promising. India could leverage smartphone penetration to deliver such services if they are not available locally. As is the case for most community-based mental health interventions, we need to move out of hospitals and deliver such services close to

communities. There is also an urgent need to engage with communities not just to be spokespersons but also to work with those affected through support groups and informational support both to affected individuals and families. This has been done successfully in certain small experiments but now needs to be expanded at a national level to create community-based support systems and destigmatize mental health and TB. The community needs to be stakeholders at all levels in both policy and programme design.

When care needs to be escalated, pathways for early referral to psychiatrists and prompt initiation of treatment need to be in place. This is likely to be challenging, considering the dearth of psychiatrists in the country. Given the magnitude of the burden of mental health disorders in the country, training more psychiatrists to serve an unmet need needs to be prioritised.

We cannot eliminate TB from India unless we comprehensively address the mental health care needs of TB-affected individuals. Addressing the intersection of TB and mental health demands a collaborative and comprehensive approach. Policymakers must focus on creating integrated policies that provide MH support. They also need to allocate resources and prioritise MH services within TB programmes. We need to start by recognising that TB and mental health are commodities, and the integration of mental health care in TB care is needed at every step of the TB care cascade.



# Why do patients who have been treated for mental illnesses continue to remain at institutions in India?

On a rainy September morning in Karjat, on the outskirts of Mumbai, 25 patients from the Regional Mental Hospital (RMH), Yerwada, arrived at the Shraddha Rehabilitation Centre, run by an NGO, to be reunited with their families. Many of these patients had been residents of RMH for over five years; some living there for years, even after being treated and cured. Among the patients was Lukhi, a woman in her 40s, standing in a queue, fiddling with her bangles and waiting to speak to her psychiatrist. All she asked him when her turn came was: "Ghar chod do ge na?" You will let me go home, right? Lukhi was brought to the RMH in 2016 and lived there for eight years even though she was fit to be discharged within a year. It was only on September 10 this year, after the NGO collaborated with the RMH for rehabilitation that the process of reuniting her with her family began. Lukhi's is not an isolated case. Hundreds of patients have been residents of government-run mental health institutions for years, even after having completed their treatment, in facilities in Maharashtra and across India, experts and activists say. Last year, the National Human Rights Commission stated that over 2,000 patients who were fit to be discharged continued to remain at 47 government mental healthcare institutions in the country. Of these, over 900 were in four facilities in West Bengal. The NHRC 2023 report states: "none of the institutes have taken effective and long-term measures to ensure that a mentally ill person can exercise his right to community living unfettered." A study by The Hans Foundation, a public charitable trust, in 2019 found that the median duration of stay of a mentally ill person at an institute was six years. The study, 'National Strategy for Inclusive and Community Based Living for Persons with Mental Health Issues' that covered 44 mental health institutes in the country, found that 48.8% of patients had lived in these facilities for one to five years while 11.4% had lived there for over 25 years. In 2022, Mumbai-based psychiatrist Harish Shetty filed a petition in the Bombay High Court, taking up the matter of a woman who had been a resident of the Regional Mental Hospital, Thane, for 12 years. His plea said that this was a violation of the provisions of the Mental Healthcare Act, 2017 and also violated the right of the individual.

During the hearings, the Bombay High Court noted that 1,022 patients across four hospitals in Maharashtra were awaiting discharge despite being declared fit. A similar concern was raised by the Court in October 2023, over 379 patients who had been residents at the hospital for over 10 years. In March this year, the court pulled up the State Mental Health Authority (SMHA) for its 'chronic failure' in enforcing the Mental Healthcare Act. It asked the Mental Health Review Board (MHRB) to review these cases. Speaking to The Hindu, Dr. Shetty said, "A myth that people believe is that once one is admitted to a mental health institution, one will stay at the hospital for life. I wanted to break this myth." Dr. Shetty also pointed to the need for facilities to engage with families right from the time of admission, and see to it that patients are reunited as soon as their treatment is completed. "This has to be the top priority of all institutions. Mental hospitals are not dumping

grounds for the mentally ill," he said. While some avail of treatment and then rejoin their family/re-enter society, some continue to remain at the institutions, sometimes for years or even decades. While some avail of treatment and then rejoin their family/re-enter society, some continue to remain at the institutions, sometimes for years or even decades | Photo Credit: Snehal Mutha

What the Mental Healthcare Act says Most patients of mental healthcare institutions are brought by their families who do not have access to mental healthcare services in their hometowns or are unable to care for their loved ones, or are brought in by the local police if they are found to be wandering and mentally ill. Lukhi falls into the second category. While some avail of treatment and then rejoin their family/re-enter society, some continue to remain at the institutions, sometimes for years or even decades. Under the Mental Healthcare Act of 2017 a person cannot be admitted to a hospital/mental health institute for more than 90 days. This admission can be extended, or the patient can be readmitted for up to 90 days in cases of patients who still require care, but the State's Mental Health Review Board (MHRB) has to review these cases. The law however, is often not implemented on the ground, say experts. Mumbai-based psychiatrist Swarali Kondwilkar said that often institutions do contact families of patients when they have their details, but in the case of patients from other cities/States, this may be neglected. "The institution does not have the will to go the extra mile and find the family, whereas families with scarce financial resources are unable to travel and find their relatives/bring them back home. In some of these cases, it is assumed that the patient is abandoned." When language is an obstacle Language is also a barrier in several cases. Ask Tulsa anything and her reply is 'nanu', which, her social worker says, means 'don't know'. Tulsa, who is in her sixties, has been a resident of RMH, Yerwada, since 1990. Officials believe she belongs to a tribal community in Gujarat. Tulsa does not understand Hindi, which created a communication gap and is one reason she has spent 35 years of her life in an institution, far from her family. Ramon Magsaysay awardee and psychologist Bharat Vatwani said many institutions have patients from across the country, and so, language is key to helping trace family backgrounds. If hiring multilingual mental health staff is not viable, she said, then efforts should be made to create a centralised system where mental health facilities across the country were linked to each other, so patients could at least be transferred to their home State to facilitate easier reunification with families. In some cases, the patient remains because they have nowhere to go. Bina's story is one such case. The 40-year-old was admitted to Ratnagiri Hospital in 1998, but only brought to a rehabilitation centre in December 2023. An NGO learned that Bina's in-laws and her spouse had abused her, which exacerbated her illness. Bina's family refused to take her back, and since then, she has been living with the NGO and working as a member of their support staff. Bina still asks, "Mujhe ghar chodoge na?" You will take me home right?

Lukhi was reunited within five days of her discharge from the mental health facility.



On September 15, she saw her children -- two sons and a daughter -- after eight years. Lukhi does not remember how she landed in Pune from her hometown, Kalipehari village in Paschim Burdwan district, West Bengal. She only remembers the police taking her to a mental health facility. Confirming her story, her brother Shrikant Soren, 28, said, "She just left one day from her in-laws' home. We kept looking for her, but she was nowhere to be found." In 2020, Shrikant learned that Lukhi was in Pune, but could not bring her back home due to the Covid-19 lockdown. "No further communication could happen with the hospital. We lost all hope, but when we saw her, it was a miraculous moment," he said, overcome with tears. "Many women with mental illnesses are from poor backgrounds and may not be literate. Usually, their village is the only place they know -- they may not even know their exact addresses. Some have suffered domestic violence at the hands of their husband or in-laws or left because of postpartum depression. These experiences can exacerbate an already existing mental illness and if left untreated, their condition worsens," said Dr. Kondwilkar. Of patients who have been treated and cured, women are disproportionately among those who have nowhere to go to, and, experts say. Of patients who have been treated and cured, women are disproportionately among those who have nowhere to go to, and, experts say | Photo Credit: Snehal Mutha Families under pressure Experts say that many families are also simply not able to afford the time and costs involved in caregiving. Reduction in family sizes, as is common nowadays, adds to this pressure.

Families are often overwhelmed by the process of seeking treatment and caregiving, and acceptance of a diagnosis of a mental illness does not come easily to many, said Padmavati Ramachandran, director, Schizophrenia Research Foundation, Chennai. "Stigma continues to persist against persons with mental illnesses. Families may be afraid to allow their relative to mingle with others due to fears of their being called names or perhaps worries over their possibly unpredictable behaviour. When this continues, the caregiver also starts withdrawing from social activities -- the whole family is then affected, and may feel that leaving the patient at an institute is their only choice." There is also, pointed out Lakshmi Narasimhan, director, The Banyan, a Chennai-based NGO

working in the mental healthcare space, a large deficit between treatment that is to be provided and the financial outlays that exist. The scale of the problem is large but investment in it is low, and there is no leadership to initiate programmes that can help people with psycho-social diseases reintegrate into the community -- which is possible if they are provided with the required support. All these factors, she says, also contribute to the institutionalisation of patients -- a phenomenon that has been ongoing since colonial times.

Of patients who have been treated and cured, women are disproportionately among those who have nowhere to go to, and, experts say, this is a problem that is starker in urban areas compared to rural communities. Lack of space, smaller households and higher costs of living in urban cities could all be factors that contribute to this. Kavita for instance, was a patient at RMH but was discharged two years ago; however, her brother, who lives in Mumbai, is unable to care for her and has said he cannot take her to his home. Since then, she has been working at the Shraddha Rehabilitation Centre and is currently pursuing a degree in law. Following Dr. Shetty's PIL, the discharge of patients has taken off from the four mental health facilities in Maharashtra -- in Thane, Pune, Ratnagiri, and Nagpur. These facilities have a total capacity of 5,500 beds and house around 2,800 patients. Thane Mental Hospital deputy superintendent Prachi Chivate said, "From January to August this year, 218 patients were discharged, whereas in 2023, only 70 were discharged." At present, said Swapnil Lele, director of the State Mental Health Authority, around 500 fit-to-go patients are still living in mental health facilities across Maharashtra. "We are taking different initiatives to rehabilitate them, but we face our own set of challenges, including families not wanting to take their relatives back, and patients who can't remember their addresses," he said. This is exacerbated by systemic challenges: "Despite the Court's order, which has been significant in forming the MHRB in Maharashtra, a lot of things are still hanging halfway. Substantial progress has been made in de-institutionalising patients, but the process becomes time-consuming when officials do not cooperate. Discharging patients and reuniting them with family is possible, but it involves a lot of convincing of the administration, which makes it tedious," said a member of the Thane Mental Health Review Board.



# Uttar Pradesh Deputy Chief Minister Keshav Prasad Maurya Leads Roadshow for Prayagraj Mahakumbh-2025 in Hyderabad

The Uttar Pradesh government, led by Chief Minister Sri Yogi Adityanath, is dedicated to making Mahakumbh 2025 a global symbol of India's cultural unity. As part of this endeavor and vision, Deputy Chief Minister Sri Keshav Prasad Maurya led an grand roadshow in Hyderabad. He highlighted the Mahakumbh as a unique celebration of unity within India's diversity and extended an invitation to the people of Telangana to participate in the Prayagraj Mahakumbh-2025. The Deputy Chief Minister emphasized that the government is taking significant steps to ensure the event is historic, featuring international participation and state-of-the-art facilities. Speaking to the media after the roadshow, he stated that the Mahakumbh embodies the spirit of India's cultural and spiritual consciousness and is a divine and vibrant representation of 'Ek Bharat-Shreshth Bharat-Samaveshi Bharat (One India, Great India, Inclusive India).'

During the press conference, the Deputy Chief Minister reminded, "Many of you may have witnessed the 'divine and grand' experience of the Prayagraj Kumbh in 2019, which became an indelible symbol of India's cultural pride on the global stage. The world widely acknowledged the efficient management of the event." He further emphasized that this year's Mahakumbh will surpass the previous one in both grandeur and divine essence. Prayagraj Mahakumbh-2025 is expected to welcome over 450 million pilgrims, saints, ascetics, and tourists. In preparation, the Uttar Pradesh government has made meticulous and timely arrangements. During his address to the press, the Deputy Chief Minister stated, "Under the inspiration and guidance of Honorable Prime Minister Shri Narendra Modi and the leadership of Chief Minister Shri Yogi Adityanath, the Mahakumbh will take place in Prayagraj from January 13 to February 26, 2025, on the sacred banks of the confluence of the Ganga, Yamuna, and Saraswati rivers. Recognized by UNESCO as an Intangible Cultural Heritage of Humanity, the Mahakumbh will once again be held on the holy land of Prayag after a gap of 12 years." Swachh, Swasth, Surakshit and Harit Mahakumbh

Addressing the media regarding the preparations for the Mahakumbh, the Deputy Chief Minister informed, "It would be a clean, healthy, safe and digital Mahakumbh. A pledge has been taken to make the event environment friendly by declaring it a single-use plastic-free Mahakumbh. As part of this initiative, various shops of dona-pattal vendors will be allocated within the Mela area, and meetings have been conducted with principals of 400 schools to discuss cleanliness and the initiative of a clean Maha Kumbh is being communicated to 4 lakh children and 5 times the population of Prayagraj. Furthermore, under the 'Har Ghar Dastak' campaign, the message of a single-use plastic-free environment is being delivered to every household."

He highlighted that special emphasis has been placed on making Mahakumbh Mela 2025 both clean and green. Approximately three lakh plants have been cultivated across Prayagraj, with the Uttar Pradesh government pledging to ensure their care and maintenance even after the conclusion of the Mela. Comprehensive healthcare services for pilgrims, sadhus, saints, and tourists



The Deputy Chief Minister informed that the preparations for the Mahakumbh Mela are being made with a focus on health and hygiene. This includes making healthcare arrangements for pilgrims, sadhus, saints, those observing Kalpwas at Mahakumbh and tourists. A large number of specialist doctors have been deployed. A 100-bed hospital has been set up at the Parade Ground. Two more hospitals with 20 beds each and smaller hospitals with 8 beds have also been prepared. Two 10-bed ICUs have been set up by the Army Hospital at the Mela area and Arail. These hospitals will have doctors on duty 24 hours a day. In total, there will be 291 MBBS doctors and specialists, 90 Ayurvedic and Unani specialists, and 182 nursing staff. Moreover, separate wards for male, female and children have been set up in these hospitals. Delivery rooms, emergency wards and doctors' rooms will also be available. Devotees will also experience the digital Mahakumbh - Deputy Chief Minister. Addressing the press, the Deputy Chief Minister stated that the Uttar Pradesh government is committed to organizing a divine, grand, and digital Maha Kumbh. The preparations include the launch of a dedicated website and app, an AI-powered chatbot in 11 languages, QR-based passes for people and vehicles, a multilingual digital lost-and-found center, ICT monitoring for cleanliness and tents, software for land and facility allocation, multilingual digital signage (VMD), an automated ration supply system, drone-based surveillance and disaster management, live software for monitoring 530 projects, an inventory tracking system, and integration of all locations on Google Maps. Smart parking facilities will be provided for the convenience of tourists - Deputy Chief Minister. Deputy Chief Minister informed that

arrangements have been made to ensure tourists do not face parking issues. In this regard, 101 smart parking facilities have been created, capable of accommodating up to five lakh vehicles daily. The parking area

spans 1,867.04 hectares, which is 763.75 hectares larger compared to the 1,103.29 hectares allocated for parking in 2019. These parking facilities will be monitored through the Integrated Control Command Center.

## Supreme Court sets aside NGT order imposing 3 crore fine on mining firm

The Supreme Court on Thursday (December 5, 2024) set aside an NGT order imposing around ₹3 crore fine on M/s Govardhan Mines and Minerals as compensation for damages to the environment on account of illegal stone mining activities in the Dadam Hills of Tosham at Bhiwani, Haryana. Asking the National Green Tribunal (NGT) to deal with the case afresh, a bench comprising Chief Justice Sanjiv Khanna and justices Sanjay Kumar and Manmohan took strong note of the green panel's order and said it did not deal with the contentions of the firm and adopted the report of a committee set up to ascertain illegal mining. "This order does not deal with the contentions raised by the mining company (M/s Govardhan Mines and Minerals). The arguments of the parties are needed to be dealt with by the first court which is NGT here," the CJI said. The bench accepted the submissions of senior advocate Shyam Divan, appearing for the mining firm, that the NGT did not deal with the contentions of the company and based its findings on the committee's report which was wrong. The CJI, however, did not agree with Divan's legal submission of "res judicata". "Res judicata" is a legal doctrine that prevents a court from re-examining a case

that has already been decided by the same court which means a litigant cannot be vexed again and again on decided issues. Mr. Divan argued that the issue of the alleged illegal mining was previously decided by the NGT and the same could not have been re-agitated by the panel in another case. On August 26, 2022, the NGT issued a detailed order penalising the mining firm for illegal and unscientific mining and also laid out directives for environmental restoration and strict compliance with safety norms. The tribunal's order followed a series of investigations and reports that allegedly exposed violations, including mining beyond permissible boundaries and non-compliance with the approved mining plans. Illegal mining in forest zones. A fact-finding committee led by Justice Pritam Pal, a former judge of the Punjab and Haryana High Court, concluded that illegal mining extended beyond the approved area, including forest zones and beyond permissible depths. The committee held there were gross violations of environmental clearance conditions and mining plans, including the failure to maintain the required 7.5-meter green belt and safety zones within the leased area. It had imposed a penalty equivalent to 10% of the value of illegally mined material.



# Trigger-happy teens strike terror in NE Delhi

And he's unapologetic. Brash, even. He flaunts his crimes on Instagram for an audience of thousands. His feed brims with bravado, showcasing weapons, taunts and an unsettling confidence. Now 17, the boy is a core member of the infamous "Makoka 315" gang — a chilling assembly of minors that has unleashed terror in northeast Delhi. They revel in violence — shootings, stabbings, and killings — and flaunt their exploits online. The gang's name is a nod to the stringent Maharashtra Control of Organised Crime Act, also known as MCOCA, a law meant to crush criminal syndicates. The "315" refers to the bore of the crude pistols they wield with unnerving ease, says a Delhi Police head constable tracking the gang and working to dismantle their functioning.

Their crimes have cast shadows over northeast Delhi: a shooting at Guru Teg Bahadur (GTB) Hospital, the November 9 murder of a 24-year-old in Kabir Nagar, a stabbing in Jafrabad, and countless firings in crowded neighbourhoods. They frequently boast of their crimes on social media and post videos of themselves going to observation homes and appearing in courts. HT spoke to a 16-year-old member of Makoka 315 on an open street. Dressed in blue jeans and a red shirt with the words "Gangsta" emblazoned unobtrusively across the chest, the boy, who asked not to be named, screamed languidly. He boasted of the three murder cases against him with disinterest. "Yes, we do it (crime). We go to jail and come back in a few months. What's the worry?" he said, scrolling through his phone. The minor declined to reveal where the gang gets its weapons. "I can't share such details with you". On whether he lives with his parents, the boy said: "I show them my face occasionally... that's enough... I don't want the life they live." During the conversation, the boy, who is mostly hooked to Instagram where he has 3,000 followers, says that he operates social media handles for two of his friends in "Bachcha Jail" — their nomenclature for observation homes — ensuring that their infamy doesn't wane. "We make videos in advance and post them regularly. It's important for our clout in the area and generally in our circuits" he said.

Refusing to speak further, the boy leaves abruptly on a black bike. The formation of 'Makoka 315' In 2020, three minors, aged between 13 and 16, including the 13-year-old mentioned above, shot a gym trainer in Jafrabad over a petty insult. "The trainer slapped one of the boys and they saw this as an opportunity to establish their clout in the area. They went to his house and shot him," the officer said. Around the same time, two teenagers — aged 16 and 17, both social media-savvy residents of Seelampur and Vijay Park — murdered an ice cream seller in Yamuna Vihar. It was their way of "announcing their arrival in Delhi's underworld", said investigators. Around the same time, two teenagers — aged 16 and 17, both social media-savvy residents of Seelampur and Vijay Park — murdered an ice cream seller in Yamuna Vihar. It was their way of "announcing their arrival in Delhi's underworld", said investigators. A year later, aged 14, he fired outside a house in Welcome area. The same year, he was allegedly involved in

murdering a police informant in Maujpur. He was apprehended and sent to an observation home, but released in a few months. Investigators said that gangs seek out minors to carry out heinous crimes like murders as well as petty thefts because they are sent to observation homes only for four to six months before being released. The fact that the cycle of events — from a juvenile committing the crime to his apprehension, time spent in an observation home and subsequent release — is less time consuming makes minors easy hires. In 2023, aged 16, he was involved in a firing and robbery incident with some friends in a club in Karol Bagh. "We believe the gang was formed in early 2023 when all these minors who committed murders joined hands and started operating under the name Makoka 315," the officer cited above said. The officer said that they live in the same neighbourhood where they got acquainted and decided to "work together". The gang was earlier headed by a 21-year-old man who was arrested in July in the GTB shooting case. But now, it is headed by a 17-year-old currently lodged at an observation home where he was sent after his involvement in a murder on November 9. These minors quickly became pawns in the broader nexus of Delhi's gang wars. "The 21-year-old (mentioned above) is closely associated with this gang, but he has since formally joined the Hashim Baba gang," the officer said. Links to Hashim Baba

Their exploits caught the attention of the Hashim Baba gang, one of the city's most feared criminal networks, linked to notorious gangster Lawrence Bishnoi. Makoka 315, by their own admission and according to police probe findings, operates as an auxiliary of the Hashim Baba group. "The gang's links to Hashim Baba were known for a long time, but it was established during the investigation of GTB shooting. The former head (the 21-year-old) of the Makoka gang was tasked with the hit job," said the head constable cited above. Its members, most still in their teens, carry out murders, robberies, and intimidation for as little as ₹15,000– ₹20,000 — a pittance compared to what seasoned gangsters charge, which runs into lakhs depending on the fame and work of particular gangsters. "They're cheap, fearless and considered expendable. Moreover, since they're minors, it makes them hard to prosecute under stringent laws," said a senior officer. In one chilling episode in May, gang members surrounded a 35-year-old man in Jafrabad and stabbed him multiple times. The murder, recorded on video, went viral. "Two days before the killing, a Hashim Baba associate treated the boys to a party, bought them new clothes and shoes before handing them ₹15,000 for the job," the officer cited above said. Mostly, the members of the gang get money and weapons from Hashim Gang, but some — not all — also commit petty crime like snatching and robbery to maintain their extravagant lifestyle. "They don't want to be known for petty crimes, which is why not all of them are sold on snatching," the officer said. Their social media presence is a grotesque blend of gangster rap soundtracks, reels of weapons, and clips of police escorting them to observation homes. To their growing audience, these moments are badges of



honour. Comments under their posts are filled with emojis and messages of admiration from young fans. "They take pride in going to observation homes and boast about it on social media. They believe it will increase their clout," the ASI said. Most of the gang members have thousands of followers on Instagram, a few even have 100,000 or more. For law enforcement, the challenge is immense. The Juvenile Justice Act, designed to reform young offenders, is being exploited by gangs to recruit minors who return to the streets within months of committing violent crimes. "The leniency offered to minors by the system only emboldens them," said an investigator. Strayed from their families for these teenagers, crime is both survival and

spectacle. Many live away from their families, renting rooms together or staying in cheap hotels. The grandmother of a 17-year-old gang member said that he was "okay" till his mother was alive four years ago. He studied till Class 5 and then dropped out of school. "After his mother's death, he fell astray. He stopped listening to his father and became friends with the boys who were into drugs and drinking and crime," the 65-year-old said. Whenever he comes out of observation home, his grandmother said, he visits her once or twice. "In a few months, he does something and goes back to the observation home," she said. "In a few years, either police or someone else will kill him, and we'll find him dead on a road."

## US travel advisory exposes how Telangana govt underreported Chikungunya cases

Hyderabad: The travel advisory on the large number of chikungunya cases in Telangana, released by the US Centres for Disease Control and Prevention (CDC) on November 8, is not only an embarrassment for the State's public health department but is also a reflection of the widespread culture of underreporting of seasonal ailments. Based on the feedback from private healthcare institutions and senior doctors in Hyderabad, it was clear that between July and October of this year, Hyderabad and the districts of Telangana were under the grip of dengue and chikungunya, the twin vector-borne ailments spread by the bite of the *Aedes aegypti* mosquito. Since dengue and chikungunya have common symptoms, all fever and joint pain cases were being labelled as dengue infections in Hyderabad. The CDC advisory from the United States is a clear indication that the State's Public Health department was not even inclined to look to confirm chikungunya cases, which needs additional and appropriate care, when compared to dengue.

What did the CDC actually say?

In its briefly worded advisory, the CDC alerted people flying from and to the US about the large number of undiagnosed cases of chikungunya in Telangana. "CDC has identified a higher-than-expected number of

chikungunya cases among US travellers returning from the State of Telangana, India," the advisory said. Senior doctors in Hyderabad have said the advisory is a clear indication that a lot of travellers had Chikungunya but many of them were not treated fully. As a result, by the time such individuals reached the US, they still had chikungunya, which was detected by the mandatory tests that are done as a part of the disease surveillance program in the US. Chikungunya vs Dengue While both dengue and chikungunya have a common mosquito vector (*Aedes aegypti*), there is a lot of difference in the symptoms and treatment modalities. One of the major challenges with chikungunya is that it tends to have a long-term (chronic chikungunya) impact on patients. While patients with dengue recover quickly if diagnosis and medication is done at the right time, there are numerous chikungunya patients, who continue to struggle with the ailment anywhere from three months to several years. Even after making a recovery, a large number of chikungunya patients are likely to continue to struggle with joint pains and stiffness. Difference between dengue and chikungunya Presentation Chikungunya: Fever with joint pains; Dengue: Fever, headache, myalgia (pain in muscles) and bleeding



# Why scrutiny of lower fertility rates isn't the answer to the delimitation crisis

Population issues are under discussion again with reports suggesting the possibility of the Census being carried out next year. The delimitation exercise for Parliamentary seats is likely to be conducted thereafter. The Chief Ministers of Andhra Pradesh and Tamil Nadu, possibly concerned about the likely reduction in representatives from their states to Parliament, have gone to the extent of saying that they would advise their people to have more children. These statements were perhaps not made seriously. Success in reducing the fertility rate must not become a disadvantage. It must be lauded and encouraged. Population growth affects almost all aspects of human life. However, its political, economic and social consequences take on more importance, in view of the federal structure of India's polity. Any response to this issue should take into account the various consequences of differential population growth rates among states.

The political response, to date, has been to freeze the delimitation of parliamentary seats on the basis of population for 25 years. It first started in 1976. The freeze was extended for another 25 years in 2001. One possible response now would be to extend this for another 25 years, especially because experience does not show that a freeze does not have adverse consequences. This appears to be the ideal solution in the present situation. More complex responses can be thought of such as changing the election system. One alternative is to allocate parliamentary seats to parties based on their vote share. Such measures seem out of the realm of feasibility. There are also doubts about their appropriateness.

Population plays an important role in determining the flow of resources from the Centre to the states. The Finance Commission, set up once in five years, decides the extent of the flow of resources and also how they are distributed among states. In deciding the allocation to states, population is one criterion. States with higher populations and those who have made less effort to reduce the fertility rate will gain. Before its 14th edition, the Finance Commission's calculations were based on the population in 1971. This is comparable to the freeze applied to delimitation. But when the 14th Finance Commission was asked to use the current population. To offset the disadvantage to states which brought down the fertility rate, the commission added an additional variable called "demographic change" besides population. This practice was followed by the 15th Commission as well. Under the 15th Finance Commission recommendations, while population was given a weight of 15.0 per cent, demographic change was given a weight of 12.5 per cent. The addition of a variable such as demographic change can substantially tilt the balance in favour of states that have brought down the population growth rate. Another important response would be to seek accelerated economic growth in the states that have lagged behind. Several efforts are currently being made in this respect — the aspirational district initiative, for instance. However, much more needs to be done and the current Finance Commission as well as the Centre and states should come together to formulate innovative strategies for this purpose. But at this point, it is only a hope. Other responses would be to

address the population issue directly. One such recommendation is the redistribution of population through accelerated migration among states. While this has been happening through supply and demand for labour, a large-scale redistribution of population on a permanent basis does not seem feasible and may have serious social consequences. Lastly, one may address population growth issues directly. Let us briefly look at India's population scenario. Its population is expected to peak at about 170 crore around 2070 and decline thereafter. Population growth is often measured by the total fertility rate (TFR) which is the number of children a woman would have if she followed the current fertility pattern. India, as a whole, has reached a TFR of 2, just below the replacement fertility rate of 2.1 which means that a mother would be replaced by a daughter. Nearly two-thirds of the population resides in states that have replacement or lower fertility rate, while about a third reside in states that have higher than replacement-level fertility. TFR varies considerably among Indian states — from a low of 1.5 to 3.0 according to NFHS 5. There are two ways to reduce this divergence — increase TFR in the states where it is low and/or reduce TFR in the states where it is high. Any effort to raise the fertility rate of low TFR states is unwise. India, as a country, is overpopulated.



We will need a high economic growth rate to give even the current population a decent level of living. States with low fertility rates have come to this level because they have realised the hardship of having large families. We should not change this behavioural pattern. People in these states may themselves be unwilling to change. A more viable and important initiative would be to accelerate the decline in fertility in the states where it is high through one, enhancing women's empowerment which reduces demand for

children and two, rapidly improving the quality of reproductive health services which empowers couples to meet their family size intentions. In fact, there are now only five states which have a TFR higher than 2.1. Focused attention on these states is called for in reducing fertility rates. Large differences in socioeconomic conditions among states is not conducive to harmonious relations among them. Therefore, a multi-pronged response to differential population growth rates is clearly warranted.

## Dhaka, Delhi must manage ties better

The breaching and ransacking of the Bangladeshi consulate in Agartala by a large group of protestors reflects the downward spiral in bilateral relations since the interim government led by Nobel laureate Muhammad Yunus came to power in Dhaka in August. Barely six months ago, such an incident would have been unthinkable. There are protests in several states bordering Bangladesh over the persecution of the country's Hindu minority and the arrest of Bangladeshi monk Chinmoy Krishna Das on sedition charges. Yunus' caretaker government has described reports of the targeting of Hindus and other minorities as exaggerated and has done little to address India's concerns on this front. This is making the task of restoring ties to an even keel more difficult. Police officers stand guard outside Indian High commission after a call for anti India protests following a group of Hindus in Agartala, the capital of the northeastern Indian state of Tripura, stormed a consulate office of Bangladesh, in Dhaka, Bangladesh, Tuesday, Dec. 3, 2024. AP/PTI (AP) PREMIUM Police officers stand guard outside Indian High commission after a call for anti India protests following a group of Hindus in Agartala, the capital of the northeastern Indian state of Tripura, stormed a consulate office of Bangladesh, in Dhaka, Bangladesh, Tuesday, Dec. 3, 2024. AP/PTI (AP) The downturn in the bilateral relationship has also impacted trade and human relations, with a key land border crossing blocked, preventing the movement of cargo. There is clearly a need to firewall people-to-people contacts from the outcomes of the regime change in Dhaka. With elections unlikely to be held in Bangladesh in the foreseeable future, both sides will have to find ways to engage and effectively manage the relationship



so that the gains of the trade and energy connectivity built up over the past decade are not frittered away. For this, state governments and political leaders in India should be sensitive and follow the lead from the Centre on bilateral ties. For instance, state-

ments such as calling for UN peacekeepers to be deployed in Bangladesh, made more with an eye on the domestic political constituency, should be avoided. Foreign policy should be left to the foreign ministry — more so in such a sensitive environment.

## Mount Everest is growing faster

Hyderabad: Mount Everest, towering at 8.85 kilometers above sea level, is still increasing in height, according to recent findings. The Himalayas, including Everest, began forming about 50 million years ago due to the collision between the Indian subcontinent and the Eurasian plate. While this historical tectonic activity has contributed to the region's steady uplift, researchers have discovered that Everest's rise has been more significant than previously expected. A major factor behind this unexpected growth is the interaction between two nearby river sys-

tems, the Kosi and Arun Rivers. These rivers merged roughly 89,000 years ago, and their unification has influenced the mountain's elevation. This change has contributed to an uplift of about 49 to 164 feet, with the rate of elevation increasing at around 0.01 to 0.02 inches annually. This phenomenon, known as isostatic rebound, explains how Earth's crust reacts to changes in surface weight. When heavy materials, such as ice or rock, are removed, the land beneath gradually rises in response, much like a boat lifting when cargo is offloaded. In this case,



# Why Arvind Kejriwal is not losing any sleep as he rules out alliance with Congress in Delhi

On Sunday, Aam Aadmi Party (AAP) national convener Arvind Kejriwal ruled out an alliance with the Congress for the forthcoming Delhi Assembly elections. Though the two parties remain members of the Opposition INDIA bloc at the national level, they have failed to agree on terms for a tie-up since contesting the Lok Sabha polls together in some states. However, as far as Delhi goes, data suggests the AAP could do without the Congress in the Assembly polls, even though the Congress matched or surpassed the AAP in the recent Lok Sabha elections. While the BJP and AAP have been the primary contenders in Delhi elections since 2014, the former has dominated overwhelmingly in the Lok Sabha polls and Assembly polls the latter, with the Congress making a dent in only a handful of seats. In fact, a party has failed to win an outright majority in the Delhi Assembly just once — in 2013, when the AAP formed a minority government with outside support from the Congress — and a coalition government has never ruled in Delhi since its Assembly was constituted in 1991.

Recent polls show that an AAP-Congress combine would likely have a limited impact on the outcome. For instance, in the recently concluded Lok Sabha polls, in which the two parties had a seat-sharing agreement, with the AAP contesting four and the Congress three of Delhi's seven parliamentary seats, the AAP led in 10 Assembly seg-

ments and the Congress in eight — each Lok Sabha seat comprises 10 Assembly seats. The BJP was the clear front-runner, leading in 52 Assembly segments en route to sweeping all the seven Lok Sabha seats, as it had in 2019 and 2014. Delhi Polls Kejriwal What Assembly-segment-level results reveal in Delhi. Not only did the 2024 alliance fail to yield dividends for the two parties, but the results of the last Assembly polls in 2020 also show that the AAP was comfortable contesting independently — it won 62 of the 70 Assembly seats, with the remaining eight going to the BJP — and the Congress struggled to make an impact, finishing third or worse in every seat. In the eight seats won by the BJP, adding the Congress's votes to the AAP's would have netted the combine only two additional seats. The Congress secured more votes than the BJP's winning margin in the Gandhi Nagar and Laxmi Nagar seats. In six other seats, the Congress got more votes than the AAP's winning margin, playing the role of spoilsport for the runner-up BJP in these seats. In the 2019 Lok Sabha polls, when the AAP, Congress and BJP had contested separately, the BJP again emerged as the front-runner with leads in 65 Assembly segments. The Congress led in just five segments and the AAP in none. Arvind Kejriwal Delhi Assembly elections Arvind Kejriwal has been campaigning throughout Delhi with the Assembly polls in mind. Though both the AAP and Congress



improved their Assembly segment-level performances in the 2024 Lok Sabha elections, their combined votes would have been enough to overtake the BJP in just four segments, of which three fell under the North East Delhi Lok Sabha seat where late former Chief Minister Sheila Dikshit was the Congress candidate.

In this election, the AAP only managed to exceed the margins in five Assembly segments, all led by the Congress. In the 2015 Assembly elections, the first in which the

AAP came to power for a full term, the party had won 67 seats, with the three remaining seats going to the BJP. In the seats won by the BJP, adding the Congress's votes to the AAP's would have resulted in wins for the combine in just two additional seats. The Congress's impact was limited in these Assembly polls too — it was the runner-up in just four seats, and placed third or worse in the remaining 66 seats. It also got more votes than the victory margin in just 13 seats, of which 11 were won by the AAP and where the BJP was the runner-up.

## How brain rot, Oxford's new word of the year, can hit you? Experts tell you how to reverse it

Sheela, a 25-year-old junior marketing executive, spent an average of seven to eight hours daily, browsing through Instagram, Facebook and YouTube. She frequently engaged with reels, ranging from viral memes to influencer posts and lifestyle videos, and became so obsessed that scrolling mindlessly became her in-between pursuit even in the middle of her work day. The effects of an addiction began to show as she complained of perennial fatigue, difficulty concentrating at work, sleeplessness, headaches and a sense of detachment from people and conversations around her. She typified "brain rot," a term the Oxford University Press (OUP) has announced as its "Word of the Year" for 2024. According to the official statement by the dictionary, it is "the supposed deterioration of a person's mental or intellectual state, especially viewed as the result of overconsumption of material (now particularly online content) considered to be trivial or unchallenging." Sheela realised there was a problem — "my brain felt dead. I stopped reading and painting, the hobbies I enjoyed so much" — and landed at the clinic of Dr Shaunak Ajinkya, psychiatrist, Kokilaben Dhirubhai Ambani Hospital, Mumbai.

**WHAT IS BRAIN ROT?** "Brain rot is the result of overstimulation of the human brain. This is a condition when the brain is overwhelmed by too much sensory input, making it difficult to process the environment. It's a blur. This can happen when the brain is asked to do too much, or when there's too much information from the senses," says Dr

P R Renjen, senior consultant, neurology, Indraprastha Apollo Hospitals, New Delhi.

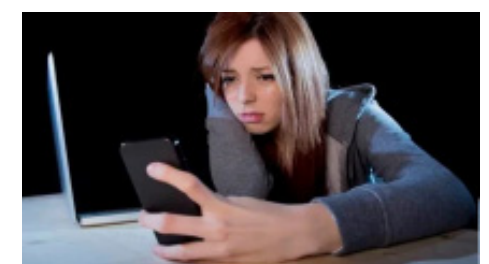
It affects the brain's cortex or the grey matter. "This is responsible for our sense of hearing, taste, and smell. It controls voluntary movements, memory, thinking, learning, reasoning, problem-solving and consciousness. It also defines our emotions, intelligence and personality. As a result, when it's overworked, it triggers hyperactive behaviour, particularly in children, aggression and addictive behaviour patterns. And since it affects our sleep, our brain cells cannot drain waste products, and you develop neuro-degenerative conditions," explains Dr Renjen. According to Dr Ajinkya, spending excessive time on social media, binge-watching TV shows, or playing games might be jokingly referred to as "rotting your brain." He says it is akin to having junk food. "Every time a notification for new content shows up, you have to see it. While you may enjoy it, it doesn't really give your brain what it needs, rather dulls it out," he says. **HOW DOES BRAIN ROT AFFECT YOUR HEALTH?**

Sheela could sense some of the changes herself. "My attention span dropped, I could not do longer tasks, I began procrastinating and my work efficiency dropped. I even became forgetful and felt unhinged," she says. After evaluating her physical markers to see if she had any underlying condition — she did not — Dr Ajinkya recognised her classic signs of brain rot. "She couldn't recall some everyday details.

Consuming large volumes of information without meaningful engagement makes it harder for the brain to retain details or create long-term memories," he says. As the reward system of the brain gets activated, scrolling social media can easily become a habit-forming exercise for anybody. "My patient had become so comfortable that she preferred to text her family and talk over chats than meet them in-person at her hometown in Jabalpur. Engaging with others primarily through screens reduces our ability to understand and relate to others when in face-to-face situations. She also developed a fear of missing out (FOMO) and developed compulsive checking behaviours for seeing others activities and successes," he shares.

**HOW TO DE-ADDICT YOURSELF FROM BRAIN ROT?** Wrapped up in her world, Sheela had already slipped into mild anxiety depression with obsessive compulsive personality traits. She was thus advised a short course of antidepressant-anxiety medications and Cognitive Behavioural Therapy (talk therapy) sessions focussing on building self-esteem, managing anxiety, and developing healthier coping mechanisms.

As part of a digital detox formula, Dr Ajinkya limited her social media use to two hours per day and intermittent screen-free periods, especially an hour before bedtime. She was taught journaling and mindfulness-based practices to process her emotions without digital distractions. After three months of treatment, Sheela had reduced her



social media use to under two hours daily and experienced significant improvements in sleep quality, focus, and mood. "I regained interest in offline hobbies and reported feeling more connected to my real-life relationships. My work productivity improved and I expressed a greater sense of accomplishment over time," she says. Dr Ajinkya has a simple formula that can work for everybody.

1. Set screen time limits
2. Prioritise real-life connections, decide you will meet one person in your close circle once a week.
3. Engage mindfully, that is follow content that adds value or inspires growth, and avoid mindless scrolling.
4. Take regular breaks and practise digital detoxes by scheduling time away from devices. You can lock some apps at a set time everyday.
5. Plan an alternative activity plan that seems more attractive than screen time.
6. Practise healthy habits like keeping to a sleep routine, eating healthy, no substance use and engaging in offline hobbies.