

# Water mission may miss 2024 target

Only three out of four rural households are likely to have drinking water tap connections by 2024; work has not even begun in 5% of homes

**Jacob Koshy**  
NEW DELHI

**T**he government's ambitious 'Har Ghar Jal' initiative to provide all rural households in India with potable water connections by 2024 under its flagship Jal Jeevan Mission is likely to fall short of its target. Only 75% of village homes are likely to have taps delivering drinking water by April 2024, *The Hindu* has learnt from multiple sources and an analysis of publicly available data.

Despite the scheme having been announced by Prime Minister Narendra Modi in 2019, a time when only 16% of rural households had tap water, officials say that a slew of challenges – such as the pandemic, a dearth of qualified manpower in States, the scale of the exercise, State-specific issues and even the ongoing Russia-Ukraine war – meant that the project only picked up speed in several States in 2022.

"While the pandemic led to delays, the Ukraine war resulted in major shortages of steel and cement, [which are] critical to the manufacture and connection of metal pipes. This led to major price revisions and considerable time was lost in renegot-



**Ground to cover:** During the launch of the scheme in 2019, only 16% of rural households in India had access to tap water. K. BHAGYA PRAKASH

tiating contracts and improving supply," a senior official told *The Hindu* on condition of anonymity. "There was also a huge problem in many States of not finding enough skilled manpower to make tanks, cisterns and water connections of an acceptable quality," the official said.

**CONTINUED ON**  
» PAGE 10

## Water mission may miss 2024 target

"There are States, for instance Rajasthan, where actual availability of water is a challenge. In West Bengal and Kerala, there are problems with water contamination. So ensuring adequate water quality is an issue. It is not enough to just provide a piped connection," the official said and added, "We expect about 75% households to be covered by March 2024 and 80% by December."

"Of the nearly 19.5 crore households that are targeted under the scheme, there are about one crore households (5% of the total) where work hasn't even begun. In every village that already has access to some source of water, it takes an average of eight months to connect all households and this is if they are extremely efficient," the official said. The Jal Jeevan Mission has a financial outlay of ₹3.60 lakh crore, with the Centre funding 50% of the cost.

According to data by the Jal Shakti Ministry, about 63% of rural households have tap connections, meaning that about 9.1 crore households have benefited from the programme since 2019.

However, these are figures reported by the States. There is a system of 'certification' wherein the gram panchayats in a village which district and block level authorities report as fully connected call a quorum, and upload a video attesting the veracity of the claim. Of the nearly 1,68,000 villages that are reported as 'Har Ghar Jal' where all houses have tap water, only 58,357 villages have been so 'certified', suggesting that the gap between reported and verified connections is wide.

In Uttar Pradesh, for instance, only 5.1 lakh – or 1% – of households reported tap connections when the scheme was launched. This grew to 32 lakh by August 2021 and then grew slower to 42 lakh by August 2022. In the last 10 months, however, the number of homes with connections has dramatically jumped to 1.3 crore, or about half the total rural households. However, of U.P.'s 98,455 villages, only 13,085 have reported being fully connected and only 2,837 of them have certified themselves. Thus, about 3% of U.P. villages can be said to be 100% certified as *Har Ghar Jal* villages.

In Rajasthan, 11 lakh households had tap connections in 2019, which has risen to about 44 lakh in June. Of its 43,249 villages, only 1,146 are reportedly fully connected, only half of which have been certified so. In West Bengal, where the number of connected households grew from 2.1 lakh to 62 lakh between 2019 and 2023, the number of villages reporting 100% connections are 2,654 or about 6% of the State's villages. Of these, only about a fourth are certified.

### Independent verification

+ "We upload what the States tell us, on the number of households covered. There are, however, two mechanisms for independent verification. We have an independent audit agency that conducts a survey by preparing a representative sample and interviewing respondents on whether the installed water connections are actually delivering water to their satisfaction. There is also a panel of National WASH (Water, Sanitation and Hygiene) experts who appraise a section of villages on the quality of services provided," the official told *The Hindu*.

One such survey was conducted in October 2022, covering 13,303 villages, of which 5,298 were reported as *Har Ghar Jal* villages and consisting of nearly 3,00,000 households. It was found that only 62% households had fully functional connections. Of the top 10 States that have reported over 96% of coverage, two – Bihar and Telangana – have zero villages that have certified their connection status. This was because both States did not rely on Central funds for the programmes, the official said.

"After self-certification verification, a '*Har Ghar Jal*' village means prominently publicising both the Prime Minister and the Chief Minister's images on posters, if they have used Central funds. Some States don't want to do that," the official added. *The Hindu's* questions on this matter to officials in the Jal Shakti Ministry were not answered at the time of going to press.

## 'First 1000-Best Healthy Days' scheme launched

**The Hindu Bureau**

RANIPET

State Health Minister Ma. Subramanian on Saturday launched the 'First 1000-Best Healthy Days' programme that aims at monitoring the nutrition of pregnant women and newborns for the first 1,000 days.

Accompanied by Minister for Handlooms and Textiles R. Gandhi, Mr.

Subramanian inaugurated the scheme at the Primary Health Centre (PHC) in Thimiri block, near Arcot, by providing financial assistance to 101 pregnant women.

"The scheme aims to ensure normal weight for pregnant women and adequate nutrition for newborns up to two years," he said.

Funded under the State Balanced Growth

Fund of the State Planning Commission, Mr. Subramanian said the scheme was being executed by the Directorate of Public Health and Preventive Medicine (DPH) at a cost of ₹38.20 crore for 2022-2024.

The scheme is being implemented in all 23 Community Health Centers and 116 PHCs of the 14 districts that scored poorly in the maternal and

child health indicators in the State.

In two years, 74,400 infants will be covered under the initiative, Mr. Subramanian said, and added that the scheme would help reduce Maternal Mortality Ratio and Infant Mortality Rate.

Ranipet Collector S. Valarmathi, D. Manimaran, DDHS (Ranipet), and J.L. Eswarappan, Arcot MLA, were present.

## Intensity of extreme rainfall estimated to increase by 15%

**The Hindu Bureau**

Climate warming is causing a decrease in snowfall and increase in rainfall at high altitudes in the Northern Hemisphere. A study published in *Nature* has predicted an increase in the risk of extreme rainfall events.

The intensity and frequency of extreme precipitation events is expected to increase as global warming continues to affect the planet. Of particular concern

are extremes in rainfall, which often cause more damage than similar snowfall events due to their instantaneous run off, increasing the risk of floods, which can cause infrastructure damage and landslides. Precisely how increase in global temperature will affect extreme rainfall events remains unclear.

To assess how climate change might be driving a shift in precipitation patterns, researchers from

Lawrence Berkeley National Laboratory, Berkeley, California combined data from climate observations from between 1950 and 2019 with future projections, up to 2100, taken from Earth system models. The results suggested that warming causes an increase in rainfall extremes within regions of high elevation in the Northern Hemisphere.

On average, the intensity of extreme rainfall events is estimated to in-

crease by 15% per 1 degree C of warming.

The estimated rate of increased rainfall in high altitudes is approximately double that of low altitudes, highlighting the increased vulnerability of mountainous regions to extreme precipitation. They utilised both a climate reanalysis dataset and future model projections to show that the amplified increase is due to a warming-induced shift from snow to rain. "Our findings pin-

point high-altitude regions as 'hotspots' that are vulnerable to future risk of extreme-rainfall-related hazards, thereby requiring robust climate adaptation plans to alleviate potential risk," they write.

"The implications of our results centre around the importance of developing sound climate adaptation plans to protect the natural and built environments and the 26% of the global population living in or directly downstream of

mountainous regions. It is also important to recognize that the amplification of rainfall extremes is likely to be associated with a decrease in snowfall extremes owing to the transition from snow to rain. Such a decrease in snowfall extremes is consistent with previous work, and it presents an additional layer of complexity that needs to be taken into account in developing adaptation and mitigation strategies," they note.

# T.N. to widen use of U-WIN to monitor immunisation

The end-to-end digital platform was piloted in Dindigul and Erode districts early this year. Now, the Health Department is working on expanding it to the rest of the State

Serena Josephine M.  
CHENNAI

**T**amil Nadu will focus on U-WIN, a one-stop, end-to-end digital platform for monitoring and tracking of pregnant women and children for routine immunisation. After launching the platform on a pilot basis in Dindigul and Erode districts early this year, the Health Department is working on expanding it to the rest of the State.

According to health officials, Tamil Nadu started the Expanded Programme on Immunization against six vaccine-preventable diseases in 1978 and strengthened it further as Universal Immunisation Programme (UIP) in 1985. Around 10 lakh antenatal women and 9.16 lakh children are given 11 vaccines against 12 vaccine-preventable diseases under UIP. The State has consistently been achieving 95% in immunisation coverage.

For routine immunisation, vaccines and logistics are being monitored through the eVIN programme and the COVID-19 vaccination is monitored through CoWIN. Based on this, the Government of India planned to build a third platform – U-WIN – for digitising routine immunisation services under UIP in the country. U-WIN, according to T.S. Selvavinayagam, Director of Public Health and Preventive Medicine, is a one-stop, single, end-to-end digital platform for monitoring

## Digital impetus

U-WIN is a digital platform to monitor and track routine immunisation. Here are some of its objectives and features

**1** To facilitate tracking of pregnant women, newborns and adolescents for vaccination

**2** To ensure 100% immunisation coverage and reach all types of beneficiaries and health facilities in government and private sectors

**3** Session/vaccinator-wise identification of dropouts or left-out persons can be done on real-time basis

**4** Eventually, it will be linked to State's PCME (Pregnancy and Infant Cohort Monitoring and Evaluation) system and all other service provider portals



SOURCE: DIRECTORATE OF PUBLIC HEALTH AND PREVENTIVE MEDICINE

## Activities proposed under U-WIN

- Digitisation of routine immunisation microplan through U-WIN registration module
- After registration, targeted beneficiaries will receive a message from U-WIN for their upcoming vaccination dose as per Universal Immunisation Programme
- Beneficiaries are verified on U-WIN through their Aadhaar before vaccination. Ayushman Bharat Health Account unique ID is created for all registered beneficiaries
- Acknowledgement will be sent to beneficiaries after every dose. Vaccination certificate can be downloaded from U-WIN portal
- Engaging private sector in the future as 20-30% of beneficiaries are utilising private health facilities for delivery services and vaccination

**Aiming high:** After launching the programme on a pilot basis in Dindigul and Erode, the Health Department is working on expanding it to rest of the State. FILE PHOTO

and tracking of routine immunisation with the Union government's support. This would facilitate tracking of every pregnant woman, newborn child and adolescent for vaccination. Once registered, the targeted beneficiaries would receive messages from U-WIN for the upcoming vaccination doses under UIP.

"At the field level, village health nurses and at the institution level, staff nurses would be handling the application. After the pilot launch in Dindigul and Erode, our staff felt it was a simple application and

came with certain advantages; they know what vaccines should be taken to which place and can generate reports from their mobile phones. Youngsters are more comfortable with such applications, and they know that once a pregnant woman is registered, the work becomes easier," Dr. Selvavinayagam said.

With the Union government asking that U-WIN be expanded to other districts in the State before July 31, the Directorate of Public Health and Preventive Medicine has taken mea-

sures, starting with an orientation programme for State officials and a two-day hands-on training for district officials – deputy directors of health services and city health officers.

"They should know how to create an admin portal. They should understand who is the service provider and have the health facility register – primary health centre, camps or outreach programmes," he said. Training would next be taken to the other levels. Once completed, they would start using the platform, he added.

# Opposition likely to focus on Manipur in Monsoon Session

Parliamentary Affairs Minister calls for productive discussions during the session that starts on July 20 and ends on August 11; Parties may seek debate on Uniform Civil Code

**The Hindu Bureau**  
NEW DELHI

**T**he Monsoon Session of Parliament will begin on July 20 and continue till August 11, Parliamentary Affairs Minister Pralhad Joshi announced on Saturday.

This is the first time the government will face Parliament after the violence broke out in Manipur. The Opposition is also bracing itself for a showdown with the government in the Rajya Sabha on the Delhi Ordinance that curtails the powers of the elected government.

Announcing the dates, Mr. Joshi tweeted, "Urge all parties to contribute towards productive discussions on legislative business and other items during the session."

The Opposition has questioned Prime Minister Narendra Modi's continued silence on Manipur. At the all-party meeting held on June 24, the Union government confirmed that there had been 131 deaths, the casualty figure has risen since then. But the Opposition demand to



**Question time:** The Monsoon Session is likely to be held in the new Parliament building. PHOTOS/REUTERS

take an all-party delegation to visit the State was rejected. Former Congress president Rahul Gandhi is the only prominent Opposition leader to visit the State. The government will be facing tough questions on the issue.

"We hope Joshi *avare* (sir) that the Govt. will allow discussion on ALL issues of concern to the people that the Opposition has been raising continuously, including those on which the Prime Minister has maintained a studied silence," Congress leader Jairam Ramesh tweeted quoting Mr. Joshi's tweet.

The Opposition would

also want a structured debate on the Uniform Civil Code (UCC), which Mr. Modi pitched for during his recent speech in Madhya Pradesh. Several political parties have not come out with a clear position on the UCC and the debate would clarify their stand.

## Delhi Ordinance

The Opposition unity will be tested if the government brings in a Bill to replace the Delhi Ordinance that seeks to amend the Government of National Capital Territory of Delhi Act, 1991. It curtails the powers of the State government over the bureaucrats posted

in Delhi. Delhi Chief Minister Arvind Kejriwal has been canvassing for support from all Opposition parties to stall the Bill in the Rajya Sabha.

The Congress, in spite of pressure from the AAP at the joint Opposition meet on June 23, has not made its position public, though, as per sources, it assured the AAP that the party would not vote in favour of an "anti-constitutional Bill". But even with the Congress' support, the Rajya Sabha arithmetic is not in favour of the Opposition. As per the calculations handed over by Mr. Kejriwal in his meeting with the Opposition leaders, the NDA has 102 members, and 18 Opposition parties together have 105 members. But seven parties – with 23 members including the Biju Janata Dal and the YSR Congress with nine members each – hold the key. The two parties, over the last nine years, have voted in favour of the government. Since this Bill is considered a direct attack on "federalism", the AAP is hoping to get them on its side.

# India adds 664 animal species to its fauna database, 339 taxa to its flora

In 2022, the biggest number of discoveries of animals and plants were from Kerala, which contributes to 14.6% of the new species and new records; Environment Minister says conservation work is critical to protect biodiversity of the country

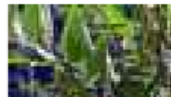
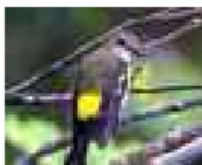
Shiv Sahay Singh  
KOLKATA

India added 664 animal species to its faunal database in the year 2022. These comprise 467 new species and 197 new records (species found in India for the first time).

The country also added 339 new plant taxa – 186 taxa that are new to science and 153 taxa as new distributional records from the country in 2022. The details of new discoveries and new records were released by Union Minister for Environment, Forest and Climate Change Bhupender Yadav in Kolkata on Saturday.

The faunal discoveries have been compiled in a publication by Zoological Survey of India (ZSI) titled *Animal Discoveries - New Species and New Records 2022*, whereas floral discoveries are contained in *Plant Discoveries 2022* published by the Botanical Survey of India (BSI).

Among the major fauna species discovered are three new species and one new record of mammals; two new records of birds; 30 new species and two



**New records:** (Clockwise from left) *Macaca selai*, *Calanthe lamellosa*, *Glischropus meghalayanus*, *Nandadevia pusalkar*, *Ficedula zanthopygia*. SPECIAL ARRANGEMENT

new records of reptiles; six new species and one new record of amphibians; and 28 new species and eight new records of fish.

The mammal species discovered include two species of bats – *Miniopterus phillipsi*, a long-fingered bat, and *Glischropus meghalayanus*, a bamboo-dwelling bat – both from Meghalaya. Sela macaque (*Macaca selai*), a new macaque species discovered in the western and central Arunachal Pradesh and named after the Sela Pass, is also among the highlights of *Animal Discoveries 2022*.

The new records include *Macaca leucogenys*, a white-cheeked macaque earlier found in Modog, southeastern Tibet, and sighted in India for the first time in 2022 in West Siang, Arunachal Pradesh.

The list also includes *Ficedula zanthopygia*, the yellow-rumped flycatcher, earlier known from Mongolia, Transbaikalia, southern China, Korea, western Japan, and found last year in Narcondam Island of the Andaman archipelago.

The maximum number of new faunal discoveries has been of invertebrates with 583 species, while ver-

tebrates constitute 81 species. Insects dominate among invertebrates with 384 species, whereas fish dominated among vertebrates, followed by reptiles, amphibians, mammals and aves.

In 2022, the maximum new discoveries were recorded from Kerala. As many as 82 animal species new to science and 15 new records were from Kerala, which contributes to 14.6% of the new species and new records. Karnataka followed with 64 new species and 24 new records accounting for 13.2%. Tamil Nadu saw 71 new discover-

ies and 13 new records, contributing to 12.6% of all the new discoveries and new records in the country. The Andaman and Nicobar Islands contributed to about 8.4% of the discoveries, whereas 7.6% discoveries were from West Bengal and 5.7% from Arunachal Pradesh. With the new discoveries and new records, the fauna diversity of the country increased to 1,03,922.

Speaking at the launch of these publications, Mr. Yadav said that work done by the ZSI is critical to the faunal diversity of the country. "We must protect the diversity for our own sake," he said.

ZSI Director Dhriti Banerjee said the year 2022 witnessed the highest number of new discoveries in the last 10 years.

'Plant Discoveries 2022' contains an enumeration of 339 taxa, which have been added to the Indian flora during 2022.

These comprise 319 species, and 20 infraspecific taxa as new to the Indian flora. Of these, 186 taxa are new to science and 153 taxa are new distributional records from India.

# Why are Indian drugmakers under the lens?

What are the complaints? What are the regulatory processes for manufacturing, quality control and checks? What is the role of the Central Drugs Standard Control Organisation? What does India need to do to redeem its reputation in the global pharma industry?

**Maitri Porecha**

**The story so far:**

**S**ince October last year, Indian pharma companies have been under constant international scrutiny for exporting allegedly contaminated drugs, which have led to deaths of children. Recently, Nigeria raised the red flag on two oral drugs; Cameroon too sounded an alarm over another cough syrup reportedly made in India when several children died. Sri Lanka called out two drugs manufactured in India linking them to adverse reactions in several patients. In the latest move, Gambia has declared that from July 1, it is running strict quality control checks on all pharma products shipped into the country, before they leave Indian shores.

**Has India launched a probe?**

Soon after Gambia reported deaths of at least 70 children related to a contaminated cough syrup made in India, in December last year, reports from Uzbekistan of at least 18 children dying after consuming cough syrup contaminated with high amounts of diethylene glycol (DEG) or ethylene glycol poured in. The pharma company, Marion Biotech's licence was cancelled by the national watchdog – the

'Merely suspending or cancelling the licence of a pharma company is not enough'

Central Drugs Standard Control Organisation (CDSCO) – in March, but the Ministry of Health and Family Welfare has not answered any questions on the probe that was launched.

The latest in line are alerts from Sri Lanka, where patients are reported to have died after being administered anaesthetic drugs made in India, and that an eye medication had caused visual impairment in 10 patients. Nigeria's National Agency for Food and Drugs Administration and Control found a batch of oral paracetamol and another cough medicine manufactured by companies based in Mumbai and Punjab to be sub-standard.

**What has led to the loss of confidence?**

While Gambia has appointed Mumbai-based Qontrol Labs to independently assess the manufacturing plants and drug samples of Indian exporters who ship drugs to Gambia from July onwards, *The Hindu* has learnt that it is not the first such African country to have a checking system in place. "Mozambique has been checking samples from all batches of medicines before they are exported from India to its shores," Riddhi Jhaveri, founder of Qontrol Labs, told *The Hindu*. For instance, Ms. Jhaveri says, in the case of a sample of paracetamol drug – Azithromycin 500 mg – that was tested by Qontrol, it was found that there was only 20 mg of azithromycin instead of 500 mg. "We have a database of more than 500 exporters whose batch samples we analyse, and in the past several years we have picked up nearly 40 to 45 non-conformities in the samples," said Jhaveri.

In fact, Nigeria has been more careful. Not only does the Nigerian government get all pharmaceutical samples checked, it has also mandated that samples from all batches of chemicals, food, medical devices and cosmetics be checked by an independent assessor.

**Why are regulators failing to take action against faulty manufacturing practices?**

The issue of contaminated cough syrup batches seeping into the supply chain and finding their way to paediatric patients is not only limited to exports. India has recorded at least five major DEG poisoning events since 1972, killing at least

84 children. The incidents occurred in Chennai, Maharashtra, Bihar, Haryana, and the latest being the 2019 case in Jammu.

Ideally, when a manufacturer is found to be violating laws especially in cases where there is a threat to life or alleged deaths, a criminal prosecution of the persons who are responsible for manufacturing and marketing the drug should be launched. Instead of doing that, the Ministry of CDSCO and state regulators keep passing the buck. "Under India's convoluted drug regulatory law, the Centre is responsible for imports and approving new drugs based on safety and efficacy data but the licensing and prosecutions of pharma companies is the responsibility of State governments," write Dinesh Thakur and Prashant Reddy, co-authors of *The Truth Pill*, a book on how drug regulation works in India.

**Why are pharma companies not punished?**

Merely suspending or cancelling the manufacturing licence of a pharma company is not enough, says Ms. Jhaveri.

Under the Drugs and Cosmetics Act, 1940, manufacturers not adhering to good manufacturing practices can be subjected to a maximum punishment of imprisonment for life. Even when prosecutions are filed, the cases move at a snail's pace in courts. For instance, Thakur and Reddy note that in Andhra Pradesh, of the 54 judgments in cases filed against pharma companies between 1999 and 2017, the state was able to secure convictions in only eight cases. Poor conviction rate was due to glaring errors committed by drug inspectors including shoddy paperwork, failure to seize, record its condition of storage and label the samples properly, as also the failure to complete the testing process of samples before its expiry date.

It does not help that the CDSCO is perennially reeling under a shortage of drug inspectors. A 2019 report titled 'Drug Regulation in India: The Working and Performance of CDSCO and SDRAs,' compiled by lawyers Shree Agnihotri and Sumathi Chandrashekar, said that while there ought to be one drug inspector for every 50 manufacturing units and 200 pharmacists, there were vacancies in most States waiting to be filled.

Health experts say that if India wants to redeem its reputation, it will have to tighten the screws by ensuring robust pharma inspections and make sure that any slip-up by manufacturers is reported and prosecuted.



**Strict action:** Grieving parents call for justice for the deaths of children linked to contaminated cough syrups in Gambia in 2022. REUTERS