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Current Affairs - 02 September 2025

WHAT IS THE AIR QUALITY LIFE INDEX (AQLI)?



- It measures particulate air pollution's impact on life expectancy.
- Developed by Michael Greenstone and Energy Policy Institute (EPIC) at the University of Chicago, the AQLI quantifies pollution's effects.
- The AQLI combines research on long-term air pollution exposure with global particulate pollution measurements.
- It provides insight into the true cost of air pollution on communities worldwide.
- **Highlights of the AQLI 2025 Report:**
 - Air pollution has emerged as **India's most severe health threat**, reducing the country's average life expectancy by 3.5 years.
 - Toxic air robs **Indians** of nearly twice as many years as childhood and maternal malnutrition and more than five times the impact of unsafe water, sanitation, and handwashing.
 - All **1.4 billion Indians** live in areas where pollution levels exceed the World Health Organization's (WHO's) safe limit of $5 \mu\text{g}/\text{m}^3$ for PM2.5.
 - The **northern belt** is still the **world's most polluted zone**, with 544.4 million people (38.9 percent of India's population) living under severe air pollution.
 - **Delhi-NCR** is the **worst hit**, with residents facing a **loss of 8.2 years** in life expectancy (based on WHO's standard).

Bihar: 5.6 years lost

Haryana: 5.3 years lost

U P: 5 years lost

- Even by India's weaker PM2.5 standard of $40 \mu\text{g}/\text{m}^3$, Delhi-NCR residents would still lose 4.74 years of life expectancy.
- **Air pollution:**
 - Cuts 3 years off average life expectancy across the region.
 - Reduces life by more than 8 years in the most affected zones.



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MULTI-LANE FREE FLOW (MLFF) TOLLING SYSTEM



- It is a **barrier-less tolling system** that enables transactions through **reading of FASTag and Vehicle Registration Number (VRN)** by High performance RFID Readers and ANPR Cameras.
- **Significance of Multi-Lane Free Flow (MLFF) Tolling System**
 - It enables **seamless toll collection** without stopping vehicles at fee plazas, reducing congestion and travel time leading to enhanced fuel efficiency and lowering emissions.
 - Implementation of MLFF will also contribute towards **improving toll revenue collection** and creating a smarter, faster and more efficient National Highway network across the country.

Key Facts about NHAI

- It is India's **premier highway infrastructure creator** entrusted with developing, maintaining, and managing National Highways.
 - It is a **statutory body** under the administrative control of the **Ministry of Road Transport and Highways**.
 - It was constituted under **National Highways Authority of India Act, 1998** and made operational in February 1995.
 - **Composition:** It consists of a **full time Chairman**, and not more than **five full time Members** and **four part time Members** who are **appointed by the Central Government**.
 - The part time Members are the Secretary (RT&H), Secretary (Expenditure), Secretary (Planning) and DG (RD) & SS.
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25th SCO SUMMIT IN TIANJIN

- PM Modi attended the **25th SCO Summit** in Tianjin, China, where discussions focused on global governance reform, counter-terrorism, peace and security, economic cooperation, and sustainable development.
- Established in 2001 by founding members China, Russia, Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan, the Shanghai Cooperation Organization (SCO) now has 10 member states, two observer states and 15 dialogue partners from Asia, Europe and Africa.
 - Laos was granted the partner status during 2025 summit.
- In 2017, at Astana, India and Pakistan officially joined SCO as full members.

Key Documents Signed at the 2025 SCO Summit in Tianjin

- At the 25th Meeting of the Council of Heads of State of the SCO in Tianjin, 20 significant documents were signed, shaping the future agenda of the grouping.
- **Strategic Declarations and Resolutions**
 - **Tianjin Declaration** adopted as the central political outcome.
 - **A Development Strategy for 2026–2035 was approved**, outlining long-term priorities and direction for the SCO's growth in the next decade.
 - **Cooperation Programme (2026–2030)** to counter extremist ideology within SCO space.
 - Roadmap for **SCO Energy Cooperation** until 2030.
 - SCO granted **observer status** within the Commonwealth of Independent States (CIS).
 - **Cholpon Ata (Kyrgyz Republic)** declared SCO tourist and cultural capital for 2025–2026.
- **Institutional Strengthening**
 - Four new SCO centers were inaugurated with dedicated roles:



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- Countering security threats and challenges.
- Tackling transnational organized crime.
- Enhancing information and cybersecurity.
- Strengthening anti-drug cooperation.
- Decision taken to establish an SCO Development Bank, aimed at boosting infrastructure development, economic progress, and social cooperation among member states.
- **Expanded Cooperation Platforms**
 - The summit announced initiatives to create new SCO platforms and centers in the fields of:
 - Energy and sustainable growth.
 - Green industry and climate-friendly practices.
 - Digital economy and cybersecurity.
 - Artificial intelligence, tech innovation, and higher education.
 - Vocational and technical education for workforce development.
- **Structural Reforms and Expansion**
 - Major breakthrough in structural reforms: **observer states and dialogue partners were merged into a single category of SCO partners.**
 - Laos was granted partner status, expanding the SCO into a **27-nation family** (10 members and 17 partners).

SCO Tianjin Declaration: Pahalgam Attack Mentioned

- The declaration explicitly condemned the April 2025 Pahalgam terror attack in India, which killed 26 people.
 - Condolences were expressed to victims' families, with a call to bring perpetrators and sponsors to justice.
 - Other incidents, such as the Jaffer Express hijacking (March) and Khuzdar school bus bombing (May) in Pakistan, were also condemned.
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THE RISE AND RISKS OF HEALTH INSURANCE IN INDIA

- In recent years, **health insurance** has emerged as the **primary strategy** for expanding access to health care in India.
- **PMJAY**, launched in 2018 under Ayushman Bharat, and its state-level counterparts offer annual coverage of up to **₹5 lakh per household**, focusing exclusively on in-patient hospitalisation.
- **Despite forming only a fraction of India's total health expenditure**, these schemes have grown rapidly, with budgets expanding by up to 25% annually in some states.
- **While insurance has provided some relief to patients facing overcrowded or underperforming public facilities, its structural weaknesses threaten to deepen the fault lines of India's health-care system.**

Structural Weaknesses of the Insurance Model

- **The Idea of Profiteering**
 - One of the most serious problems with insurance-led health care is the **promotion of for-profit medicine**.
 - Evidence shows that **about two-thirds of the PMJAY budget flows to private hospitals**, many of which operate with minimal regulation.
 - This **commercialisation is particularly troubling because the pursuit of profit often conflicts with patient welfare** and leads to unnecessary or inflated treatments.
- **Distortion of Health Priorities**
 - Insurance schemes **disproportionately channel resources toward hospitalisation** and tertiary care, while neglecting primary and outpatient services.
 - For a country where many citizens still struggle with basic access to preventive and community-level care, this **imbalance risks worsening inefficiency and inequity**.



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- **Utilisation Challenges**

- Although **official figures claim coverage for nearly 80% of the population**, surveys show that only about one-third of insured patients successfully use their benefits.
- **Lack of awareness, bureaucratic hurdles, and discouragement by hospitals reduce the practical impact of insurance.**
- **Consequently, out-of-pocket spending remains high**, undermining the schemes' core purpose of financial protection.

The Deeper Crisis: Underinvestment in Public Health

- Ultimately, **the reliance on insurance schemes reflects a deeper structural problem:** chronic underinvestment in India's public health system.
- **At just 1.3% of GDP in 2022, India's public health spending is among the lowest in the world**, far below the global average of 6.1%.
- **No country has achieved genuine UHC without strong public health infrastructure**, and India's continued neglect of this sector undermines any insurance-led strategy.
- **Some states have taken steps to strengthen public services**, with positive outcomes, but **progress remains uneven and insufficient** to meet national needs.

Conclusion

- **Health insurance**, as currently implemented in India, **functions more as a temporary painkiller** than as a cure for the systemic ills of the health sector.
- **While schemes like PMJAY and SHIPs offer some relief to patients**, they cannot substitute for a **robust and accessible public health system**.
- The **over-reliance on profit-driven private providers**, the **neglect of primary care**, **barriers to utilisation**, and rampant inefficiencies all **highlight the inadequacy of an insurance-centric approach**.
- For India to move meaningfully toward UHC, **it must confront the underlying deficit in public health investment and reorient its strategy toward equitable, non-profit, and preventive care**.



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NOISE POLLUTION IS RISING BUT POLICY IS FALLING SILENT

- In 2011, the Central Pollution Control Board (CPCB) launched the National Ambient Noise Monitoring Network (NANMN) with the vision of creating a real-time noise monitoring system.
- More than a decade later, however, **the initiative remains a passive data repository rather than an engine for reform.**
- **India, in comparison to western countries, has failed to translate monitoring into meaningful governance,** leaving noise management politically and administratively inert.

Constitutional and Legal Neglect

- **Article 21 of the Indian Constitution guarantees the right to life with dignity,** encompassing both mental and environmental well-being, **while Article 48A mandates proactive environmental protection.**
- Yet, in so-called silence zones, **hospitals and schools are routinely engulfed in noise that exceeds World Health Organization (WHO) safe limits of 50 dB(A) by day and 40 dB(A) by night.**
- In practice, **Indian cities record levels as high as 65–70 dB(A).**
- The Supreme Court has reaffirmed that noise pollution constitutes a violation of fundamental rights.
- However, **enforcement of the Noise Pollution (Regulation and Control) Rules, 2000, remains largely symbolic.**

Ecological Consequences, Civic Fatigue, and the Politics of Silence

- **Ecological Consequences**
 - The costs of noise pollution extend beyond human well-being.
 - A 2025 study by the University of Auckland revealed that just **one night of urban noise and artificial light disrupted the sleep and song patterns,** reducing both vocal complexity and frequency.



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- **Civic Fatigue and the Politics of Silence**
 - Urban noise pollution is **not only a technical issue but also a deeply political and cultural one.**
 - **Its invisibility as a pollutant, unlike smog or garbage,** noise leaves no physical residue, contributes to civic fatigue and apathy.
 - Honking, drilling, and late-night construction have been **normalised as unavoidable irritants.** Public outrage is muted, and institutional coordination is lacking.
 - The **absence of a national acoustic policy comparable to air quality standards** perpetuates the problem.

Pathways to Reform

- **Decentralising noise monitoring:** Local bodies must be empowered with real-time access to noise data and corresponding enforcement authority.
- **Linking data to enforcement:** Monitoring systems must be coupled with penalties for violations, construction restrictions, and zoning compliance.
- **Institutionalising public awareness:** Beyond symbolic events such as “No Honking Day,” long-term behavioural campaigns must be embedded in schools, driver training, and civic spaces.
- **Integrating acoustic resilience into urban planning:** Cities must be designed not only for expansion and mobility but also for sonic civility, through zoning reforms, soundproofing infrastructure, and noise-sensitive construction guidelines.

Conclusion

- **Urban noise pollution in India represents a profound failure of governance, cultural awareness, and constitutional responsibility.**
 - It **silently erodes public health, disrupts ecological systems,** and undermines civic dignity.
 - The **crisis cannot be solved through technology or law alone;** it demands a culture of sonic empathy that redefines silence as an active form of care.
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EXERCISE YUDH ABHYAS



- It is the **joint military exercise** held **between India and USA**.
- The Indian contingent, comprising personnel from a **battalion of the Madras Regiment** is taking part in this exercise.
- Over two weeks, troops will rehearse a spectrum of tactical drills including heliborne operations, employment of surveillance resources and unmanned aerial systems, rock craft, mountain warfare, casualty evacuation, combat medical aid and the integrated use of **Artillery, Aviation and Electronic Warfare systems**.
- In addition, subject-matter experts from both armies will conduct working groups on critical **domains such as UAS and Counter-UAS operations**, information warfare, communications and logistics.
- The exercise will culminate in jointly planned and executed tactical manoeuvres, ranging from live-fire exercises to **high-altitude warfare scenarios**, with a focus on improving capabilities for **United Nations peacekeeping operations** and strengthening preparedness for multi-domain challenges.

Other Exercises between India and USA

- **Army:** Vajra Prahar
 - **Navy:** MALABAR (Multilateral)
 - **Air Force:** Cope India, Red Flag (Multilateral).
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