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13 dead as torrential rain, flash floods hit Dehradun

Swollen rivers and 192-mm rainfall in Sahastradhara wash away houses and hotels; eight people on a tractor swept away; IMD issues red alert; Uttarakhand CM tells officials to step up relief efforts

Ishita Mishra
NEW DELHI

At least 13 people were killed and 16 have been missing after overnight torrential rain and flash floods wreaked havoc in Dehradun and surrounding areas in Uttarakhand on Tuesday.

Heavy rain battered the Sahastradhara area, a tourist spot in Dehradun. Shops, small hotels and homes in the market area were washed away or heavily damaged. Tapkeshwar, a Shiva temple, was submerged. The India Meteorological Department, Dehradun, issued a red alert on Tuesday.

According to the district administration, Sahastradhara received 192 mm of rainfall within five to six



Great destruction: A screen grab from a video of the devastation following heavy rain in Dehradun on Tuesday. PTI

hours, while 141 mm was recorded in the Mal Devta area. The Jolly Grant airport, Mussoorie, and Hathibarkala got more than 90 mm of rainfall during the intervening night of Monday and Tuesday.

Dehradun District Magistrate Savin Bansal said

that of the 13 victims, eight were passengers of a tractor trolley that was stuck in the Tons river near Vikas Nagar. Till Tuesday evening, three persons were critically injured in rain-related incidents. Agencies rescued more than 500 people and the rain left more

than 23 roads blocked, and bridges damaged.

Chief Minister Pushkar Singh Dhami, who rode an earthmover and inspected the damage, directed officials to step up relief efforts. A communique from the State government said that Prime Minister Narendra Modi and Union Home Minister Amit Shah had offered full help in the rescue operations.

An official involved in the efforts said, "Teams are working to evacuate 500 students trapped in the Dev Bhoomi Institute in Paundha. Six people were rescued from Heritage Hotel in Mussoorie. Around 10-15 people stuck at Little Heaven Hotel in Mussoorie were safely evacuated."

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'Judicial experimentalism' versus the right to justice

The Supreme Court of India, in *Shivangi Bansal vs Sahib Bansal* (July 22, 2025), endorsed the guidelines by the Allahabad High Court, in *Mukesh Bansal vs State of U.P.* (2022), to prevent the misuse of Section 498A of the Indian Penal Code (now Section 85 of the Bharatiya Nyaya Sanhita). The High Court had introduced a two-month 'cooling period' for any coercive action after the registration of a first information report (FIR) or complaint to the magistrate. During the 'cooling period', the matter will be referred to a Family Welfare Committee (FWC). However, both the introduction of the 'cooling period' and the referral of the matter to the FWC undermine a victim's right to prompt access to justice and affects the functional autonomy of the criminal justice agencies.

The basis of the checks

The enactment of Section 498A was with the objective of punishing various forms of cruelty against women in a matrimonial setting. Be that as it may, the courts, in a series of cases, have lamented the increasing tendency by women to misuse the law when it concerns FIR registrations and subsequent arrests. Courts have accordingly established procedural safeguards to protect the 'innocent' husband and his family. The Supreme Court of India, in *Lalita Kumari*, has put cases arising out of matrimonial disputes in the category of 'preliminary inquiry' before the registration of the FIR. The recent criminal law reforms also place cases of cruelty by husband in the domain of 'preliminary enquiry' before registration of the FIR.

In addition to these checks to prevent the registration of an FIR in false or frivolous complaints, the courts have also addressed another area for potential abuse in case of Section 498A – rampant arrests of husbands and



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The top court's endorsement of the Allahabad High Court's steps to prevent the misuse of Section 498A IPC affects a victim's pursuit of justice

their family members. The power of arrest was rationalised at two levels. First, by bringing a statutory change to the Code of Criminal Procedure in 2008, and the second, by judicial dictum in *Armesh Kumar* (2014). The 2008 amendment introduced the 'principle of necessity' in the matter of arrest. In *Armesh Kumar*, the Supreme Court effectively plugged the unbridled exercise of arrest powers by the police in cases that saw the use of Section 498A cases, by introducing a checklist and enforcing 'notice for appearance'.

In *Satender Kumar Antil* (2022), the Court further strengthened these institutional checks by directing the release of a person on bail if arrested in non-compliance of the directions in *Armesh Kumar*.

As an 'arrest offence'

The National Crime Record Bureau (NCRB) report, 'Crimes in India', suggests that Section 498A has remained among top five 'highest arrest' offences till 2016. Thereafter, it was within the top 10, which suggests that the steps taken at statutory and institutional levels have had an impact. Although the registered offences under this provision rose from 1,13,403 in 2015 to 1,40,019 in 2022, arrests declined from 1,87,067 to 1,45,095, as in NCRB data during the same period. This was suggestive of safeguarding the liberty of the accused without making compromises with a victim's right to her access to justice.

The proposal to introduce a quasi-judicial committee, alongside a restriction on arrests during a designated cooling period, might prove to be an ambitious step on paper. It may be attributable to the absence of a statutory authority to implement these directives as well as the undefined scope of their jurisdictional applicability. The recent ruling undermines a

victim's pursuit of justice by denying her the opportunity to have her complaint addressed in a timely manner.

Despite filing an FIR/complaint, no action can be taken until the 'cooling period' concludes, thereby exacerbating the victim's plight even after lodging the complaint. The idea of introducing a 'cooling period' and referring the complaint to the FWC falls outside the ambit of the statutory and institutional framework.

This reminds us of another instance of judicial experimentalism. In 2017, the Supreme Court, in *Rajesh Sharma*, gave similar directions for constituting FWCs and the forwarding of complaints to such FWCs. The one-month period provided to FWCs, in *Rajesh Sharma*, is akin to the 'cooling period' devised by the Allahabad High Court. We should not forget that the directions in *Rajesh Sharma* were not welcomed by the society at large. These were termed 'regressive' and beyond 'judicial competence'. This resulted in the rollback of the directions by the Supreme Court within a year.

A three-judge Bench, in *Social Action Forum for Manav Adhikar* (2018), overturned the directions in *Rajesh Sharma* and restored the victim's right to prompt access to justice and the supremacy of the criminal justice functionaries in the reporting of crimes and the dispensation of justice.

Revisit the ruling

It becomes crucial for the Supreme Court to revisit its ruling as the apprehension surrounding the misuse of the law by the victim and the abuse of power by the police has been addressed through legislative and judicial measures. The act of forwarding complaints to FWCs is beyond legislative intent, against the functional autonomy of the criminal justice agencies and, most importantly, dents the victim's pursuit of justice.

Making health care safe for every Indian

On September 17, the world observes World Patient Safety Day. This is a reminder that the basic promise of health care continues to elude us. Globally, estimates show that one in ten patients experience harm while receiving care during hospitalisation, and this number rises to four in ten in outpatient care.

For India, where the burden of disease is quickly shifting to chronic conditions such as cancer, diabetes, heart disease, and mental health disorders, the challenge is especially urgent. These conditions demand long-term frequent treatment, creating more points where safety lapses can occur. In acute care, where the complexity of treatment requires multiple specialities to come together, medical harm happens when there is insufficient coordination.

Many faces of patient harm
Patients are usually vulnerable in more complex situations, such as hospital-acquired infections, blood clots, or even unsafe injection or transfusion practices. However, patient harm can also show up in everyday situations, such as unintentional prescription of inappropriate medicine combinations, delayed diagnoses, or preventable falls.

Hospitals across India are placing higher standards on delivery, by instituting quality audits, developing protocols, running staff trainings, and strengthening infection control alongside patient safety. In practice though, systems designed to protect patients are still vulnerable to breakdowns. From the health-care provider's side, doctors, nurses, and staff often operate under extreme pressure. Staff attrition, heavy patient loads, long shifts, and inadequate staffing mean that even when they want to engage fully with every patient, time and fatigue become serious constraints. In India, unsafe care persists because of a two-way gap



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– overburdened providers and passive uninformed patients hesitant to ask questions. Closing this gap requires shifting mindsets, where patients must be empowered to become active partners in care, and health-care systems must welcome and enable their participation.

A shared responsibility

Patient safety cannot rest on the shoulders of doctors and nurses alone. Families and patients themselves play a vital role, by asking questions, maintaining personal health records, reporting adverse drug reactions, and following safe practices at home, including not self-medicating.

In recent years, India has taken important steps to build this ecosystem. The National Patient Safety Implementation Framework (2018-25) lays out a roadmap, from adverse event reporting to embedding safety into clinical programs. Professional networks like the Society of Pharmacovigilance, India monitor and report adverse drug reactions nationwide. The National Accreditation Board for Hospitals & Healthcare Providers (NABH) has raised benchmarks for patient safety by auditing and embedding practices for infection control, patient rights, and medication management. Yet, far less than 5% of hospitals in India have earned full accreditation.

Civil society has also stepped up. The Patient Safety & Access Initiative of India Foundation works on strengthening regulatory clarity of medical devices.

Another non-profit, the Patients for Patient Safety Foundation reaches 14 lakh households weekly on safe health practices. It also equips over 1,100 hospitals and 52,000 professionals.

This responsibility can extend further to the media to shape public understanding by highlighting both failures and successful safety models. Higher education institutions can build safety awareness early; corporates can extend workplace programs

and fund safety campaigns through CSR. Even technology innovators have a role by designing workflows that flag harmful drug interactions or aid communication during care.

Building a culture of safety

The WHO Global Patient Safety Action Plan provides a blueprint for integrating safety into all levels of health-care systems. One proven mechanism is the establishment of Patient Advisory Councils (PACs) to bring patient voices into hospital decision-making. Case studies from high-income countries show PACs improving safety, communication and trust. India can pilot and scale this model, adapting them to local realities.

As India approaches the final stretch of the National Patient Safety Implementation Framework (2018-25), governments must renew focus, mobilise resources, incorporate patient safety into medical and nursing education, and close the gap between policy and practice. Hospitals, too, must rise to the challenge, by meeting accreditation standards, embracing PACs, and co-developing technology solutions for catching errors early.

This year's focus on safe care for every newborn and every child reminds us that we need to safeguard care from the very first breath of life.

True patient safety requires integrated action across the entire ecosystem. We need to move beyond isolated efforts and build a national patient safety movement. On this World Patient Safety Day, let us make this a shared mission, with governments, hospitals, patients, and civil society working together to make safe care an everyday reality of health care in India.

With inputs from Som Mittal, Chairperson, Patients for Patient Safety Foundation (PPFSF), former Chairperson, Nasscom and Nidra Chaturvedi, Co-Chairperson, PPFSF



Constitutional clarity

Presidential Reference proceedings boost case against delays by Governors

The hearings on the Presidential Reference that followed the Supreme Court judgment on April 8, 2025, clarifying the constitutional position on the powers of the Governor and the President in providing assent to Bills passed by State Assemblies, have largely confirmed that Governors should not indefinitely withhold assent to such Bills. Addressing the 14 questions posed in the Presidential Reference, the observations of the five-judge Bench largely converged on the constitutional principles elucidated in April. The question by the Chief Justice of India, B.R. Gavai, on whether the Court should "sit powerless" while Governors make "competent State legislatures defunct" echoed the core concern in the April judgment – that constitutional offices cannot paralyse democratic governance through inaction. While States' counsel largely argued along political lines based on which parties governed them, this did not detract from the thorough examination of Articles 200 and 201 during the proceedings. The argument that the Constitution's silence on specific time-lines in these Articles does not grant unlimited discretion to Governors remains compelling. When the Solicitor-General argued that Governors serve as a "check on hasty legislation", the Bench's response also indicated the tension between this position and democratic principles. Justice Vikram Nath's observation, that Governors "cannot sit over the wisdom of the legislature indefinitely", was succinct.

That only Opposition-ruled States have faced prolonged delays, as pointed out by Kerala's counsel, suggests the constitutional framework itself is not ambiguous but that its application has become selective. The Bench's examination of why judicial review applies to Governors' recommendations under Article 356 (President's Rule) but supposedly not to actions under Article 200 (assent to Bills) highlighted potential inconsistencies in arguments defending unlimited discretion for Governors. The proceedings related to the questions posed in the Presidential Reference demonstrate why the April judgment's framework remains constitutionally sound and necessary to maintain the balance between federal cooperation and State autonomy. The question from these hearings is on why the Centre chose this unusual route. As scholars have established, an advisory opinion by the Court under Article 143 does not override a binding judgment under Article 141. If the Centre genuinely sought clarity on the April judgment, well-established judicial procedures such as review petitions or curative petitions were available. When the Court's final reply to the Reference is received, the Centre should accept the constitutional boundaries that the April judgment and these proceedings have reinforced, rather than continuing to pursue powers that would alter the delicate federal balance that the Constitution has established.

Automated world: A machine cannot process the meaning behind raw data. Data annotators label raw images, audio, video, and text with information that trains AI and Machine Learning (ML) models. This, then, becomes the training set for AI and ML models. ISTOCKPHOTO

Unseen labour, exploitation: the hidden human cost of Artificial Intelligence

AI's efficiency and accuracy are built on the invisible labour of low-paid workers in developing countries. From data labelling to content moderation, 'ghost workers' face exploitation, insecurity, and mental health risks. Data annotators play a major role in training LLMs like ChatGPT, Gemini, etc.

Nivedita S.

The world is gearing towards an 'automated economy' where machines relying on artificial intelligence (AI) systems produce quick, efficient and nearly error-free outputs. However, AI is not getting smarter on its own; it has been built on and continues to rely on human labour and energy resources. These systems are fed information and trained by workers who are invisibilised by large tech companies, and mainly located in developing countries.

Areas of human involvement

A machine cannot process the meaning behind raw data. Data annotators label raw images, audio, video, and text with information that trains AI and Machine Learning (ML) models. For example, an large-language models (LLM) cannot recognise the colour 'yellow' unless the data has been labelled as such. Similarly, self-driving cars rely on information from video footage that has been labelled to distinguish between a traffic sign and humans on the road. The higher the quality of the dataset, the better the output and the more human labour is involved in creating it.

Data annotators play a major role in training LLMs like ChatGPT, Gemini, etc.

An LLM is trained in three steps: self-supervised learning, supervised learning and reinforcement learning. In the first step, the machine picks up information from large datasets on the Internet. The data labellers or annotators enter in the second and third steps, where this information is fine-tuned for the LLM to give the most accurate response. Humans give feedback on the output the AI produces for better responses to be generated over time, as well as remove errors and jailbreaks.

This meticulous annotating work is outsourced by tech companies in Silicon Valley to mainly workers in countries like Kenya, India, Pakistan, China and the Philippines for low wages and long working hours.

Data labelling can be of two types: those which do not require subject expertise and those which are more niche and require subject expertise. Several tech companies have been accused of employing non-experts for technical subjects that require prior knowledge. This is a contributing factor in the errors found in the output produced by AI. A data labeller from Kenya revealed that they were tasked with labelling medical scans for an AI system intended for use in healthcare services elsewhere, despite lacking relevant expertise.

However, due to errors resulting from this, companies are starting to ensure experts for such information being fed

into the system.

Automated features requiring humans

Even features marketed as 'fully automated' are often underpinned by invisible human work. For example, our social media feeds are 'automatically' filtered to censor sensitive and graphic content. This is only possible because human moderators labelled such content as harmful by going through thousands of uncensored images, texts and audio. The exposure to such content daily has also been reported to cause severe mental health issues like **post-traumatic stress disorder**, anxiety and depression in the workers.

Similarly, there are voice actors and actors behind AI-generated audios and videos. Actors may be required to film themselves dancing or singing for these machines to recognise human movements and sounds. Children have also been reportedly engaged to perform such tasks.

In 2024, AI tech workers from Kenya sent a letter to former U.S. President Joe Biden talking about the poor working conditions they are subjected to. "In Kenya, these US companies are undermining the local labor laws, the country's justice system and violating international labor standards. Our working conditions amount to modern-day slavery," the letter read. They

said the content they have to annotate can range from pornography and beheadings to bestiality for more than eight hours a day, and for less than \$2 an hour, which is very low in comparison to industry standards. There are also strict deadlines to complete a task within a few seconds or minutes.

When workers raised their concerns to the companies, they were sacked and their unions dismantled.

Most AI tech workers are unaware of the large tech company they are working for and are engaged in online gig work. This is because, to minimise costs, AI companies outsource the work through intermediary digital platforms. There are subcontract workers in these digital platforms who are paid per "microtask" they perform. They are constantly surveilled, and if they fall short of the targeted output, they are fired. Hence, the labour network becomes fragmented and lacking transparency.

The advancement of AI is powered by such "ghost workers." The lack of recognition and informalisation of their work helps tech companies to perpetuate this system of labour exploitation. There is a need to bring in stricter laws and regulations on AI companies and digital platforms, not just on their content in the digital space, but also on their labour supply chains powering AI, ensuring transparency, fair pay, and dignity at work.



On WHO essential medicines list, GLP-1 drugs for diabetes, weight loss may become cheaper

Ramya Kannan
CHENNAI

With the World Health Organization (WHO) updating its Model Lists of Essential Medicines (EML) to add the GLP-1 class of drugs for diabetes with associated comorbidities such as obesity, access to these drugs might just become easier. Listing a medicine on the EML is one step in a series of actions that can lead to lower costs, better affordability, and greater access.

The 25th meeting of the WHO Expert Committee on the Selection and Use of Essential Medicines was held from May 5 to 9. It reviewed scientific evidence showing that a group of medicines called glucagon-like peptide-1 (GLP-1) receptor agonists can help people with type 2 diabetes – especially those who also have heart or kidney disease – and concluded that semaglutide, dulaglutide, liraglutide, and tirzepatide would be added to the EML. These drugs are used as glucose-lowering therapy for adults with type 2 diabetes mellitus and cardiovascular disease or chronic kidney disease and obesity.



Affordable medicine: The WHO move is one step in a series of actions that can lead to lower costs and greater access. GETTY IMAGES

According to the WHO, the rationale for including these drugs is very clear: diabetes and obesity are two of the most urgent

High price

health challenges facing the world today. According to statistics from 2022, over 800 million people live with diabetes, with half going untreated. At the same time, more than one billion people worldwide are affected by obesity, and rates are rising fast especially in low- and middle-income countries.

The prices of these drugs are so high that access is limited. "A large share of out-of-pocket

spending on noncommunicable diseases goes toward medicines, including those classified as essential and that, in principle, should be financially accessible to everyone," Deusdedit Mubangizi, WHO Director of Policy and Standards for Medicines and Health Products, says.

Good step forward

While appreciating the move, Anoop Mishra, head, Fortis C-DOC Hospital for Diabetes and Allied Sciences, New Delhi, lends a reality check: "It is a good move; however, in India these types of drugs will benefit only a small number of people, while other life-saving, low-cost essential medicines for diabetes, hypertension, and heart disease, applicable to a large number of people, remain largely unavailable."

On the other hand, V. Mohan, chairman, Dr. Mohan's Diabetes Specialties Centre (DMDSC), provides

an energetic response: "I'm very happy that WHO has included the GLP-1 class of drugs. The fact that even a conservative organisation like the WHO has included these rather expensive drugs in their EML, shows how compelling the evidence is. Apart from the glucose lowering effect, they have tremendous effect on weight reduction and obesity management." He points out that recently, injectable semaglutide has been approved for metabolic dysfunction-associated steatotic liver disease, associated with weight, and for improving cardiovascular health.

R.M. Anjana, managing director, DMDSC, says: "It will surely help improve access and affordability. But will it be useful as a first line drug? This may not be for everyone...as there are various subtypes of diabetes. But for those in whom it is indicated, it's a good step forward."

Top court asks who will decide that a religious conversion is 'deceitful'

Petitioner-advocate seeks a ban on such conversion; NGO's counsel seeks a stay of 'Freedom of Religion' Acts, which, he says, are getting more and more strident as courts grant bail and bring relief to persons accused and arrested under them

Krishnadas Rajagopal
NEW DELHI

The Supreme Court on Tuesday asked a petitioner seeking a complete ban on "deceitful" religious conversions who exactly will decide whether an inter-faith marriage is fraudulent or not.

Chief Justice of India B.R. Gavi agreed with senior advocate C.U. Singh, appearing for an NGO questioning the validity of the increasingly stringent anti-religious conversion laws across 10 States, that the court sits to examine the constitutionality of laws, and not to make laws.

Petitioner-advocate Ashwini Upadhyay said his petition was against religious conversion through allurement and duplicity. Mr. Upadhyay argued that one had the right to propagate religion under Article 25 of the Constitution, but not to convert through fraud or force.

Highlighting the risk his plea posed to the freedom of conscience enshrined in the Constitution, Chief Justice Gavi pointedly asked, "But who would find out

Faith and freedom

The Supreme Court is hearing pleas that have raised questions on the right to faith, marriage and personal liberty in a democracy as State governments bring in strict legislation against unlawful religious conversion

Some petitioners have opposed the validity of the anti-religious conversion laws across 10 States while others said that the laws work to prevent conversion through allurement, fraud and force

Senior advocate C.U. Singh, representing an NGO, said that the States had enacted increasingly stringent laws that even make it possible for third parties to file criminal complaints against interfaith couples



Additional Solicitor-General K.M. Nataraj, on behalf of some States, opposed the pleas for stay on the laws

The court scheduled the case after six weeks to consider the question of stay after hearing from the States

that a religious conversion was deceitful or not?"

Mr. Singh, appearing in the case along with senior advocate Indira Jaising and advocate Vrinda Grover, said that States such as Uttar Pradesh, Himachal Pradesh, Madhya Pradesh, Uttarakhand, Gujarat, Chhattisgarh, Haryana, Jharkhand, and Karnataka had enacted copycat "Freedom of Religion" Acts one after the other, with Rajasthan recently coming up with one.

"The batch of laws are characterised as Freedom of Religion Acts, but they contain everything but freedom. They are virtual-

ly anti-conversion laws," Mr. Singh submitted.

He sought a stay of these laws, which were getting more and more strident as courts grant bail and bring relief to persons accused and arrested under them.

The court scheduled the case after six weeks to consider the question of stay of the implementation of the Acts.

Frivolous complaint

Mr. Singh said recent amendments made in these Acts empowered third parties to file criminal complaints against couples in inter-faith marriage. The punishment under

these laws included a "minimum 20-year sentence or a maximum of life imprisonment". The bail conditions were on a par with the draconian Unlawful Activities (Prevention) Act. The burden of proof was on the convert to prove that he or she was not forced or "allured" to change faith, senior counsel argued.

"For anybody who marries inter-faith, bail becomes impossible. These are Constitutional challenges... It is not just marriages but any normal church observances or festivals, mobs may come..." Mr. Singh submitted.

Additional Solicitor-General K.M. Nataraj said the case was coming up for hearing after three years, "and suddenly they [the petitioners] are asking for stay".

In 2023, while hearing the case, the court had refused to refer to the Law Commission the question whether "forcible conversion" should be made a separate offence relating to religion under the Indian Penal Code.

The government had even opposed the *locus standi* of the NGO, Citizens for Justice and Peace, represented by Mr. Singh, to move the court against these laws.

Mr. Singh had, however, argued that these State laws amounted to undue interference in a person's right of choice of faith and life partner. He said each State's law was used by the other as a "building block" to make a more "virulent" law for itself.

The petitions have argued that these State laws have a "chilling effect" on the right to profess and propagate one's religion, enshrined in Article 25.



Vibrant dancers



In sync: Members of the Raj Gond tribe from Adilabad district of Telangana rehearsing Gussadi dance for the 78th Hyderabad Liberation Day celebrations to be held on Wednesday. NAGARA GOPAL