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THE HINDU • COMPLETE ANALYSIS

Editorial & Current Affairs Analysis

Prelims • Mains • GS Coverage

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Important Issues of the Day

PREPARED BY

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Contents

Today's coverage — five important issues mapped to the GS papers & Prelims

1 · India–New Zealand FTA: A Modern Trade Partnership

The Hindu, Page 6 • GS Paper 2 (IR) & GS Paper 3 (Economy)

India–New Zealand FTA, a modern trade partnership

Source: **The Hindu** • Authors: Aditya Nadkarni & Snehal Gadhave, Nexdigm • Theme: Facilitation-led trade policy

Page No.6 , GS 3

India-New Zealand FTA, a modern trade partnership

For years, trade between India and New Zealand has been a relationship with untapped potential. The two economies have remained friendly partners, yet commercial engagement has never quite matched the opportunities available. Trade remains relatively modest. The bilateral merchandise trade stood at $1.3 billion (approximately) in FY 2024-25, of which India's exports to New Zealand accounted for only around $711 million, despite registering 32% year-on-year growth. The numbers are moving in the right direction, but remain small when compared to India's trade relationships with larger partners. The proposed India-New Zealand Free Trade Agreement (FTA) could change that equation as it attempts to create conditions for faster bilateral growth.

At first glance, the headlines are easy to focus on – zero-duty access for Indian exports, wider market access for services, and a proposed investment commitment of $20 billion over the next 15 years. These are important outcomes. The larger story, however, is that the agreement reflects the evolving nature of trade partnerships.

Modern trade beyond tariffs

Modern FTAs are no longer just about lowering customs duties. Businesses today are equally concerned about how quickly goods move through ports, how easily certifications are recognised, whether regulations are predictable, and how much compliance effort is required to access preferential treatment. In many industries, these factors influence competitiveness as much as tariffs.

For Indian exports, New Zealand has extended duty-free access across 100% of its tariff lines. However, for businesses, particularly in labour-intensive sectors such as textiles, apparel, leather, and handicrafts, this is not merely a removal of duties that had earlier reached to 10%, but a clear pricing advantage in a market otherwise dominated by established FTA partners. In a market where competing exporters already enjoy preferential access, even a single-digit tariff advantage can influence purchasing decisions.

Aditya Nadkarni

Director, Indirect Tax, Nexdigm

Snehal Gadhave

Senior Manager, Indirect Tax, Nexdigm

It is a strategic trade pact with long-term economic potential

On the other hand, India's approach is cautious. Sensitive sectors such as dairy have remained protected, reflecting a policy preference that has become increasingly visible in India's recent trade negotiations. The objective is clear: open and explore new opportunities without exposing vulnerable domestic industries to competitors.

Services could emerge as one of the most significant beneficiaries over the longer term. Indian businesses have strong capabilities in technology, consulting, engineering, health care, and education services. Greater market access along with clearer mobility provisions for professionals and students can make it easier for Indian firms to expand their presence in New Zealand. For a country where services account for an increasing share of economic output, these provisions deserve as much attention as tariff concessions.

Compliance unlocks trade benefits

One more feature that businesses should watch closely is the Rules of Origin (RoO) framework. Preferential access under an FTA is never automatic. Companies must demonstrate that products meet prescribed origin requirements before claiming lower duties. The India-New Zealand agreement incorporates detailed product-specific rules, documentation requirements, and traceability measures to prevent misuse through transshipment.

From a policy standpoint, this strengthens the integrity of the agreement, while from a business standpoint; it raises the importance of supply chain visibility and compliance readiness.

The same principle applies to trade facilitation measures included in the pact. Faster customs clearances, digital certification systems, and simplified procedures often deliver tangible commercial benefits. Reduced delays can reduce inventory costs, improve cash flow, and create greater certainty across supply chains.

This agreement also aims to address non-tariff barriers, particularly in sectors where regulatory approvals often matter more than tariffs. Industries such as pharmaceuticals, food processing, chemicals, and agriculture could gain benefits if regulatory processes are streamlined and more predictable.

Preparing businesses for FTAs

Viewed more broadly, the agreement marks another step in India's transition towards a facilitation-led trade policy, where businesses enhance competitiveness not only through lower tariffs but also through reduced transaction costs, faster market access, and greater certainty across the trade ecosystem.

From a business perspective, the real opportunity lies not merely in availing lower duties but also in integrating operational, sourcing, and compliance functions with the framework of the agreement. Today, preferential access increasingly depends on demonstrable compliance, traceability, and process discipline. Given this, businesses should proactively review Harmonised System (HS) classifications, evaluate eligibility under the RoO framework, strengthen supply-chain documentation, identify sector-specific export opportunities, and reassess landed-cost models to maximise the commercial advantages offered under the agreement.

Original editorial reproduced for academic use — The Hindu, Page 6.

1 · India–New Zealand FTA — Decoded

Key facts, significance & analysis

- **Context:** India–NZ trade has long been a relationship of untapped potential — friendly partners, but modest commercial engagement. The proposed FTA aims to create conditions for faster bilateral growth.
- **Trade numbers:** Bilateral merchandise trade stood at about **$1.3 billion in FY 2024-25**; India's exports to NZ were only ~**$711 million**, despite registering **32% year-on-year growth** — small versus India's larger partners.
- **Headline outcomes:** Zero-duty access for Indian exports, wider market access for services, and a proposed **investment commitment of $20 billion over 15 years**.
- **Market access:** New Zealand has extended **duty-free access across 100% of its tariff lines**. This is a clear pricing advantage for labour-intensive Indian sectors — textiles, apparel, leather, handicrafts — where duties earlier reached 10%.
- **India's cautious approach:** Sensitive sectors such as **dairy** remain protected — reflecting a consistent policy of opening new opportunities without exposing vulnerable domestic industries.
- **Services as the big winner:** India's strengths in technology, consulting, engineering, healthcare and education services, combined with clearer mobility provisions for professionals and students, can expand India's presence in NZ.

Modern Trade Beyond Tariffs — Why It Matters

- **Rules of Origin (RoO):** Preferential access is never automatic — products must meet prescribed origin requirements, with documentation and traceability to prevent misuse through **transshipment**.
- **Trade facilitation:** Faster customs clearances, digital certification, simplified procedures — these reduce inventory costs and improve cash flow as much as tariff cuts.
- **Non-tariff barriers:** The pact targets regulatory approvals in pharmaceuticals, food processing, chemicals and agriculture.
- **Harmonised System (HS):** Businesses must review HS classifications and RoO eligibility to capture benefits.

Static Linkages — FTAs & India

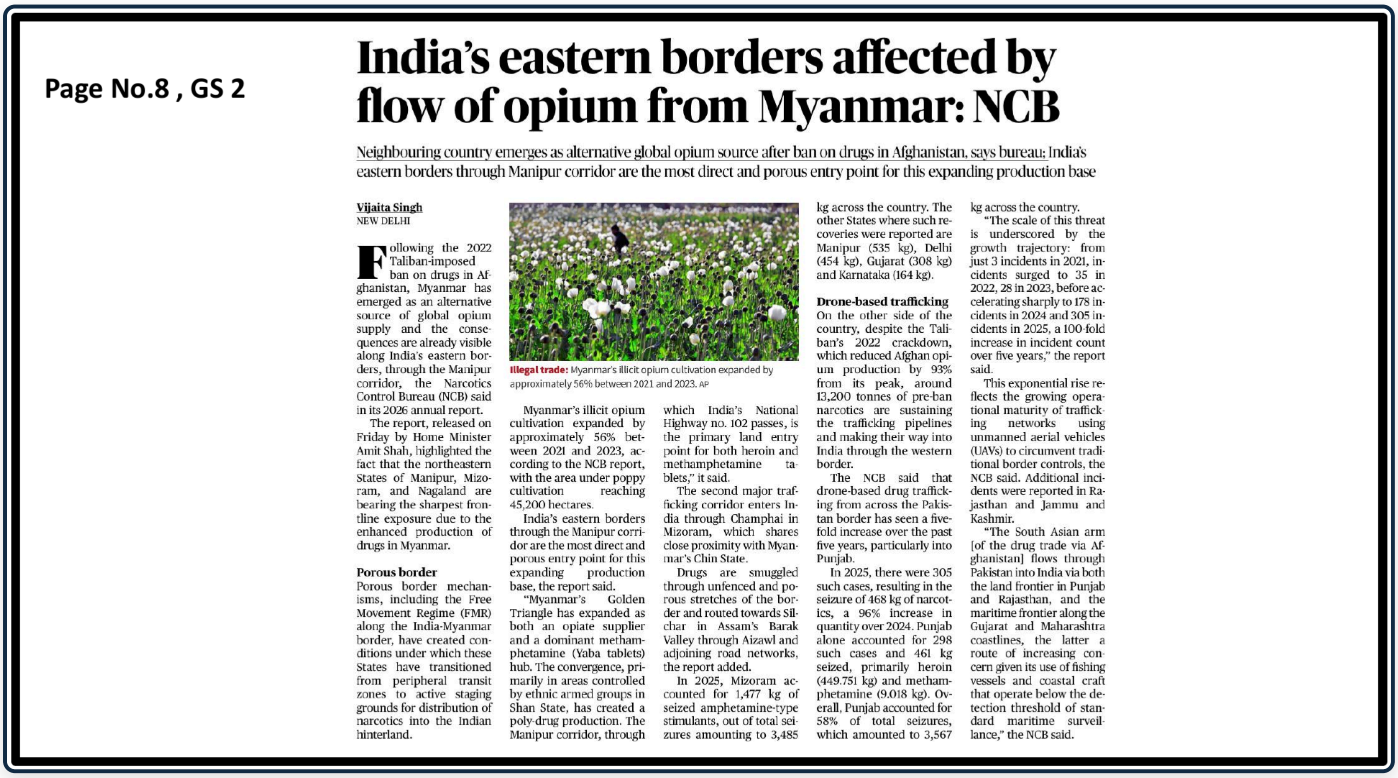
- **FTA** = agreement to reduce/eliminate tariffs & trade barriers between members (e.g., India–UAE CEPA, India–Australia ECTA, India–EFTA TEPA).
- **CEPA / CECA / ECTA** are broader pacts covering goods, services, investment.
- India's recent template: **protect dairy & agriculture**, push **services & mobility**, secure **investment commitments**.

2 · Golden Triangle & Opium Flow from Myanmar

The Hindu, Page 8 • Prelims (Maps, Internal Security) + GS-3

India's eastern borders affected by flow of opium from Myanmar: NCB

Source: **The Hindu** (Vijaita Singh) • Based on NCB 2026 annual report, released by HM Amit Shah



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India's eastern borders affected by flow of opium from Myanmar: NCB

Neighbouring country emerges as alternative global opium source after ban on drugs in Afghanistan, says bureau; India's eastern borders through Manipur corridor are the most direct and porous entry point for this expanding production base

Vijaita Singh
NEW DELHI

Following the 2022 Taliban-imposed ban on drugs in Afghanistan, Myanmar has emerged as an alternative source of global opium supply and the consequences are already visible along India's eastern borders, through the Manipur corridor, the Narcotics Control Bureau (NCB) said in its 2026 annual report.

The report, released on Friday by Home Minister Amit Shah, highlighted the fact that the northeastern States of Manipur, Mizoram, and Nagaland are bearing the sharpest frontline exposure due to the enhanced production of drugs in Myanmar.

Porous border

Porous border mechanisms, including the Free Movement Regime (FMR) along the India-Myanmar border, have created conditions under which these States have transitioned from peripheral transit zones to active staging grounds for distribution of narcotics into the Indian hinterland.

Illegal trade: Myanmar's illicit opium cultivation expanded by approximately 56% between 2021 and 2023. AP

Myanmar's illicit opium cultivation expanded by approximately 56% between 2021 and 2023, according to the NCB report, with the area under poppy cultivation reaching 45,200 hectares.

India's eastern borders through the Manipur corridor are the most direct and porous entry point for this expanding production base, the report said.

"Myanmar's Golden Triangle has expanded as both an opiate supplier and a dominant methamphetamine (Yaba tablets) hub. The convergence, primarily in areas controlled by ethnic armed groups in Shan State, has created a poly-drug production. The Manipur corridor, through which India's National Highway no. 102 passes, is the primary land entry point for both heroin and methamphetamine tablets," it said.

The second major trafficking corridor enters India through Champhai in Mizoram, which shares close proximity with Myanmar's Chin State.

Drugs are smuggled through unfenced and porous stretches of the border and routed towards Silchar in Assam's Barak Valley through Aizawl and adjoining road networks, the report added.

In 2025, Mizoram accounted for 1,477 kg of seized amphetamine-type stimulants, out of total seizures amounting to 3,485 kg across the country. The other States where such recoveries were reported are Manipur (535 kg), Delhi (454 kg), Gujarat (308 kg) and Karnataka (164 kg).

Drone-based trafficking

On the other side of the country, despite the Taliban's 2022 crackdown, which reduced Afghan opium production by 93% from its peak, around 13,200 tonnes of pre-ban narcotics are sustaining the trafficking pipelines and making their way into India through the western border.

The NCB said that drone-based drug trafficking from across the Pakistan border has seen a five-fold increase over the past five years, particularly into Punjab.

In 2025, there were 305 such cases, resulting in the seizure of 468 kg of narcotics, a 96% increase in quantity over 2024. Punjab alone accounted for 298 such cases and 461 kg seized, primarily heroin (449.751 kg) and methamphetamine (9.018 kg). Overall, Punjab accounted for 58% of total seizures, which amounted to 3,567 kg across the country.

"The scale of this threat is underscored by the growth trajectory: from just 3 incidents in 2021, incidents surged to 35 in 2022, 28 in 2023, before accelerating sharply to 178 incidents in 2024 and 305 incidents in 2025, a 100-fold increase in incident count over five years," the report said.

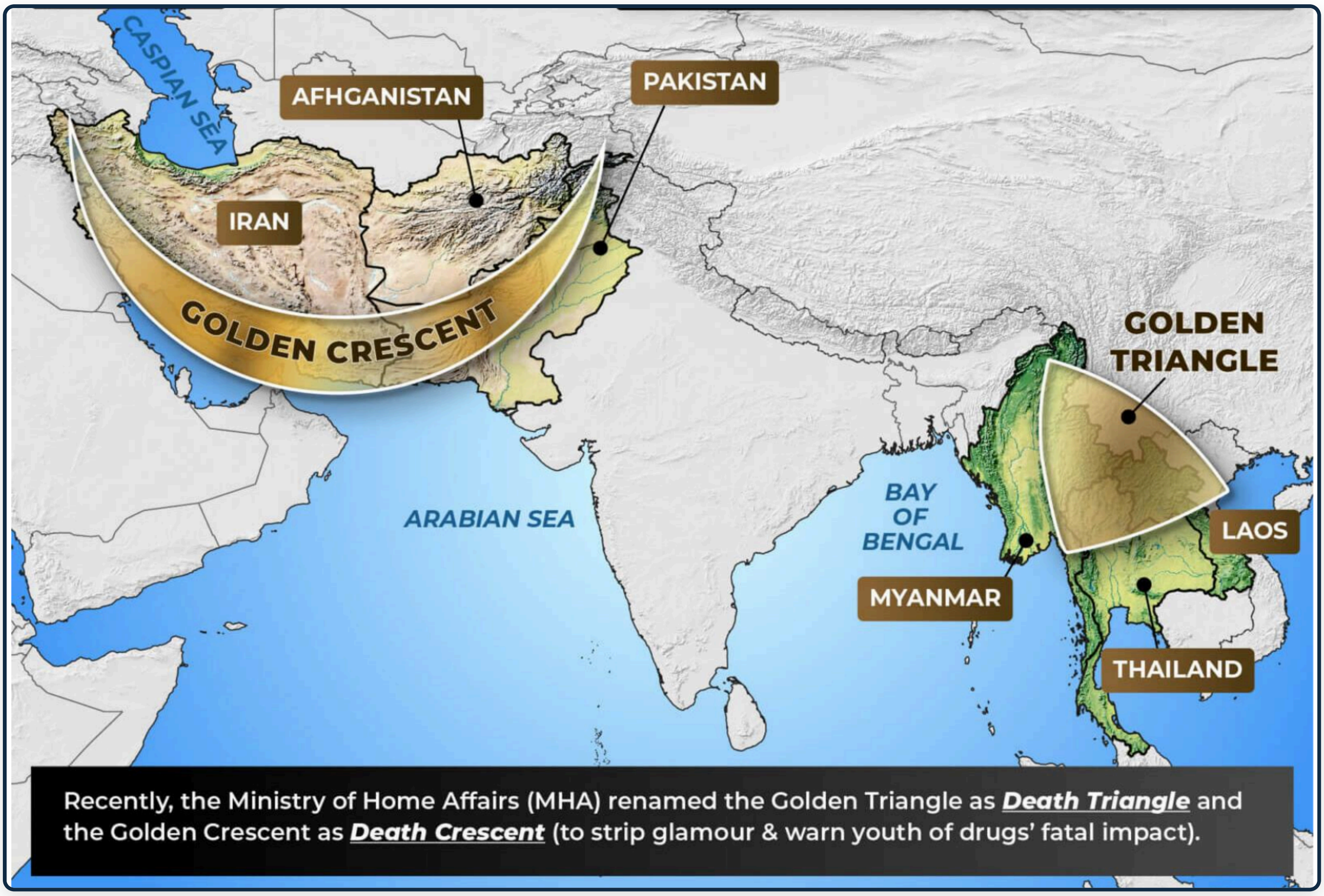
This exponential rise reflects the growing operational maturity of trafficking networks using unmanned aerial vehicles (UAVs) to circumvent traditional border controls, the NCB said. Additional incidents were reported in Rajasthan and Jammu and Kashmir.

"The South Asian arm [of the drug trade via Afghanistan] flows through Pakistan into India via both the land frontier in Punjab and Rajasthan, and the maritime frontier along the Gujarat and Maharashtra coastlines, the latter a route of increasing concern given its use of fishing vessels and coastal craft that operate below the detection threshold of standard maritime surveillance," the NCB said.

NCB report coverage — The Hindu, Page 8.

2 · Golden Triangle vs Golden Crescent — Map

Prelims must-know geography



Golden Crescent (Afghanistan–Iran–Pakistan) & Golden Triangle (Myanmar–Laos–Thailand).

❖ The Two Drug-Producing Zones

Feature	Golden Crescent	Golden Triangle
Countries	Afghanistan, Iran, Pakistan	Myanmar, Laos, Thailand
Location to India	West / North-West	East / North-East
Key drug	Heroin (opium)	Opium + Methamphetamine (Yaba)
Entry into India	Punjab, Rajasthan, J&K, Gujarat coast	Manipur, Mizoram corridors

- **MHA recently renamed** the Golden Triangle as **Death Triangle** and the Golden Crescent as **Death Crescent** — to strip the "glamour" and warn youth of drugs' fatal impact.

2 · NCB Report — Decoded

Eastern & western frontier trends

- **Why Myanmar now:** Following the **2022 Taliban ban** on drugs in Afghanistan, Myanmar has emerged as an alternative global opium source. Effects are visible along India's eastern borders via the **Manipur corridor**.
- **Frontline States:** Manipur, Mizoram and Nagaland bear the sharpest exposure. The **Free Movement Regime (FMR)** along the India–Myanmar border created porous conditions, turning transit zones into staging grounds.
- **Scale:** Myanmar's illicit opium cultivation expanded ~**56% between 2021 and 2023**, with poppy area reaching **45,200 hectares**. Shan State (ethnic armed groups) is a poly-drug hub for opium + Yaba tablets.
- **Corridor 1:** Manipur corridor — **NH-102** passes through it — primary land entry for heroin & meth.
- **Corridor 2:** Enters India via **Champhai (Mizoram)**, near Myanmar's Chin State; routed towards Silchar (Assam's Barak Valley) via Aizawl.

Drone-based Trafficking & Western Border

- Despite the Taliban's 2022 crackdown (Afghan opium output down **93%** from peak), ~**13,200 tonnes of pre-ban narcotics** still feed pipelines into India via the western border.
- Drone-based trafficking from across the Pakistan border has seen a **five-fold increase** in five years, especially into Punjab.
- In 2025: **305 drone cases**, seizure of **468 kg** (96% rise over 2024). Punjab alone: 298 cases, 461 kg seized; **58% of all national seizures** (total 3,567 kg).

Static — NCB

- **Narcotics Control Bureau (NCB)** — apex coordinating agency under the **Ministry of Home Affairs**, set up in **1986** under the **NDPS Act, 1985**.

3 · Organ Transplantation: Post-Transplant Survival Data

The Hindu, Page 12 • GS Paper 2 (Health/Governance) & GS Paper 4 (Ethics)

Govt. asks hospitals to publish post-transplant survival data

Source: **The Hindu** (S. Vijay Kumar) • Union Health Ministry directive via NOTTO

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Govt. asks hospitals to publish post-transplant survival data

Data being collected to reveal success rate of transplant surgeries in various hospitals and ensure patients make informed choices; registered hospitals must display the data on their homepage

S. Vijay Kumar
CHENNAI

The Union Health and Family Welfare Ministry has asked the State governments to direct registered organ transplant hospitals to reveal post-transplant survival data and publish the same on their respective websites.

The data are being collected for the first time on such a scale to reveal the success rate of transplant surgeries, especially kidney, lung and heart transplants, and lifespan of those who have received the organs. The results are expected to enable patients requiring transplants to take a decision or make a choice. The hospitals are told to strictly adhere to informed consent requirements and ensure that all relevant information regarding transplant procedures, risks, and outcomes is adequately disclosed to patients and their families.

Registered transplant hospitals have been told to display the crucial data on the home page of their websites. GETTY IMAGES/ISTOCK

In a note to the Health Secretaries of the States and Union Territories, the National Organ and Tissue Transplant Organisation (NOTTO), which functions under the Directorate-General of Health Services, referred to a letter written by Dakshina Kannada MP Brijesh Chowta on the need to enhance transparency and accountability of kidney transplantation outcomes.

The MP had emphasised the need for tracking long-term transplant outcomes, including graft survival, complications, and mortality, as well as disclosure of post-transplant survival data by hospitals and strict adherence to informed consent and patient communication protocols.

The NOTTO maintains the National Organ and Tissue Transplant Registry, which includes data of kidney donors and recipients. Its Director, Anil Kumar, said in the note that regular and comprehensive reporting of post-transplant data would strengthen monitoring of transplant outcomes, improve traceability, and support evidence-based policy decisions.

Boosting transparency

Registered transplant hospitals across the country were told to display the crucial data on the home page of their respective websites. The process was part of the initiatives to strengthen transparency, accountability, and outcome monitoring in organ transplantation nationwide. Asked for his views, a senior transplant surgeon in Chennai said crude mortality rates had very limited informational value for individual patients wanting to make a choice of hospitals. "Until risk-stratified mortality outcomes that have been duly scrutinised in an unbiased manner are available both from government and private hospitals, it will be near impossible to make informed choices," he said.

The data hospitals have been told to publish – number of patients alive after six months, one year, three years and five years – will be difficult to collate as there is no mechanism for such a follow-up, he said. "Deaths post-transplant happen due to a variety of reasons such as age, comorbidities and other risk factors. Even if post-survival data are shared by hospitals, it will be challenging to authenticate the veracity of the claims," he said.

Transplant survival-data directive — The Hindu, Page 12.

3 · Organ Transplant — Decoded

The directive, the framework & the ethics angle

- **The directive:** The Union Health Ministry has asked States to direct registered transplant hospitals to **reveal post-transplant survival data** and publish it on their websites — collected on this scale for the first time.
- **Purpose:** Reveal the **success rate** of surgeries (especially kidney, lung, heart) and lifespan of recipients, so patients can make an **informed choice**.
- **Consent & transparency:** Hospitals must strictly follow **informed-consent** rules and disclose procedures, risks and outcomes to patients & families.
- **Origin:** NOTTO acted on a letter by Dakshina Kannada MP **Brijesh Chowta** on transparency & accountability in kidney-transplant outcomes. NOTTO maintains the **National Organ & Tissue Transplant Registry**.
- **Status:** India is the **3rd country** in the world (after USA & China) in total transplants done per year.

GS-4 / Ethics Angle — A Caveat from Experts

- A senior Chennai transplant surgeon cautioned that **crude mortality rates** have limited informational value for individual patients — without **risk-stratified outcomes** scrutinised in an unbiased manner, informed choice is hard.
- Deaths happen due to age, co-morbidities and other risk factors; **verifying the veracity** of self-reported hospital claims is challenging.
- **Ethical tension:** transparency & patient autonomy vs. risk of misleading comparisons / "gaming" of data.

Static Framework — Organ Transplantation in India

- **THOTA, 1994** (Transplantation of Human Organs & Tissues Act, amended 2011): regulates transplantation, post-death donation, penalties for violation.
- **2023 revised guidelines:** removed the **65-year upper age limit** for registering for deceased-donor organs & ended the **state domicile** requirement.
- **NOTP** (National Organ Transplant Programme) implements donation & transplantation nationwide.
- **NOTTO** (under Min. of Health, via 2011 amendment) = apex body for coordination, procurement, distribution & registry. Supported by **5 ROTTOs** & **14 SOTTOs**.
- **Challenges:** infrastructure & ICU-bed shortage for brain-stem-dead (BSD) donors; shortage of trained surgeons/nephrologists/intensivists; delays in BSD committees; high cost of immunosuppressants (schemes cover only year one).

4 · NFSA Amendments — Per-Person Foodgrain Entitlement

The Hindu, Page 12 • GS Paper 3 (Economy / Food Security)

NFSA amendments: 7 kg of foodgrains for a person, max 35 kg for a household

Source: **The Hindu** (A.M. Jigeesh) • Draft amendment open for public comment till **July 13**

Page No.12 , GS 3

NFSA amendments: 7 kg of foodgrains for a person, and maximum 35 kg for a household

EXPLAINER

A.M. Jigeesh
NEW DELHI

The story so far: The Union Food and Public Distribution Department on Wednesday published a draft of the proposed amendments to the National Food Security Act (NFSA). The draft is uploaded on the department's website. The public can comment on the amendments till July 13.

The amendment

A new provision in Section 3 of the National Food Security Act, 2013, proposes that every person belonging to households covered under the Antyodaya Anna Yojana (AAY) shall be entitled to 7 kg of foodgrains every month to a maximum of 35 kg per household. For AAY cardholders, this allocation will be free of any charges. Earlier, it was 35 kg per AAY household, irrespective of the number of members in the household.

Reason

The reason the Union government has given in the notice, along with the draft amendment, is that the existing household-based entitlement under the AAY, though intended as a protective measure for the most vulnerable families, results in significant inequities depending upon the size of the household.

"Smaller households receive a higher per-capita entitlement, whereas larger households receive a lower per-capita entitlement, which may fall below the entitlement available to priority households," the notice adds. The government maintains that the aim and purpose are to remove "intra-category inequities, provide for more rational foodgrain allocation and better align entitlements with nutritional requirements."

Activists have demanded allocation of 14 kg per person.

Criticism

Certain non-BJP-ruled States and activists of the Right to Food Campaign have voiced concerns over the amendment. Kerala Food Minister Anoop Jacob told presspersons that the State government would write to the Union government against the proposed amendment. He said the allocation of 35 kg per AAY household must continue. The removal of this would result in decreased allocation to States such as Kerala, he added.

Anuradha Talwar, an office-bearer of the Right to Food Campaign, said the amendment would bring a "North-South divide" in foodgrain allocation. She said families in the South had fewer people than those in North India and smaller families would get less allocations. "Also the number of AAY families has not been revised as the Census was delayed. A large section of the population, who must come under AAY, are not getting the benefits of the Food Security Act despite the increase in population," she said, adding that instead of increasing the allocation, the government is decreasing it.

Another issue is that the activists have been demanding allocation of 14 kg per person. They argue that if the government wants to base the allocation on the recommendations of the Indian Council of Medical Research, then pulses and edible oil must also be provided. "The poorest of the poor doesn't have market access to buy essentials at the market rate. So the government must provide pulses or cooking oil for them," Ms. Talwar added.

The next step

After considering the comments from the public, the government is likely to place a fresh draft before the State governments and other departments. After that , a final draft will be brought to Parliament. Since the matter is politically sensitive, the government is likely to take careful steps as elections to States such as Uttar Pradesh are round the corner.

NFSA amendment explainer — The Hindu, Page 12.

4 · NFSA Amendment — Decoded

What changes, why, and the criticism

- **The amendment:** A new provision in **Section 3 of the NFSA, 2013** proposes that every person in an **Antyodaya Anna Yojana (AAY)** household gets **7 kg of foodgrains/month, capped at 35 kg per household**. For AAY cardholders this remains **free of charge**.
- **Earlier rule:** It was a flat **35 kg per AAY household**, irrespective of household size.
- **Govt's rationale:** The household-based entitlement created **inequities by household size** — smaller households got higher per-capita grain, larger ones less (sometimes below priority-household levels). Aim: remove "intra-category inequities" & align with nutritional requirements.

Criticism & Concerns

- **Right to Food Campaign (Anuradha Talwar):** warns of a **"North-South divide"** — smaller southern families would get less than larger northern ones.
- AAY family numbers not revised as the **Census was delayed**; a large eligible population stays outside NFSA benefits despite population growth.
- Activists demand **14 kg per person**, plus **pulses & edible oil** (per ICMR norms) for the poorest.
- Kerala Food Minister flagged that removing the 35 kg/AAY floor could **reduce allocations** to States like Kerala.

Static — National Food Security Act, 2013

- Objective: food & nutritional security — access to adequate quality food at affordable prices, with dignity.
- Coverage: up to **75% rural** & **50% urban** population (~two-thirds of India) under **TPDS**.
- **Two beneficiary categories: AAY** households (35 kg/month) & **Priority Households (PHH)** (5 kg/person/month — rice ₹3, wheat ₹2, coarse grain ₹1 per kg).
- **PM-GKAY:** launched 2020 (COVID relief); merged with NFSA in 2022, foodgrains made **free of cost**.

5 · Index of Services Production (ISP)

Prelims • Economy / Statistics

Index of Services Production (ISP) — new MoSPI indicator.

- **What:** MoSPI is preparing to launch the **Index of Services Production (ISP)** in **July 2026** to track short-term changes in the services sector.
- **Definition:** A macro-economic **short-term indicator** measuring monthly changes in the real volume of output produced by the services sector — the direct counterpart to the **Index of Industrial Production (IIP)**.
- **Nodal body:** Compiled, managed & disseminated by the **Ministry of Statistics & Programme Implementation (MoSPI)**.

Key Features for Prelims

- **Purpose:** capture high-frequency trends; aid policymakers, economic forecasting & business-cycle analysis.
- **Base year: 2024–25** (aligned with the new CPI series).
- **Coverage:** primarily the **formal corporate services sector**, built around units registered under **GST**.
- **Phased rollout:** Health & Education (excl. Government) added later, once ASISSE survey reports are available.
- **Release:** monthly, with a ~**60-day lag**, on the **29th of every month**.

Prelims Practice

10 MCQs with answers & explanations

Q1. With reference to the proposed India–New Zealand FTA, consider the following:
1. New Zealand has extended duty-free access across 100% of its tariff lines.
2. India has fully opened its dairy sector under the agreement.
3. The pact includes a proposed investment commitment of $20 billion over 15 years.
Which are correct?

(a) 1 and 2 only
(b) 1 and 3 only
(c) 2 and 3 only
(d) 1, 2 and 3

Answer: (b) 1 and 3 only
NZ offered 100% tariff-line duty-free access (1 ✓) and a $20 bn / 15-year investment commitment (3 ✓). India kept **dairy protected**, so (2) is wrong.

Q2. The terms 'Golden Crescent' and 'Golden Triangle' are associated with:

(a) Major coffee-producing regions
(b) Illicit drug-producing regions
(c) Rare-earth mineral belts
(d) Special Economic Zones

Answer: (b) Illicit drug-producing regions
Golden Crescent = Afghanistan, Iran, Pakistan; Golden Triangle = Myanmar, Laos, Thailand. MHA recently renamed them 'Death Crescent' and 'Death Triangle'.

Q3. Consider the India–Myanmar border and drug trafficking:
1. The Free Movement Regime (FMR) operates along this border.
2. The Manipur corridor is crossed by National Highway 102.
3. Champhai in Mizoram is a key entry point near Myanmar's Chin State.
Which are correct?

(a) 1 and 2 only
(b) 2 and 3 only
(c) 1 and 3 only
(d) 1, 2 and 3

Answer: (d) 1, 2 and 3
All three are stated in the NCB report: FMR along the border, NH-102 through the Manipur corridor, and Champhai (Mizoram) bordering Chin State.

Prelims Practice (contd.)

Questions 4–7

Q4. The Narcotics Control Bureau (NCB) functions under which Ministry, and under which Act was it set up?

(a) Ministry of Health; NDPS Act, 1985
(b) Ministry of Home Affairs; NDPS Act, 1985
(c) Ministry of Finance; Customs Act, 1962
(d) Ministry of Home Affairs; Arms Act, 1959

Answer: (b) Ministry of Home Affairs; NDPS Act, 1985
NCB (1986) is the apex coordinating agency under the MHA, constituted under the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985.

Q5. Regarding the Transplantation of Human Organs and Tissues Act (THOTA):
1. It was originally enacted in 1994 and amended in 2011.
2. The 2023 guidelines retained the 65-year upper age limit for deceased-donor registration.
3. NOTTO was set up under the 2011 amendment.
Which are correct?

(a) 1 and 3 only
(b) 2 and 3 only
(c) 1 and 2 only
(d) 1, 2 and 3

Answer: (a) 1 and 3 only
THOTA 1994 (amended 2011) ✓; NOTTO created under the 2011 amendment ✓. The 2023 guidelines **removed** the 65-year cap and domicile rule, so (2) is wrong.

Q6. In organ transplantation, India currently ranks ___ in the world by total number of transplants per year:

(a) 1st
(b) 2nd
(c) 3rd
(d) 5th

Answer: (c) 3rd
India is 3rd, after the USA and China.

Q7. Under the proposed NFSA amendment, an AAY household member is entitled to:

(a) 5 kg/month, max 25 kg/household
(b) 7 kg/month, max 35 kg/household
(c) 10 kg/month, max 50 kg/household
(d) 14 kg/month, no household cap

Answer: (b) 7 kg/month, max 35 kg/household
The new Section 3 provision gives 7 kg per person per month, capped at 35 kg per household, free of charge for AAY cardholders. (14 kg is the activists' demand.)

Prelims Practice (contd.)

Questions 8–10

Q8. Consider the NFSA, 2013:
1. It covers up to 75% of the rural and 50% of the urban population.
2. Priority Households get 35 kg per household irrespective of size.
3. PM-GKAY was merged with NFSA in 2022.
Which are correct?

(a) 1 and 2 only
(b) 1 and 3 only
(c) 2 and 3 only
(d) 1, 2 and 3

Answer: (b) 1 and 3 only
Coverage 75% rural/50% urban ✓; PM-GKAY merged with NFSA in 2022 ✓. The 35 kg/household norm applies to **AAY**, not PHH (PHH = 5 kg/person), so (2) is wrong.

Q9. The Index of Services Production (ISP) is best described as:

(a) A long-term structural index of the manufacturing sector
(b) A short-term indicator of services-sector output, counterpart to the IIP
(c) An annual survey of unorganised enterprises
(d) A price index for the services sector

Answer: (b) A short-term indicator of services-sector output, counterpart to the IIP
ISP measures monthly changes in the real volume of services output and is the direct counterpart to the Index of Industrial Production (IIP).

Q10. Regarding the Index of Services Production (ISP):
1. Its base year is 2024–25.
2. It is compiled by the RBI.
3. It primarily covers the formal sector through GST-registered units.
Which are correct?

(a) 1 and 2 only
(b) 1 and 3 only
(c) 2 and 3 only
(d) 1, 2 and 3

Answer: (b) 1 and 3 only
Base year 2024-25 ✓; coverage built around GST-registered formal units ✓. It is compiled by **MoSPI**, not the RBI, so (2) is wrong.

Mains Practice

Questions with answer pointers

Q1. "Food security in India is no longer limited to the availability of foodgrains but has expanded to include accessibility, affordability, nutrition and sustainability." Discuss the challenges and suggest measures to ensure comprehensive food security in India.

12 Marks

Intro: Define the shift from food *availability* (Green Revolution surplus) to the FAO's four dimensions — availability, access, utilisation, stability.

Challenges: targeting errors & exclusion (delayed Census, AAY numbers unrevised); "hidden hunger" / micronutrient deficiency; PDS leakages; cereal-centric basket (NFSA gives grain, not pulses/oil — the Right to Food demand); North-South / household-size inequities (NFSA amendment debate); climate stress on yields & groundwater; storage & logistics losses.

Measures: nutrition-sensitive PDS (millets, pulses, fortified rice); ICMR-aligned basket; tech-enabled targeting & One Nation One Ration Card; crop diversification & natural farming for sustainability; strengthen POSHAN Abhiyaan / mid-day meal convergence; update beneficiary lists post-Census.

Conclusion: Comprehensive food security = SDG-2 (Zero Hunger) — needs a shift from calorie-sufficiency to nutrition-, equity- and climate-secure food systems.

प्रश्न: भारत में खाद्य सुरक्षा की अवधारणा अब केवल खाद्यान्न उपलब्धता तक सीमित नहीं है, बल्कि पोषण, पहुँच, वहनीयता और सततता को भी शामिल करती है। भारत में समग्र खाद्य सुरक्षा सुनिश्चित करने में प्रमुख चुनौतियों एवं समाधान पर चर्चा कीजिए। (12 अंक)

Q2. The expansion of the "Golden Triangle" and drone-based trafficking across India's borders has transformed the country's internal-security landscape. Examine the emerging drug-trafficking challenges and suggest a comprehensive response.

8 Marks

Body: Map the two zones (Death Crescent / Death Triangle); explain why Myanmar surged after the 2022 Afghan ban; the FMR & porous NE corridors (Manipur NH-102, Champhai); poly-drug production (heroin + Yaba); western border drones into Punjab (5x rise, 58% of seizures).

Way forward: border fencing & FMR review; counter-drone tech & smart surveillance; NCB–BSF–State police coordination; regional cooperation (BIMSTEC, India–Myanmar); demand reduction & rehabilitation (Nasha Mukt Bharat); choke financing.