

**REVIEW VISIT OF NHRC TO  
CHAMBA DISTRICT IN HIMACHAL PRADESH  
[17-20 November 2013]**

**RECOMMENDATIONS**

**A. CUSTODIAL JUSTICE**

**Observations on Jail**

The system of *mulaqat* in the new jail complex at Rajpura was not found to be up to the mark. It did not have adequate medical facilities for treating an undertrial or convict in case an emergency arose. No daily chart was displayed on the board showing names of undertrials to be brought to the court. During the course of NHRC officials' visit, the prisoners were also seen bringing their food plates and newspapers into their barracks.

**Recommendation**

The subject of prison administration in India is technically a 'State' subject. Therefore, the State Governments have the power and responsibility to frame their own rules and regulations regarding the administration of prisons in their territorial domain. The District Jail Authorities should ensure that the detention of the prisoners committed to prison custody is carried out with the aim of their reformation and rehabilitation. Therefore, standard minimum facilities for the treatment of prisoners consistent with the principles of individual dignity should be guaranteed taking into consideration sex, age, offence, etc. As regards right to visits and access by family members of prisoners, the Jail authorities should give due consideration to security and discipline of the prison.

**Observation on Non-official Prison Visitors**

Non-official prison visitors need to know their role and responsibilities which is to improve correctional work in prisons, address individual and collective grievances of prisoners with the aim of providing redressal in consultation with prison authorities.

**Recommendation**

It is recommended to the District Jail Authorities that there is a need to have a meaningful partnership between official and non-official visitors. Further, there is an urgent need to sensitize the non-official prison visitors on the functions to be performed by them. In case the Board of Visitors is inactive, it needs to be activated. The role of non-official prison visitors is particularly important as they are the eyes and ears of official visitors who are not able to devote much time to this due to their other responsibilities.

### **Filling up of Sanctioned Police Personnel**

It was observed during the presentation made by the Superintendent of Police, Chamba District that 67 sanctioned posts of police personnel at the middle and lower levels were lying vacant.

### **Recommendation**

The District Administration is directed to immediately fill-up all the vacant posts of Inspectors (2), Sub-Inspector (1), Assistant Sub-Inspectors (18), Head Constables (16), Constables (26), Class III (1) and Class IV (3) employees.

### **Crimes Against Scheduled Castes and Scheduled Tribes**

It was reported by the Superintendent of Police (SP) that during the year 2012 only 2 cases were registered under the Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act, 1989.

### **Recommendation**

The SP is directed to give the details of the two cases dealt under the Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act, 1989. In addition, he is also directed to give details of cases registered by Chamba Police under the aforementioned Act during the last five years.

### **Crimes Against Women**

It was reported by the representatives of NGOs who attended the meeting on 17 November 2013 as well as the delegates who attended the workshop on 20 November 2013 that there was substantial increase in cases of crimes committed against women. This fact was corroborated by the presentation made by the SP before the Commission on 18 November 2013.

### **Recommendation**

Prompt action must be taken by Chamba Police with regard to crimes committed against women. Besides, the Police should give the women a greater sense of security. The Police should also be sensitized about the diverse nature of crimes committed against women and the various laws under which justice could be given to women.

### **Observation Relating to Mismatch Between Figures in Table on 2012 Crime Trend of Chamba District and Table Projecting Details of All Crimes in Chamba as on 31 October 2013**

During the presentation made by the SP about the functioning of Chamba Police, the figures given in the aforementioned two Tables for the year 2012 do not tally,

especially with regard to 'rioting', 'cruelty to women', 'rape', 'kidnapping/abduction' 'road traffic accidents', 'theft', 'burglary' and 'outraging modesty'. Moreover, the Table on 2012 Crime Trend shows the over all number as 829 whereas in the five year crime trend the number given is 821.

### **Recommendation**

The SP is directed to look into the figures given under different crime heads and inform the Commission about the actual status of different crimes in Chamba for the year 2012.

### **Observation Relating to Missing Persons**

The SP during his presentation before the Commission on 18 November 2013 pointed out in one of the slides that cases of 'missing persons' in Chamba, especially women, showed an increase (34) in 2011. However, the number of women rescued is not clear from the slide. In 2012, the number of missing women decreased to 30 but those rescued is not clear. In 2013 (up to October), the number of missing women was reduced to 26. The number of missing males, on the other hand, has constantly been on the rise from 25 in 2011 to 26 and 29 in 2012 and 2013 respectively.

### **Recommendation**

The SP is directed to inform the Commission as to why women and men go 'missing' in Chamba. This could be true for children also. The Action Research on Trafficking in Women and Children in India conducted by NHRC showed that there is a close linkage between 'missing persons' and trafficking. The issue of missing persons needs to be seriously considered by the law enforcement agencies in Chamba. Further, vigilance and surveillance systems by Police personnel and NGOs need to be strengthened.

## **B. HEALTH**

### **Observation on Health Care Infrastructure**

It was observed during the course of the presentation made by the Chief Medical Officer (CMO) that Chamba District had seven Health Blocks. However, in three Blocks, namely, *Choori (Mehla)*, *Tissa* and *Samote (Bhatiyat)* the number of public health centres (PHCs) and community health centres (CHCs) was not found to be proportionate in terms of its given population.

### **Recommendation**

The health care infrastructure in rural areas has been developed as a three-tier system and is based on the following population norms:

### **Population Norms**

<b>Centre</b>	<b>Plain Area</b>	<b>Hilly/Tribal/Difficult Area</b>
Sub-Centre	5000	3000
Primary Health Centre	30,000	20,000
Community Health Centre	1,20,000	80,000

Taking the above into account, the Deputy Commissioner along with the CMO needs to ensure establishment of one PHC in *Choori*, one CHC in *Tissa* and two CHCs in *Samote* at the earliest.

### **Filling up of Sanctioned Health Personnel**

It was observed during the presentation made by the CMO on 18 November 2013 and later during field visits made by NHRC teams to different Sub-Centres, Primary Health Centres (*Sundala*) and Community Health Centres that there were innumerable sanctioned posts of Medical Officers, public health personnel and para-medical staff which had not been filled up for various reasons.

### **Recommendation**

The State Administration is directed to fill up all vacant posts of health personnel immediately – Block Medical Officer (01), Medical Officer (35), Dental Medical Officer (07), Male Health Worker (101), Male Health Supervisor (18), Female Health Worker (46), Female Health Supervisor (10), Health Educator (02), Nursing staff (30) and para-medical staff – Chief Lab. Technician (01), Senior Lab. Technician (27), Chief Pharmacist (09), Pharmacist (30), Sr. Radiographer (02), Radiographer (05) and OTA (05).

### **Hiring the Services of ASHAs in Chamba**

As of now, there is no ASHA worker in the State of Himachal Pradesh. Recently, the State Government has decided to hire the services of ASHA workers as per NRHM guidelines.

### **Recommendation**

The services of ASHA workers should be hired immediately as per the NRHM guidelines.

### **Observation Relating to PHC at Sundala**

The PHC in *Sundala* village had a sanctioned strength of two Doctors – one from allopathic and the other from ayurvedic stream. During the field visit it was noticed that it had only one Ayurvedic Doctor. The Doctor informed the NHRC team that since no ayurvedic medicines were available in the PHC he had to prescribe

allopathic medicines to the patients. This had been brought to the knowledge of the District Authorities but no follow up action on this aspect has been taken.

### **Recommendation**

The CMO should immediately fill up the vacant post of the Doctor. Further, the Deputy Commissioner/CMO should seek directions from the State Department of Health and Family Welfare about the supply of ayurvedic medicines in PHCs and CHCs where ayurvedic Doctors are serving. The NHRC, too, would write separately to the Union Ministry of Health and Family Welfare as NRHM seeks to mainstream AYUSH into the public health system.

### **Other Observations about PHC in Sundala**

The PHC in *Sundala* village had no provision of beds for patients. In the absence of a CHC, patients were referred to CHC in *Pukhri* or *Chamba* District Hospital in case of an emergency. It was informed that 108 Emergency Ambulance Service was used for taking patients to *Phukri* and *Chamba*. Besides, there was no Pharmacist in the PHC.

### **Recommendation**

The State Government should establish a CHC in *Sundala* village to serve as a referral centre for PHCs at the earliest. While doing so, it should adhere to the minimum norms prescribed for the same, i.e., four Medical Specialists – Surgeon, Physician, Gynaecologist and Paediatrician supported by para-medical and other staff. It should also have a 30 indoor beds with one OT, X-ray, Labour Room and Laboratory facilities. In addition, the PHC in *Sundala* village should be strengthened in terms of infrastructure and the vacant post of the Pharmacist and other posts should be filled up immediately.

### **Non-Availability of ORS in Kalsuin Sub-Centre**

The visit to *Kalsuin* Sub-Centre showed that it had all the available facilities in terms of staffing structure under the Indian Public Health Standards, basic drugs for minor ailments needed for taking care of health needs of men, women and children, including a labour room. In case of complicated cases, pregnant women were referred to CHC/District Hospital by the Sub-Centre. It was informed by the Female and the Male Health Workers that both of them were also required to spread awareness about maternal and child care, family welfare, nutrition, immunization, diarrhoea control and control of communicable diseases. However, ORS and Folic Acid tablets were not available in the Sub-Centre.

### **Recommendation**

The District Authorities, in particular the CMO, should ensure that ORS packets and Folic Acid tablets are made available to *Kalsuin* Sub-Centre and other Sub-Centres, PHCs, CHCs and Anganwadi Centres functioning in Chamba.

### **Observation about Pangji Tribal Block**

It was informed by participants in the workshop held on 20 November 2013 that *Pangji* Tribal Block is totally cut off for six months during the winter season. The CHC in *Pangji* had six sanctioned post of Doctors but only two Doctors were available. Other sanctioned posts in the CHC were also vacant. The CHC was equipped with an X-ray machine but the post of Radiographer was vacant. In the Sub-Centres too the post of Female and Male Health Workers were vacant. In case of an emergency, the services of helicopters for lifting the patients was provided by the District Authorities but everything depended on the weather. Further, the inhabitants had requested to open a Sub-Centre in *Tarela* Village (in *Pangji* Block) but the response of the District Administration was lukewarm.

### **Recommendations**

It is recommended that all sanctioned vacant posts in *Pangji* CHC should be filled up immediately by the District Authorities. There is also an urgent need of improving the available physical infrastructure of the CHC with the help of a Block Health Plan prepared in consultation with the local inhabitants. Being a Tribal Block, the District Authorities should give significant attention to it as well as to *Bharmour* Tribal Block, which is also cut off during winter season. It would be advisable to organize mobile health camps for identification of anemia and other deficiencies among children, adolescents, women and elderly in *Pangji* and *Bharmour* through out the year by making advance arrangements. It would be advisable to organize such health camps in other development blocks of Chamba as well. There is also a need to give incentives to Doctors so that they willingly take postings in remote areas. The CMO is directed to chalk out an incentive plan for attracting Doctors to such postings.

The CMO is further directed to re-examine the opening of a new Sub-Centre in *Tarela* Village.

In addition, the CMO is directed to apprise the Commission about the coverage of Tribals under *Rashtriya Swasthya Bima Yojana*.

### **Observation about Regional Hospital in Chamba**

The District had only one regional hospital in Chamba. The NHRC team, during its visit on 17 November 2013, found that it was deficient in specialist manpower. The medicines available in the Pharmacy were not stamped and thus prone to misuse.

### **Recommendation**

The CMO is directed to look into the anomalies prevalent in the functioning of Chamba Regional Hospital and ensure upgradation of this hospital in terms of personnel, technology and infrastructure so that all facilities are available and accessible to all the inhabitants of the District.

## **Observation on Leprosy and Tuberculosis**

It was informed by few delegates that the Churah valley of Chamba district was an extremely backward area and the inhabitants were inflicted with leprosy and tuberculosis.

### **Recommendation**

The CMO is directed to make an assessment of the problem and submit an action plan for taking remedial measures. Being a backward area, the District Authorities need to pay special attention to its inhabitants in all walks of life by organizing awareness camps.

## **C. SCHOOL EDUCATION AND MID DAY MEAL SCHEME**

### **Observation on Government Sr. Secondary School in Udaypur (Grades VI to XII)**

The NHRC team observed that for a total strength of approximately 500 students, 09 class rooms were insufficient. Moreover, the nine rooms were small in comparison to the average class strength. The school had well-functioning computer and science laboratories but it required cleaning and maintenance. The school did not provide the children either steel plates or glasses for their mid-day meals. The children are required to bring these from home each day. By and large, the toilets were unclean and had no soap or mug though there was provision of tap water. It was seen that of the two toilets for boys and two for girls, only one toilet each (for boys and girls) was functional. Each of the other two toilets was blocked/choked on the day of the visit and hence, unusable. The number of toilets were inadequate given the total strength of students.

As far as drinking water is concerned, it was observed that there were no water filters in the school. Instead, it had a huge cemented water tank with taps attached for drinking purposes. While one of the teachers stated that the water is treated through the use of chlorine tablets, it has to be ascertained whether it is true.

One of the Teachers and the Cook informed that there is delay in receiving funds from the District Administration for the Mid-Day Meal Scheme (MDMS). This delay, they added, on an average, ranged from 5-6 months. Due to this, they are forced to buy rice, vegetables, pulses, spices, gas etc. from the local PDS shop and local *mandi* on credit. As and when the money is credited to the school's account, it is paid to the creditors. The Teacher informed that the last payment for the MDM was received in May 2013 by the school.

The students are provided two sets of school uniform every year. This comprises a pair of trousers and shirt for the boys and *salwaar* and *kameez* for girls. They are however, not provided any warm clothing such as sweaters keeping in view the cold climate of the State.

## **Recommendations**

The Deputy Commissioner along with his team of officials from the Department of Education should strengthen the overall infrastructure of Government Sr. Secondary School in *Udaypur* by constructing additional class rooms, toilets, provision of safe drinking water including warm school uniforms, water filters with built in temperature control, sanitary napkins, iron and folic acid tablets, etc. For this, they should make use of the grants given under *Sarva Shiksha Abhiyan, Rashtriya Madhyamik Shiksha Abhiyan, National Rural Health Mission* and *Nirmal Bharat Abhiyaan*. Besides, the District Administration, under the *Nirmal Bharat Abhiyaan* must initiate an awareness drive among the staff and students for promotion of better hygiene and sanitation practices.

The above recommendation should be made mandatory for all schools in Chamba District. A concomitant monitoring mechanism must also be put in place to ensure that medical checkups are carried out regularly by Doctors of PHCs in the schools that fall under their geographical jurisdiction. Further, the contact numbers (including emergency and ambulance contact numbers) of the closest PHCs/sub-centres must be prominently displayed in the school premises.

For MDMS, the District Authorities must consider providing to school children across Chamba District, stainless steel plates and glasses for their Mid Day Meals. It should write to the Central Government for enhancing the cost per child per day in view of the escalating prices of all essential commodities. The NHRC would also write separately to the Central Government on this issue and timely release of grants given under MDMS.

## **Observation about Primary School in *Bhanauta* and *Sidhpura* (Grades I to V)**

As observed in the Government Sr. Secondary School in Udaypur, the toilets in the Primary Schools in *Bhanauta* and *Sidhpura* were not well maintained given the fact that the toilet in Primary School in *Sidhpura* was constructed recently. However, the toilet in the Primary School in *Sidhpura* had common entrance for boys and girls. The quality of Junior Basic Teachers in these schools needs to be improved.

## **Recommendations**

The District Administration should make a survey of all schools to gauge the availability and requirement of separate toilets for boys and girls. Accordingly, it should ensure the construction of required number of toilets and this task must be given priority. Provision for partition should also be made in the newly constructed toilet in the Primary School in *Sidhpura*. The District Administration must ensure a regular supply of soap and/or adequate budgetary funds for the same, to schools to promote better sanitation and hygiene practices among the school staff and students.

The District Education officer should ensure that the Junior Basic Teachers appointed in these schools have all the requisite qualifications like Basic Teachers Training Certificate or B.Ed. Degree. Further, the District Authorities need to



streamline the process of recruitment of teachers as currently it had teachers recruited as Primary Assistant Teachers (started in 2002), Teachers appointed by Parent-Teacher Association (started in 2006) and Para Teachers who have been employed as temporary teachers and so far not regularized.

### **Observation about Government Middle School in Sidhpura (Class VI, VII & VIII)**

On the day of the visit, i.e., on 19 November 2013, the school was celebrating Environment Day and the students had put up an exhibition on various themes of environment with the help of waste material. It was told by the Head Mistress of the school that it had won first prize for cleanliness under the *Nirmal Bharat Abhiyan*. Further, under the School Development Plan, a request had been made for computers for usage of children. She further informed that the School Management Committee consisting of Parents took active part in overall functioning of the school. The first aid box, medicines and vitamins like Iron Folic Acid were available.

### **Recommendation**

The Government Middle School in *Sidhpura* can be identified as a model school and its best practices could be emulated by other middle schools in *Chamba* District.

### **Observation about Sr. Secondary School in Sarol (Class VI to XII)**

The school altogether had 367 students and had all the three streams – Arts, Commerce and Science. It had a good building, a well equipped Library and a play ground. However, the Laboratory in the school was not found to be up to the mark and this was also communicated to the Teachers as well as the District Education officers who accompanied the NHRC team to this school.

### **Recommendation**

The Deputy Director, Education should ensure that the Laboratory in the above mentioned school and other schools offering science stream are well equipped and one teacher should be made responsible for its overall smooth functioning and of the Library including its cleanliness.

### **Model Schools and Girls Hostels under RMSA**

During the presentation made before the Commission, it was informed by the Deputy Director, Education that in Chamba District there were four Model Sr. Secondary Schools for girls and four girls Hostels under RMSA. A girls hostel run by an NGO was also visited by NHRC team on 18 November 2013. The hostel had about 15-16 girls in different age group. Most of these girls came from poor families. The building in which the girls hostel was housed was in a dilapidated condition and the District Authorities had also directed the NGO to shift the girls to another place.

## **Recommendation**

The District Authorities should facilitate the NGO in finding a suitable place in Chamba District Headquarters so that the girls were not uprooted in terms of their education. Since Chamba District was sufficiently large, there is a need to open more number of Model Sr. Secondary Schools and hostels for both boys and girls. It should further be ensured that these schools have all the streams of education, i.e., Arts, Commerce and Science. Such schools and hostels should also specifically be opened for SC, ST and disabled children as well. In these schools, a breakfast scheme on the lines of Government of Kerala should also be started. The NHRC would be writing separately to the Chief Secretary in this regard.

## **Observation on Boys Hostel (*Balashram*) in Mehla Block**

The above *balashram* is also known as *Gaddi* hostel and is being run by Himachal Pradesh State Council for Child Welfare. It had a total strength of 30 children up to 16 years. The youngest among them was 10 years old. Most of these children belonged to deprived families where they either had no parent or one parent. The *balashram* was run by 11 staff members which included the Superintendent of the *balashram*. He informed that the total amount spent on a child in a year was approximately ₹ 13,000. Given the escalating inflation, this amount was no more self-sufficient to sustain a child. The salaries of the staff, including that of the Superintendent, were found to be extremely meager and the same had not been enhanced for years.

## **Recommendation**

The District Authorities should look into the problems of the *Balashram* and facilitate them by providing aid under the Integrated Child Protection Scheme. The NHRC would also be writing separately to the Union Ministry of Women and Child Development in this regard.

The District Administration should also apprise the Commission about the status of functioning of Juvenile Justice Board and Child Welfare Committee in Chamba District.

## **D. INTEGRATED CHILD DEVELOPMENT SERVICES SCHEME**

### **Observation on Anganwadi Centre in Sarol Village in Chamba Development Block**

The *Anganwadi* Centre (AWC) in *Sarol* Village functioned from 10 a.m. to 3 p.m.. It had 33 registered children below 6 years of age. As per the guidelines of the Ministry of Women and Child Development (MWCD), there was a separate sitting room for children, separate kitchen, separate space for storing food items and toilet. However, the sitting room of children was small in size and congested. The toilet too was extremely small and had no water facility nor electricity. The water had to be brought from a private school adjacent to the AWC. The surroundings of the AWC was not kept clean. It had no space for playing of indoor or outdoor games. The *Anganwadi*

worker informed that she got full cooperation of the Supervisor and the community in running of the AWC. The sanctioned post of Child Development Project Officer in the District had not been filled up for quite some time. Having undergone a rigorous training programme in 2002 and later a refresher training in 2011, the AWW exuberated confidence while explaining the objectives of the ICDS scheme, the manner in which she taught pre-school education to children, plotted the nutritional status of children in the new WHO Growth Charts and conducted Village Health and Nutrition Day on 6<sup>th</sup> of every month was deserving of appreciation. The AWC was well stocked with medicines and pre-school material. She conveyed to the NHRC team that a boundary wall be constructed around the AWC. She also conveyed that since the gas cylinder supplied to the AWC was stolen, she had to cook food on the stove and procured kerosene from her own money. Twenty-two adolescent girls in the age group of 14 to 18 years were registered with the AWC and getting nutritional supplements under SABLA.

### **Recommendation**

Recognizing that ICDS is one of the flagship programmes, the Deputy Commissioner is directed to immediately take steps to fill up the post of Child Development Project Officer (CDPO). Further, it should provide basic facilities to the above mentioned AWC such as a child-friendly toilet, running water and safe drinking water. The space in front of the AWC should be spruced up and developed into a garden so that children could use the space for playing and a boundary wall should also be built around the AWC as this would ensure safety to children. The AWW should also be provided an additional gas cylinder.

### **Visit to AWC No.21 in Udayapur**

The AWC visited had 27 registered children below 6 years. On the day of the visit, the AWC was neat and clean. It was however observed that the room where children were given preschool education and served supplementary nutrition was small and congested. The toilet was found to be clean and well-maintained. There was no provision for running water in the toilet and the AWW informed that it was the duty of the Anganwadi Helper to collect and place water in a bucket each morning inside the toilet. No soap had been provided in the toilet for the staff and children. It had a UNICEF weighing scale (suspended from the ceiling). Nonetheless, no measuring tape was provided to the AWW to measure the height of the children.

The AWC had been provided the new WHO growth chart by the District Administration. In addition, the AWW informed that she had received special training on the filling up of the said chart. Data had been plotted on the growth chart consistently since May 2012 (which is when these charts were provided to the AWC) for each child registered at the Centre. According to the data plotted on the WHO growth chart by the AWW, it was found that five children in the age group of 3-6 years were 'moderately malnourished'. However, the AWW seemed unsure of whether or not any special measures were required to be undertaken at her end with regard to these children.

The AWC timings being 10 a.m. to 03 p.m., it provided two meals to the children – breakfast, comprising nutrimix (served at 10:30 a.m.) and an afternoon meal (served

at 1:15 p.m.). On the day of the visit, the AWW informed that the Centre had exhausted its stock of nutrimix due to which the children had not been provided the morning meal for the past few days. She added that she had already requested for fresh stocks of nutrimix for the AWC, which, on the day of the visit, had not yet been received. She further informed that the AWC had not been provided any *dal* and/or vegetables or soya granules/chunks for nearly six months. This means that on the days the children are supposed to be served rice *pulao*, they essentially consumed only plain salted rice as there is neither any *dal*, vegetable or soya to add to the rice. This implies that the children are not receiving the requisite nutrition that they should be provided at the AWC. She also informed that the District Authorities had not provided *dalia* for adolescent girls since October 2013, due to which these girls had stopped coming to the AWC. In all, twenty-one adolescent girls were registered with the AWC.

### **Recommendation**

The District Administration is advised to examine the WHO Growth Charts of those five children in the aforementioned AWC who fall under the 'moderately malnourished' category and take necessary action. Further, it should be ensured that all Supervisors and AWWs are given orientation training on filling up of new WHO Growth Charts so that in future they are confident to take action on their own leading to improvement in delivery of services through the ICDS. It should be made mandatory for different level of functionaries responsible for implementation of the ICDS Scheme to undergo orientation and refresher training from time to time.

The District Administration should ensure regular supply of electricity, safe drinking water, weighing scales for babies, medicines, stationery, etc. in all AWCs. Further, it must immediately provide to all the AWCs in the District, all food items whose stocks have been exhausted. More importantly, the District level officers along with Supervisors of Anganwadi Centres must be encouraged to regularly visit the AWCs under their jurisdiction and ensure that their requirements and complaints, if any, are promptly communicated to the concerned District officials and situation as above where *dal*, etc. had not been received for six months does not arise anywhere in future.

The District Authorities should also ensure that AWCs function as a convergence point for health and nutrition services.

### **Visit to AWC No. 57 in Pukhri**

The above AWC was housed in an old building and had no electricity nor water facility. The AWW informed that a new AWC had been constructed by the *Pradhan* of the village but the new building so far was not handed over. The new AWC was constructed adjacent to the old building from where AWC functioned.

### **Recommendation**

The Deputy Commissioner is directed to kindly look into the matter so that the children get a new AWC at the earliest.

## **E. PROJECTS UNDER MAHATMA GANDHI NATIONAL RURAL EMPLOYMENT GUARANTEE SCHEME**

### **Overall Status of MGNREGS in Chamba**

It was informed by the District Authorities that during 2012-2013 job cards were provided to 1,03,199 adults/households under the MGNREGS out of which only 65,472 households were provided employment for a period of 58 days out of 100 days. Further, the Chamba District had made use of 67.57 per cent funds only for the period 2012-2013.

The NHRC team visited a project in *Gaila* village in *Haripur* Panchayat where 27 unskilled labourers (six men and remaining women) had been given employment for cutting huge boulders and building a wall out of the cut boulders to prevent soil erosion. Their work was being supervised by 2 semi-skilled masons (one male and the other female). The work was being carried out in phases from 15 October 2012 onwards. The unskilled labourers were paid ₹ 138 whereas the semi-skilled labourers were being paid ₹ 192. However, since the labourers did not carry their job cards on the day NHRC team visited the site, one could not assess whether entries pertaining to employment and wages paid to them were being entered properly in the job cards from time to time.

It was informed by the mason and the *Gram Rozgar Sevika* that all projects under MGNREGS were selected and approved by the *Gram Sabha*. The approved projects were then forwarded to the Block *Samiti* who in turn forwarded it to *Zila Parishad*. From 2014 onwards, everything will be carried out at the level of *Gram Sabha* itself.

A visit was also made to *Rajpura* and *Haripur Gram Panchayats* to know their functioning. The NHRC team also interacted with the villagers and members of *Bakaan Panchayat* about the work carried under NREGS.

### **Recommendation**

The District Authorities should create awareness about NREGS in various development blocks of Chamba and the importance of participation of villagers in their respective *Gram Sabhas* for selection of projects by it as their involvement and contribution would ultimately lead to creation of permanent and sustainable assets, be it projects of water conservation and water harvesting, land development, rural connectivity, Panchayat Bhawan, agriculture related work, livestock related work, etc. The District Authorities should also regularly conduct sensitization programmes for *Gram Panchayat* members so that they have a vision and accordingly demand work and get the same executed as well.

Further, the District Authorities are directed to inform to the Commission the status of number of projects being run under NREGS in the District giving details of its approval, grant sanctioned, actual amount spent, labourers employed, in particular the percentage of SCs, STs and women who were given employment, including unemployment allowance paid to those who were given job cards but no

employment. In addition, it should apprise the Commission whether an Ombudsman has been appointed in Chamba District to look into complaints. This is because as per statistics provided by the District Authorities, job cards were provided to more than 1,00,000 people however the number of people who were given employment was much lesser and more than 30 per cent of the funds remained unutilized during 2012-2013.

### **Observation about Work on Chamera Dam Under NREGS**

It was informed by one of the participants of the workshop held on 20 November 2013 that when *Chamera* Dam-II was under construction, no employment was given to the villagers. On the contrary, their land was taken up in a clandestine manner by the NHPC including land meant for cremation of dead bodies. Even for *Chamera* Dam-I, 192 persons were displaced and no jobs were provided to them.

### **Recommendation**

The District Authorities are advised to prepare a fact finding report on displacement and rehabilitation of *Chamera* Dam-II and *Chamera* Dam-I projects oustees and send the same to the Commission within three months.

## **F. Right to Food**

### **Observation on Public Distribution System**

The NHRC team visited several PDS shops and found that no sugar had been provided to the beneficiaries during the last two months. In some PDS shops, the beneficiaries faced problem with regard to availability of kerosene oil and iodized salt as well.

### **Recommendation**

The Deputy Commissioner and the District Food and Supply Officer are hereby directed to apprise the Commission as to when was the last review of BPL and AAY families carried out, the criteria of inclusion and exclusion of APL/BPL/AAY families. They should also give to the Commission the exact number of surprise visits made to PDS shops by the Department of Food & Supply, raids conducted and action taken about gaps found during the raids conducted for the years 2012-2013 and April 2013 to December 2013.

## **G. OTHER ISSUES**

### **Observation on Indira Aawas Yojana**

The NHRC team visited few houses under construction for which IAY grants were provided by the District Authorities. These houses were being constructed by individual beneficiaries themselves. NHRC team noticed that space had been left for

sanitary latrines but no assessment could be made about smokeless *chulahs*, as these houses were under construction.

### **Recommendation**

The District Authorities should apprise the Commission about the status of 680 houses for which funds under IAY were sanctioned. A survey also needs to be undertaken in remote inaccessible places like *Saho* on priority basis so that needy beneficiaries in these areas can be identified and provided funds by dovetailing IAY and Rajiv Gandhi Aawas Yojna (State Scheme) grants. In fact, for provision of sanitary latrines, *Nirmal Bharat Abhiyan* funds should be dovetailed with IAY.

### **Observation on Child Marriages taking Place in *Churaha* Development Block**

It was informed by a representative of an NGO that in *Churaha* Development Block very young girls below 15 years of age were being married by their parents. Other than this, of late, marriages were being conducted with the help of affidavits, which was not legal.

### **Recommendation**

The District machinery is directed to organize awareness/education programmes in all villages/blocks of Chamba, especially in *Churaha* about the ill-effects of child marriage and the importance of registration of all marriages. In these awareness programmes, the villagers should also be told about the person responsible in the village/District for registration of marriages. Information about other social issues should also be given to the villagers so that social evils are eradicated.

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