Report on visit of the Districts Gumla and Simdega of Jharkhand by a team of the Commission from 7th to 10th July, 2015 to oversee the Implementation of various Flagship Programmes of the Central and the State Government

In order to ensure protection of human rights as envisaged in Section 12 (j) of the Protection of Human Rights Act, 1993; on the direction of Hon'ble Member Shri S.C. Sinha, a team of three officials viz. (1) Sh. K.K. Shrivastava, Asst. Registrar (Law) (2) Sh. Amit Gopal Thakre, Research Consultant and (3) Sh. A. K. Mishra, Inspector, Investigation Division of the National Human Rights Commission has visited Gumla and Simdega districts of Jharkhand between 7th to 10th July, 2015 to oversee the delivery of the various Flagship Programmes and social security schemes of the Central and the State Government.

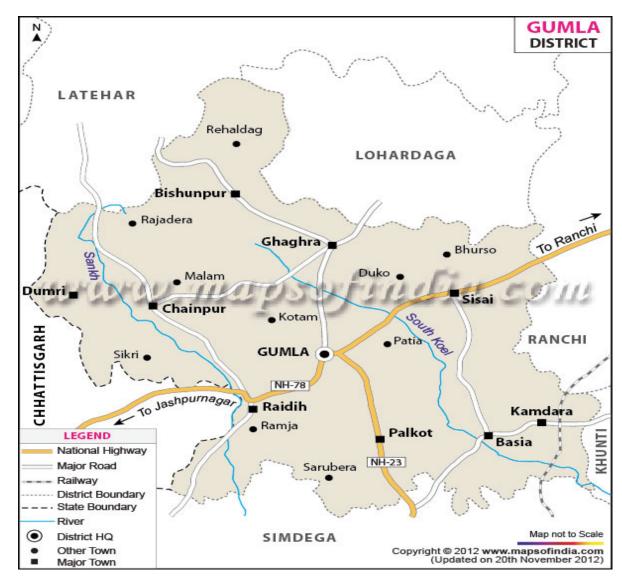
GUMLA DISTRICT

The team reached Gumla at about 05.30 PM on 07.07.2015 by road from Ranchi. However, no Coordinating Officer or other responsible officer of the district could be available there. Therefore the Dy. Commissioner, Gumla Shri D.C. Mishra was reached over phone, who, at about 09.00 PM detailed Shri Arun Kumar, District Accounts Officer, Gumla. Only then, the further planning of the visit could be processed.

Background of the Gumla District-

The district of Gumla is covered by dense forests, hills and rivers. It is situated in the southwest portion of the Jharkhand

State. Total area of the district is about 5327 sq. km, and the total population of district as per 1991 census is 706489, out of which 355505 is male population and 350984 is female population. There is predominance of tribal people in Gumla district. The primitive tribes' population is 11283, SC population is 24329, ST population is 476316, and BC population is 132610 and others population is merely 61951. As the district has a total of 68% of tribal population, therefore, it comes within scheduled area. The district currently experiences considerable Naxalite-Maoist insurgency.



The details of the visit are as under:-

I. Sarva Shiksha Abhiyan (SSA)

As per the documents provided by the Gumla district officials (Annexure- A), overall literacy rate of the district is 66.92 %, however, a large number of posts of the teachers are lying vacant in the district. Out of total 6472 sanctioned posts of Teachers in the Primary and Upper Primary Schools, 2297 are lying vacant. In addition, out of 520 sanctioned posts of teachers in the High Schools, 330 are lying vacant. Due to this, quality of education has considerably deteriorated. The Education officers of the district informed the team that process of appointing the teachers is in progress. They also informed that despite of huge vacancies of teachers in the district, there are some schools like Sisai where surplus teachers are posted but they could not be adjusted against the vacancies due to their political influences.

Dropout rate in Elementary and Primary level is more than 11%. **Most of the computers supplied in the schools are in 'not working' condition.** There are 10 Kasturba Gandhi Balika Vidyalaya (KGBV) functioning in the District of Gumla out of which 3 are in their own building, while construction of 6 KGBV is in progress. Total, 2, 261 girls are enrolled in class VI to XII in the Kasturba Gandhi Balika Vidyalaya (Academic Year 2014-15). In these KGBVs, there are total 38 teachers for class 6th to 8th and 27 for class 9th & 10th working presently, posts of 12 teachers for classes 6th to 8th and 3 for class 9th & 10th are lying vacant. No new beddings have been provided for the students of KGBV in the year 2014-15.

Free uniforms have been distributed to 177485 students in the district. There was target of construction of 3329 boundary walls but no work could be started. Target of Major repair was in 5 Primary and 10 Upper Primary Schools which is yet to be achieved. School Maintenance Grant Rs. 135.25 Lakh, Repair & Maintenance Grant Rs.

113.05 Lakh, Uniform Grant Rs. 709.94 Lakh and Building Construction Grant Rs. 385.66 Lakh were received in the district.

Visit of Kasturba Gandhi Balika Vidyalaya (KGBV), Baghima

The team visited Kasturba Gandhi Balika Vidyalaya (KGBV), Baghima on 8th July 2015, and noticed that there are total 122 girl students, of class VI to XII, residing in the campus. There are total 7 full time teachers to teach them, but there is no Science teacher. There were total 4 computers in working condition in the 'smart classroom'. Agustina Kanti Topno (Hostel Warden) and Ramavadh Sahu (Director) briefed regarding the deficiencies in the KGBV.

Observations of the NHRC	Actionable Points
team	
 Though, electricity supply is in the nearby area, but there is no electricity connection in the school. Therefore, the students are deprived from the fan or lighting facility. A diesel generator placed inside hostel is used for providing electricity 3 hours in a day, which is not sufficient. Moreover, it is not only a costly device but also causing huge pollution. 	with fan and adequate lighting facility should be provided in the KGBV
 Boring water is used for drinking purpose. Though, there are two water purifiers, but were found nonfunctional, requiring replacement of filter kits. Water storage problem was noticed in the school. 	always be made available in functional condition. One more hand-pump should be installed in the school

beds and majority of the students are compelled to sleep on the floor. Similarly, there were no benches in the classes for the students.	reptiles in that area, therefore adequate number of beds should be provided for all the students residing in the hostel. Sitting furniture should also be provided.
 The boundary wall of the school is low in height, which needs barbed fencing to prevent intrusion of antisocial elements. The students, who have 	 As the area is Naxalite affected, the boundary wall needs to be secured immediately.
joined in present academic session, do not have their school uniforms. Some among them are Aarti, Barkha, Ebha, Rinki, Pinku, Jitan & Pushpa of class 11 th , Savitri of Class 7 th .	 All the girls without school uniform may be provided with school uniform.
 In class 11th, no teacher was deputed for taking classes from 11:10 am to 1:05 pm. Majorly students were having old books to read. New books were not provided for class 6th to 8th 	 Sufficient teachers may be deputed to teach the students from class VI to XII. New books may be provided to all the students.
 for the academic session of 2014-15. English reading skills were found to be unsatisfactory among the students, 	 Teachers should ensure to improve the student's English reading, writing and speaking skills.
 especially who have joined the KGBV in the present session. There's no full time/part time science teacher for class 11th and 12th. 	Science subject may be appointed.The school management may be

•	Sanitation of the hostel, classrooms, kitchen and toilets was found
	satisfactory. Quality and quantity of the meal
	prepared for the students
	was also appeared up to the mark.
•	It was informed that regular medical checkup of the
	students is being done by the visiting doctors/
	paramedical staff, and
	necessary medicines are provided.



II. Mid Day Meal Scheme

Particulars as per Report submitted by Gumla officials (2014-15): The budgetary allocation is done in the account of 'Saraswati Vahini Mata' Committee, which is monitored by the 'Village Education Committee' (**P-119**). In total, there are 4002 cooks and helpers in Gumla District (**P-118**). Currently, there are 1825 schools (1184 Primary, 616 Medium and 25 Secondary) in Gumla District (**P-120**). Out of 1825 Schools only 1606 have kitchen shades (**P-123/124**).

A File Report on Particulars of Mid Day Meal in Gumla was submitted to the NHRC team by District Education Officer is placed at **Annexure- B**, according to which huge amount is due to be received from the Central and the State Government.

Visit of Rajkiya Krut Middle School, Palkot, Gumla

The team visited Rajkiya Krut Middle School, Palkot at about 02.00 PM on 8th July 2015. Though the school was going to be closed at that time, but Shri Shashi Shekar Dubey, In-charge of the School along with other teachers was present. It was informed the team that MDM for 257 students of class 1st to 8th was prepared. The cook, Mrs. Maheshwari told that for 257 students, she used 5 kg pulses (daal), 30 kg rice and 257 eggs. The team also interacted with two students named Mr. Parvez Alam (5th Std.) and Miss Suhani (6th Std.) and asked about the supply of the meal.

mean	-
Observations of the NHRC team	Actionable Points
 School premises were not cleaned properly. Two toilets made in the premises were dirty and unusable. The Headmaster told the team that local unsocial elements enter in the premises crossing the broken boundary wall, and no sweepers are available in the area to clean the toilets. 	may look into this problem and to take remedial action immediately. The boundary wall should not only be
True lieu d'avance in the school	The defective bend wave

• Two Hand-pumps in the school • **The defective hand-pumps**

were in defective condition, and only one was functional, which is used for drinking as well as toilet purpose.	possible.
• There was acute shortage of teachers in the school.	• Adequate teachers should be posted in the school to meet the minimum requirement.
• Shortage of classrooms was also noticed as some of the rooms in the school were found abandoned requiring measure repairs.	 Needful immediate action is required to repair the class
 Quality of the rice and pulses used for Mid Day Meal was found satisfactory, but the MDM is prepared using firewood causing unhygienic atmosphere. 	



III. National Rural Health Mission (NRHM)

Particulars as per Report submitted by Gumla officials (2014-15) (P-8/9): There are total 13 Community Health Centers in Gumla District. For care during pregnancy, reportedly 61% for ANC 1 and 42% for ANC 3 pregnant women were registered. There is average of 42% institutional deliveries in the district. However, percentage of institutional deliveries in the Gumla Sadar, Dumri and Chainpur is less than 20%. The coverage of sterilization by CHC's in Gumla District is reportedly poor with NSV at 1% and Tubectomy at 3% only; whereas usage of oral pill is at 38% and Contraceptives at 13%. Percentage of immunization of pregnant women is 59 and infants is about 50%. Particulars of Medical officers, staff, health centers was submitted by Chief Civil Surgeon to the NHRC team is placed at Annexure- C, which reveals that out of 127 sanctioned posts of doctors, 60 are lying vacant, and 4 MOs are absent since long. Two newly posted doctors have not joined. Due to this, there is not a single doctor in Dumri, Bilingbira, Bishunpur, Ghaghra and Bharno PHCs, and the present doctors posted in other hospitals are facing over burden of the work. Most of the posts of Gynecologists, Pediatricians, Radiographers and other specialists are lying vacant in the CHCs, against the norms of the IPHS.

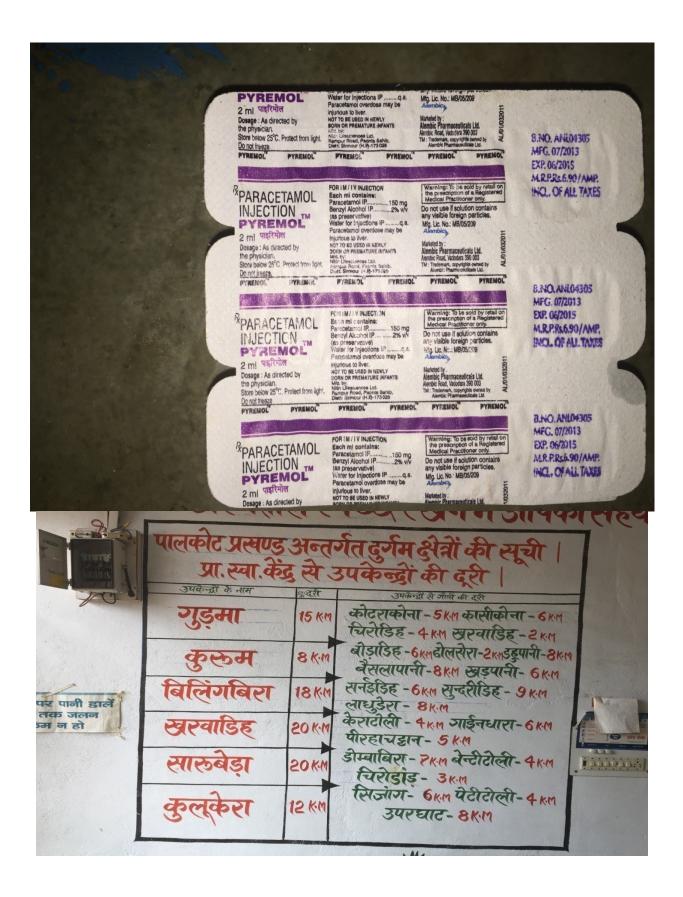
(a) Community Health Center (CHC), Palkot

The team visited Community Health Center, Palkot on 8th July 2015.For care during pregnancy, reportedly 58% for ANC 1 and 41% for ANC 3 pregnant women have registered in CHC, Palkot. Of the total delivery in Palkot, 35% are institutional deliveries. The coverage of sterilization by CHC in Palkot is reportedly poor with NSV at 0% and Tubec at 7% only; whereas usage of oral pill is 48% and Contraceptives is at 10% (P-8/9). Sahiya (ASHA workers) Incentive Payment Details is placed at **Annexure-K.**

There was one Pathologist and a Lab Technician present in the CHC. <u>As</u> <u>per Dr. N. K. Gupta there are around 40-50 institutional</u> <u>deliveries/month in the CHC, Palkot. This CHC caters to 73</u> <u>villages of 14 panchayats across the Palkot Block, but only one</u>

regular doctor is posted there.	
regular doctor is posted there.	
Observations of the NHRC team	Actionable Points
 There are 6 sanctioned posts of doctors in the CHC, Palkot but presently only 3 doctors working in there. Out of those, one Dr. Kusum lata Sinha is Regular, while remaining two Dr. N. K. Gupta & Dr. Aslem Lakda are on deputation. There is no specialist doctor, surgeon, radiologist, anesthetic, Dresser and Compounder are in the CHC. 	including specialists, radiologist, anesthetic & surgeons as per the IPHS norms, should be posted immediately to cater the needs of the people. In addition, Dresser and
• There is immediate need of 4 A- grade Auxiliary Nurse Midwifery (ANM) to handle the institutional deliveries.	
 The labour room was in poor condition. There were no ventilator and sterilizer. Three injections of paracetamol expired in June 2015 were found in medicine box kept for current use. Baby warmer was non-functional, toilets were dirty and the room was not clean. Files were noticed inside labour room. 	ensured in the Labour room and at least a new sterilizer and baby warmer/ ventilator should be provided there. It
• One ASHA worker, Smt. Rupan Uraon, wife of Shri Sanjay Uraon had complained of not receiving her payment for 'Grih Brhaman'.	. ,
 Some signature columns of 	• The matter of attendance of

Doctor's attendance register wer found blank. The villager complained that the doctors ar not attending the CHC an marking their attendance at late were not marking the attendance sincerely. The on dut Dr. N. K. Gupta could not clarif regarding the whereabouts of D Aslem Lakda, whose attendance column was blank.	rs <i>sincerely.</i> e d r. ir y y
 Somru Naik from Palkot Kha Basti was in serious condition bu could not be immediated transferred to Gumla's Gov Hospital due to lack of prope ambulance facility. 	emergency situations needs tobe made available.
 Shri. Manish Kesari, Bloc Programme Manager, stated that the Primary Health Cente Bilingbera needs a 4th Grade ANN Clerk & Pharmacist. 	at Bilingbera should be provided r, adequate staff and doctor.
 No X-ray facility is available in th CHC as there is no Radiologist. 	e • The X-ray facility is essential in a CHC which must be provided immediately.
 There are no Blood Bank and EC facilities in the CHC, Palkot. 	G • Blood Bank and ECG facilities should also be provided in the CHC.



(b) Sadar Government Hospital, Gumla

The team visited Sadar Government Hospital, Gumla in the evening on 8th July 2015. The Hospital was neat and clean. The Civil Surgeon cum CMO, Gumla Dr. (Capt) S.N. Jha pointed out the problem of huge vacancies of the doctors in the district and poor supply chain of important generic medicines. There is a special ward for the malnourished children, and guardians of the children have shown their satisfaction regarding the treatment and the nutrients provided to the children.

Observations of the NHRC team	Actionable Points
 Observations of the NHRC team Out of total 16 sanctioned posts of doctors, 5 are lying vacant, and one Dr. Tripti Sinha, DGO is absent after joining on 09.04.2015. Due to this, only one doctor was deputed in Emergency duty, who seemed to be unable in handling serious indoor patients, snake bite cases and accident cases at a time. Due to inadequate supply, Iron pills were not given regularly to the pregnant mothers. Similarly, some ASHA workers informed 	 Sufficient doctors, specialist, surgeons and other paramedical staff should be deployed to cater the needs of the people.
that they could not get sufficient number of Immunization cards to keep records of immunization of the pregnant women and infants. However, the Civil Surgeon cum CMO, Gumla Dr. (Capt) S.N. Jha informed the team that after his recent joining, the supply of Iron pills/ Folic Acid and Immunization cards has been regularized.	Immunization cards as this is a crucial document relating to the immunization record of the pregnant women and infants.

IV. Integrated Child Development Services (ICDS)

As per Report submitted by Gumla officials (**P-68**), there are 1670 Anganwadi centers in the Gumla District, out of which building has been constructed for 1408, and buildings for 73 AWC are under construction. 189 Anganwadis are still running without their own buildings. In terms of basic facilities, only 848 Anganwadis have hand-pumps and 799 have toilets. 73 posts of Anganwadi workers (AWW) and 51 Anganwadi Helpers (AWH) are lying vacant. There are total 216 mini centers where there is no provision for Anganwadi Assistants. *It has also been reported that there is no space to sit the AWWs in the office of Child Development Project Officer, Gumla, due to which they are compelled to sit on a Godown.*

A report on ICDS particulars in Gumla District submitted to the NHRC team by District Social Welfare Officer is placed at **Annexure- D.**

(a)

Anganwadi, Nursery School, Ambatoli, Palkot

The team visited Anganwadi, Nursery School, Palkot on 8th July 2015 at about 01.30 PM, but it was closed. It was informed that timing of the AWC is from 08.00 AM to 13.00 PM. However, the room was opened by the AW Assistant where it was found there was a small toilet within the room which was non-functional because there was no door or water facility.

On 9th July 2015, the team visited a mini-anganwadi in Amberadih, Palkot

(b) Mini-Anganwadi, Amberadih, Palkot

The population of the village was 421 and at the time of visit there were 15 children present in the Mini-Anganwadi center out of total 28 enrolled children. There was only one 'Sevika' named 'Sangita Devi', nominated for managing this particular Anganwadi.

There was one weighing machine available in the center. All the registers were checked and found to be properly updated by the AWW. Food preparation and toy kit, medicine kit were checked and they were found to be in satisfactory condition.

Observations of the NHRC team	Actionable Points
 Red Ribbon for measuring children's health was not provided. A child named Purnima Kumari was checked with red ribbon and found to be suffering from malnutrition. The AWW informed that she attempted to convince the parents of Purnima Kumari to admit her in the District Hospital for treatment but they did not pay heed. 	 assessing general health of children should be provided. The concerned officers should look into the matter and do needful.
 There was shortage of 'Iron Pills' supply and hence its register was found to be incomplete. There were only 2 hand-pumps for the entire village which are certainly inadequate to meet the needs of the villagers. The children were learning letters and numbers, and the guardians replied that the children are getting nutrients. 	 should be ensured. A hand-pump may be installed near the Anganwadi premises as soon as possible.
Later on, the team visited Anganwadi (c) Anganwadi, Khuntitoli At the time of the visit, vaccinatio center. It was found that there was Khuntitoli Anganwadi center. Sevika 2200 salary per month which is way well situated near Anganwadi cente	on was going on in the Anganwadi a Sevika and Shayika attached to and Shayika were getting 3700 and too low. Water was fetched from a

teaching room of the Anganwadi center.

Observations of the NHRC team	Actionable Points
• 4 ANC to all the pregnant women	
were not provided at all. It was	that all the pregnant women are
reported that the pregnant	provided with 4 ANCs and the
women are not attending the	record of the same to be
AWC to take complete course of	updated.
the 4 ANCs.	• A closed facility with proper
• There was no room for kitchen	ventilation to be provided for
(food was prepared in the open)	cooking purpose.
and there's no facility for toilet	• A toilet to be constructed
also.	attached to the Anganwadi
• Only one hand-pump was noticed	• Damaged hand-pump should be
and that too found to be	repaired.
damaged.	
(d) Anganwadi Nursery School, Ba	-
Total 39 students were registered and	· · · · · · · · · · · · · · · · · · ·
the time of team's visit due to rainy d	ay.
the time of team's visit due to rainy d	ay.
the time of team's visit due to rainy d	ay.
Observations of the NHRC team	Actionable Points
Observations of the NHRC team • The original building of the second s	Actionable Points e • A proper building should be
Observations of the NHRC team • The original building of the Anganwadi Center was damage	Actionable Pointse• A proper building should be provided for the AWC.
 Observations of the NHRC team The original building of the Anganwadi Center was damage badly therefore it was running in the second secon	Actionable Pointse• A proper building should be provided for the AWC.
 Observations of the NHRC team The original building of the Anganwadi Center was damage badly therefore it was running inverandah of Panchayat Bhawan. 	Actionable Points e • A proper building should be d provided for the AWC. n • • • • • • • • • • • • • • • • • • •
 Observations of the NHRC team The original building of the Anganwadi Center was damage badly therefore it was running inverandah of Panchayat Bhawan. 	Actionable Pointse• A proper building should be provided for the AWC.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running verandah of Panchayat Bhawan. Children were sitting on dirty ra cloth. 	Actionable Points e A proper building should be provided for the AWC. n g • Children should be provided with clean mats to sit on.
 Observations of the NHRC team The original building of the Anganwadi Center was damage badly therefore it was running inverandah of Panchayat Bhawan. Children were sitting on dirty rates 	Actionable Points e A proper building should be provided for the AWC. n g • Children should be provided with clean mats to sit on.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running verandah of Panchayat Bhawan. Children were sitting on dirty ra cloth. 	Actionable Points e • A proper building should be provided for the AWC. d provided for the AWC. g • Children should be provided with clean mats to sit on. • Toilet facility should be
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running i verandah of Panchayat Bhawan. Children were sitting on dirty ra cloth. Toilet facility was not present at all 	Actionable Points e A proper building should be provided for the AWC. n g g Children should be provided with clean mats to sit on. . Toilet facility should be provided.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running i verandah of Panchayat Bhawan. Children were sitting on dirty ra cloth. Toilet facility was not present at all 	Actionable Points e A proper building should be provided for the AWC. n g g Children should be provided with clean mats to sit on. . Toilet facility should be provided. . A new weighing machine should be provided.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running in verandah of Panchayat Bhawan. Children were sitting on dirty raticloth. Toilet facility was not present at all Weighing machine was defective. 	Actionable Points e A proper building should be provided for the AWC. n g g Children should be provided with clean mats to sit on. . Toilet facility should be provided. . A new weighing machine should be provided. . Growth chart should be provided.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running verandah of Panchayat Bhawan. Children were sitting on dirty ra cloth. Toilet facility was not present at all Weighing machine was defective. On random check it was found that 	Actionable Points e A proper building should be provided for the AWC. n g g Children should be provided with clean mats to sit on. . Toilet facility should be provided. . A new weighing machine should be provided. . Growth chart should be provided.
 Observations of the NHRC team The original building of th Anganwadi Center was damage badly therefore it was running in verandah of Panchayat Bhawan. Children were sitting on dirty raticloth. Toilet facility was not present at all Weighing machine was defective. On random check it was found that the growth chart of children was 	Actionable Points e A proper building should be provided for the AWC. n Provided for the AWC. g Children should be provided with clean mats to sit on. . Toilet facility should be provided. . A new weighing machine should be provided. . Growth chart should be maintained properly at all times.
 Observations of the NHRC team The original building of the Anganwadi Center was damage badly therefore it was running inverse version of Panchayat Bhawan. Children were sitting on dirty rational cloth. Toilet facility was not present at all Weighing machine was defective. On random check it was found that the growth chart of children was incomplete. 	Actionable PointseA proper building should be provided for the AWC.gChildren should be provided with clean mats to sit on.gChildren should be provided with clean mats to sit onToilet facility should be providedA new weighing machine should be providedGrowth chart should be maintained properly at all times.r.Food should be prepared as

prepared. Overall children were refrained from proper prescribed diet.	be nutritious and adequate.
 There was inadequate number of utensils. 	 New utensils should be provided according to the strength of registered children in the Anganwadi.
 In this, and all the other Anganwadi Centers the food was prepared by using firewood only and it was informed that there is no provision/budget for cooking process. 	in reference to the cooking of

V. Public Distribution System

As per the details submitted by Gumla officials (P-125/129), there are total 738 PDS shops in the district of Gumla out of which 703 were fully functional in the month of June 2015 while 35 are under suspension. Total 64 shops were inspected in June 2015, out of those, explanation has been called for from 4 shops and license of one shop has been terminated.

The total allotment of rice in the month of June 2015 for BPL was 18641.70, under Antodaya Yojana was 13837.80 and APL was 3433.80 MT, whereas the total allotment of Kerosene Oil for the month of June was 2136 K.L. The Utilization certificate for Gumla is placed at **Annexure- L.**

A detail information regarding BPL, AAY, APL families etc. of Gumla District, submitted to the NHRC team by District Supply Officer, Gumla, is placed at **Annexure- E.**

The team visited Palkot Bazar, PDS on 8th July 2015.

Palkot Bazar, PDS

The timing of the shop was displayed as 8 AM to 3 PM but the shop was found closed at 2:30 pm. It was informed by the locals that the shop remains open only on 15th and 25th of every month. Mr. Ajit Kujur, Marketing Officer, Palkot stated that there are 60 Ration shops in Palkot following the time table of 8am to 2pm and opening only on 15th and 25th of every month. However, the District Supply Officer, Gumla has informed that the PDS shops should be opened daily.

Observations of the NHRC team	Actionable Points
 Mr. Shiv Narayan 	• Though, the BPL card holder had no
Sahu holding BPL card	complaint, but it is upon the
number 0284356862	authorities to ensure accurate and
stated that the BPL	proper supply of the food grains and
card holders are	kerosene oil to the beneficiaries on the
getting only 33 Kgs of	price fixed by the Government. It

Rice instead of 35 Kgs while amount for 35 Kgs is taken making entry of 35 Kgs.	should also be ensured that PDS shops are opened regularly.
 Similarly, Mr. Shiv N Sahu and other villagers have told that they are getting Kerosene Oil at the rate of Rs. 19.5 /Liter instead of govt. approved rate. 	As above

VI Indira Awas Voiana (IAV)			
VI. Indira Awas Yojana (IAY)			
As per the information booklet provided by Gumla officials, there was			
planning of total 6500 houses unde	r IAY, out of which 1457 have been		
completed and 5043 are pending a	gainst target of 1795 houses in the		
year 2015-16 (P-4).	5 5		
The team visited the office of Blu	ock Development Officer, Palkot on		
	ies received from the office of Block		
	d at Annexure- F which reveals that		
	as received during the year 2014-15,		
out of which Rs. 27,18,750/- has bee	en utilized.		
Observations of the NHRC team	Actionable Points		
• During the visit, the Block	• The waiting list for allotment		
Development Officer, Palkot	of IAY houses should be		
could not be available in the			
HQ, and the officials present	•		
there could not produce any	-		
waiting list of the IAY			
<u>candidates.</u>			
 As per the guidelines issued 	• <u>Thus, it is evident that</u>		
by Ministry of Rural	benefit of Indira Awas Yojna		
	<u> </u>		

India, regarding the Indira Awas Yojna, the beneficiaries will be selected from the permanent IAY wait lists prepared on the basis of BPL Lists in order of seniority in the list. The Gram Panchayats may draw out the shelter-less families from the BPL List strictly in the order of ranking in the list. A separate list of SC/ST families in the order of their ranks may be derived from the larger IAY List so that the process of allotment of 60% of houses under the scheme is facilitated. Thus, at anv given time, there would be two IAY List for reference, one for SC/ST families and other for non SC/ST families. Once the lists are prepared, they need to be approved by the Gram Sabha to be attested by a Government Servant who would be a nominee of the Selection by the Collector. Gram Sabha is final. Νο approval by the higher body is required. The permanent IAY wait list so prepared will be displayed at a prominent place either in the Gram Panchayat Office or any other suitable place in the village. The lists will also be put on the web site by the concerned DRDAs. selection Priority in of

provided arbitrarily, violating all the norms issued by the Government of India and the list approved by the Gram Panchavat. This indicates towards a biq and scam *misappropriation* of the public fund which must be investigated thoroughly. As this was merely а sample visit, possibility of such of misappropriation the scheme in other Gram Panchavats in the district and the entire State of Jharkhand cannot be ruled out. Therefore, this requires a thorough investigation by an independent agency.

beneficiaries will be as under:- i) Freed bonded labourers ii)SC/ST households *SC/ST households who are victims of atrocity *SC/ST households, headed by widows and unmarried women. *SC/ST households affected by flood, natural calamities like earthquake, cyclone and man-made calamities like riot. Other SC/ST households iii) Families/widows of personnel from defence services/paramilitary forces, killed in action. iv) Non-SC/ST BPL households. v)Physically and mentally challenged persons. vi) Ex-servicemen and retired members of the paramilitary forces. vii) Displaced persons on account of developmental projects, nomadic/semi- nomadic, and de-notified tribals, families with physically/mentally	
<i>challenged members.</i> In order to assess the factual position, a sample check was made regarding houses allotted	

under Indira Awas Yojna for the residents of Gram Panchayat, Palkot South, which revealed that no wait list was made as per the prescribed norms. However, the Gram Panchavat vide its proposal dated 28.06.2014 has observed that in reference to the letter No.443(ii) dated 29.05.2014 of District Rural Development Authority, Gumla letter No.350 and dated 04.06.2014 of Block Development Officer, Paklot, a meeting was held and names of 64 needed persons were selected for Indra Awas Yojna (Flag-B). The list includes SC/ST, minorities and others, but there was no separate list for SC/ST and non-SC/ST categories. As has been informed to the team, on the basis of the list sent by the Panchavat, names of 15 candidates were published bv Block Development Officer, Palkot 10.01.2015 (Flag on `Α′). Perusal of this list reveals that the names of the beneficiaries are not as per the sequence of the list sent by the Gram Panchayat, Palkot South, and have these been selected randomly. Even out of these 15 candidates, names of 04 candidates namelv Sumari Devi, Mahesh Uraon, Lal Pal Singh and Tijo Devi do not

 pertain to the list sent by the Gram Panchayat. No official of the BDO was able to explain the situation. No wait list of the IAY candidates has been found displayed by DRDA. However, a list "New IAY Sanction List (Complete)" displayed in the official web-site of the Gumla district bears names of 17 beneficiaries (Flag 'C') 	
from the Palkot South, <u>but most</u> of these names were not recommended by the Gram Panchayat vide its proposal dated 28.06.2014. • Therefore, a meeting was called with the concerned officers of the district to meet at evening at District HQ Gumla to discuss on the issues, but none of the concerned officers of Gumla district, including Dy. Commissioner, Dy.	
 Development Commissioner or District Welfare Officer, attended the meeting. During the visit, Smt. Kamala Urain (Lakra) Chief of Gram Panchayat, Bangru, Palkot submitted a written complaint (Annexure-G) alleging that IAY houses in village Panchayat, Bangru have not 	Kamala Urain (Lakra), the Gram Panchayat Pramukh should be investigated separately and an action

been allotted to the persons whom names were in the waiting list approved by the Gram Panchayat. She also alleged that the Gram Panchayat Sewak does not	for from the Chief Secretary, Government of Jharkhand, Ranchi.
provide her any documents of the purchasing of material in referenced to the Gram Panchayat. She also alleged	
that the Block Development Officer was also reluctant in showing the official record, therefore, the Gram Panchayat is unable to make a	
social audit as per the law. The Block Development Officer also uses filthy language, calling her caste name and	
even misbehaves with her. The Panchayat is not aware regarding the amount spent by the BDO because it is being	
done through some mediators.	

VII. Mahatma Gandhi National Rural Employment Guarantee Scheme (MNREGS)

As per the details provided by the District Administration, Gumla (P-1), out of total budget Rs. 7304.88 Lakh, received for the financial year 2015-16 an amount Rs. 1275.31 has been spent till June 2015. Target up to June 2015 was to create 1060886 Man Working Days, but only 49.05 % could have been achieved. Total 200 Card holder families could complete 100 days of work under MNREGS.

Observations of the NHRC team	Actionable Points	
It was noticed during the visit that The	Deputy Commissioner,	

payment of Rs.26.1 lakhs as	Gumla should ensure that no
MNREGS wages was pending in the	such delay in payment of
Block Palkot. The BDO Office has	MNREGS wages should be
informed that there was no	repeated.
authorized signatory for issuing the	
amount between the period	
06.06.2015 to 22.06.2015, and	
further the payment delayed due to	
interruption in internet connectivity.	

VIII.	Swami	Vivekanand	Disability	Scheme,	Old	Age	Pension,
Wido	w Pensio	on and Handi	cap Pensio	n Yojna		_	

Observations of the NHRC	Actionable Points
team	
 As per the information provided, all the disabled persons having more than 40% disability are eligible for Swami Vivekanand Disability Scheme. However, no budget could be received to distribute it among the 5531 beneficiaries. Information regarding Old Age Pension, Widow Pension, Handicapped Pension Yojna, Agriculture, Electricity transmission and irrigation is given in annexure-M. 	• The State Government should provide adequate budget under the Swami Vivekanand Disability Scheme.

SIMDEGA DISTRICT

Simdega District is situated adjacent to the Gumla district. In fact, earlier it was a part of the Gumla district and was created on 30th April 2001. It borders with Orissa and Chhattisgarh states. It consists of ten blocks/Circles namely Simdega, Kurdeg, Bolba, Thethaitangar, Kolebira, Bano, Jaldega, Pakartanr, Bansjore and Kersai.

The population of Simdega district according to 2001 Census is 514320 residing in 100049 households. Urbanization is very poor with 6.6 per cent population only and Simdega is the only town in the district. In the district 1194.50 sq. km areas are covered with forest. Simdega district is primarily settled by the Scheduled Tribes with 70.2 per cent population, which is the highest among all the districts of Jharkhand closely followed by Gumla district with 67.2 per cent ST population. Majority of the STs belong to the Christian faith. Major tribal groups in the district are Oraons, Kharia, and Mundas etc. A few families belonging to the Primitive Tribal group like Asur, Birhor etc are also living in the district.



The team of NHRC visited various places in Simdega District On 9th July 2015, to take a view on implementation of following flagship programmes:-

I. Integrated Child Development Services (ICDS)

As per the particulars provided by Simdega officials **(P-42/44)** there are 965 Anganwadi Centers, where 960 AWW and 920 AW Helpers are working, while posts of 5 AWW and 7 AWH are lying vacant. Out of these, 936 AWW and 875 AWH have attended the Orientation Courses. Grants related to the ICDS have already been released by the Government in April 2015.

The team visited Anganwadi Kolebira, Simdega on 9th July 2015.

(a) Anganwadi, Kolebira, Simdega-

This Anganwadi caters 1326 population of Kolebira region. Mrs. Lili Devi was appointed as AWW here. Total, 60 children are registered at present in the Anganwadi.

	Observations of the NHRC	Actionable Points
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team	
 Food menu for the day was checked by the team and it was found that daal was very dilute and soyabin was not mixed in the rice. Food provided for the children was unwholesome. Mrs. Lili Devi, AWW told that she is getting a meager amount Rs. 3200/- per month as her salary which is also not being provided in time. She has not received her salary since March, 2015 as well as other amount required for providing the nutrients, due to which she is compelled to borrow money for buying the food for the children of Anganwadi. 	 As mentioned above, all grants related to the ICDS have already been released by the Government in April 2015; therefore, there is no reason to delay payment to the AWW. The Dy. Commissioner, Simdega should look into the matter and do needful immediately. <u>The Chief Secretary, Govt. of Jharkhand should also consider enhancing of the honorarium paid to the AWW/ AWH adequately.</u> It should also be ensured that quality and quantity of the Food provided in the AWCs is maintained. A register should be maintained to keep record of the quantity of the for preparing food daily.
• It was found that growth chart and attendance register of the students were not maintained properly. The AWW Mrs. Lili Devi also informed the team that in addition to her work, she has been assigned the responsibility of Booth Level Officer, which causes hurdles in functioning of the Anganwadi.	the functioning of AWCs. It not only hampers functioning of the AWC but appears to be exploitation of the AWWs as they are very low paid workers.

 Shortage of Iron Pill was also reported as only 80 pills are provided instead of prescribed 100 pills. 	5 ,
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II. Mid Day Meal Scheme (MDM)

As per the report submitted by the district administration (**P-133/137**) there are 1096 schools where the MDM is being provided to 36145 students in the district. all the budgetary allocation for MDM provided by central government for the financial year 2014-15 has been spent.

Rajkiya Buniyadi Vidhya School, Kolebira

The team visited Rajkiya Buniyadi Vidhya School, Kolebira on 9th July 2015. Mr. Shyam Lal Prasad, President of School Management Committee was present at the time of the visit. The team has visited various classes and interacted with students and staff as well. On the day of visit, food for 90 students was prepared under MDM Scheme. For 90 students, 2 kg Split Red Lentil (Masoor daal), 4 kg potato and 12 kg 150 gm rice was prepared.

Observations of the NHRC team	Actionable Points
 There's emergent dearth of teachers in the school. There are 11 sanctioned posts but only 3 are presently working to handle classes 1 to 8th. Para-teachers were not provided to the 	<u>teachers should be filled up</u> <u>immediately to save</u> <u>collapsing of the system.</u>
 School dress for class 1st, 2nd and 5th was not provided. 	 School dress for the students of class 1st, 2nd and 5th should be provided.
	• Students who have not received

 Students belonging to from class 5th and 6th c 	only	their scholarships yet should be recorded in a register. Process
received their scholarsh	• •	should be initiated to provide
remaining other students		them scholarships and
	neir	subsequently updated in
scholarships.		records.
	•	Benches to be provided for class
		5.
• In class 5 th , benches w	ere •	Attendance registers should be
not there.		maintained properly and the
• Discrepancy was found	in	number of students should be
filling up of attendance		matched while preparing MDM to
teachers were not sign		ensure adequate quantity.
attendance register	-	
keeping a daily check on h		
many were absent		
present. This also shows t		
	was	
prepared without pro		
student's count. On check	•	
it was found that the quan	-	
of 'sabzi' for 90 students v		
very low.		
• On being asked to re	ad	
students of class 5 th were	-	
able to read properly. Cl		
8 th students were not aw		
of basic science knowledge		
None of the classroom		Fans should be installed in each
fan or electricity facility.		classroom and electricity should
		be provided to the school.
• There was shortage	of •	Adequate utensils are to be
utensils for MDM.		provided.
• There were 3 cooks only	for •	The need of additional staff to
212 students. There are		cook the food may be looked
Assistant cooks here.		into.
	and •	The salaries of all the staff and
	not	workers in the school should be

coming on time.	paid on time.
• There is issue of drinking	 A new hand-pump in the school
water in the school vicinity.	premises should be installed.

III. National Rural Health Mission (NRHM)

As per the report submitted by the district administration (**P-32/41**), about 16 % annual of vaccination of the children could be achieved.

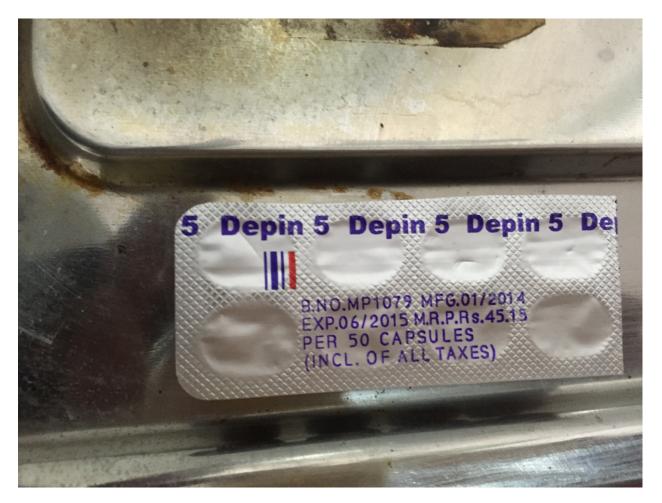
Community Health Center (CHC), Simdega

The team visited Community Health Center, Simdega on 9th July 2015.

Dr. R. L. Munda (Medical officer-In charge) was present during the visit. There are 101 ASHA workers affiliated with CHC Simdega and total amount Rs. 16500/- has been paid for Routine Immunization of Pregnant women and Infants. On estimation, there's 70-80% vaccination going on in whole Simdega district. As per Dr. R. L. Munda, there are 90-100 institutional deliveries per month. The CHC is also engaged in work of food sampling across the Simdega District.

Observations of the NHRC team	Actionable Points
• There was no separate OPD registration for patients. There was only one doctor deputed in OPD, although, there are 4 sanctioned	• The vacancies of the doctors may be filled-up immediately.
 posts for it. The CHC is facing frequent power cut causing hardship to the doctors and the patients. Electricity supply was interruptive as the power 	 Adequate arrangement for uninterrupted electricity supply should be made.

 went on and off frequently. There was no blood bank, ECG & X-ray facility in the hospital. 	• Blood bank, ECG & X-ray facilities should be made available urgently.
 In labour room, nebulizer was not working. Sterilizer was not functional. <i>Expired</i> <i>medicines were found in</i> <i>labour room</i>. 	 In labour room, Nebulizer and Sterilizer should be repaired and made functional as soon as possible. Expired medicines should be discarded totally.
 In medicine store room, it was found that various crucial medicines such as anti-rabies medicine were out of stock for a long. While inspecting the stock of 	 The life saving medicines like Anti-rabies & antiserum (Snake bite) should be made available.
zinc tablets, the tablets were not found available against stock shown in the register. This shows serious mismanagement in maintaining medicine stock register.	 Stock register should not only be maintained properly but it should be cheked by the superiors regularly.



IV. Public Distribution Service (PDS)

As per the report submitted by the district administration **(P-121/125)**, there are total 494 registered shops in PDS in district Simdega. Under Antodaya Aana Yojana, 1744.155 Ton of Rice was released for April 2015 to June 2015out of which 98% has been distributed so far. Similarly, under BPL Yojana, 16771.860 Ton of Rice was sanctioned from April to June 2015 out of which 92% has been distributed so far.

PDS, Kolebira

The team visited PDS, Kolebari on 9th July 2015. Registers were maintained properly. It was stated that at the time of distribution, Jan Sevak/Jan Pratinidhi remains present to countercheck any mismanagement in distribution.

Observations of the NHRC team

Actionable Points

 Team noticed that Haat Oil was sold as common practice in PDS across the Kolebira region at the rate of 17Rs/Liter. This oil is provided without card as well. On a single time, 1-2 liters is provided to the beneficiary. It was noticed that, there was no provision of budgetary allocation for transportation of oil from store house to PDS shops. 	 Budgetary allocations for transportation of oil should be provided.
 It was also informed that PDS shops are opened only on 15th & 25th of every month, which is not only violation of the Govt. norms but also causing inconvenience to the general public. 	 The matter of opening days of the PDS shops may be looked into by the superiors.

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V. Mahatma Gandhi National Rural Employment Guarantee Scheme (MNREGS)

As per the report submitted by the district administration (**P-1/7**), there are total 97663 job card holders issued to provide employment, and 20569 household were provided job. Person days per household are 35 during the year 2014-15.

MGNREGA, Lachragarh Gram Block, Simdega

The team visited Lachdragarh Gram of Simdega on 9th July 2015.

Observations of the NHRC team	Actionable Points
 At the time of team visit, it was raining and hence MGNREGA work was stopped in all the sites. None of the sites visited had display boards showing particulars of beneficiary, type of work, when the work started and other such information. 	information regarding MGNREGA

VI. Adivasi Balak Kalyan Chatravas, Lachragarh, Simdega (MESO Yojna)

The team visited Adivasi Balak Kalyan Chatravas, Lachragarh, Simdega on 9th July 2015. The hostel houses 133 boy students.

Observations of the NHRC team	Actionable Points
 In hostel there was no fan, light etc. and the residential hostel was highly congested with each room having 10 children sleeping in two tier system. Bathroom door was damaged. The inmates informed that a fee of Rs. 250/- is collected from them by St. Vianney's High 	 Electricity and Fans facility should be provided to the hostel inmates.

VII. Indira Awas Yojana (IAY)

As per the report submitted by the district administration (P-21/26), for the financial year 2014-15 totally 1168.500 Lakh were allocated for IAY out of which 543.972 was released. The report shows that so far 58.14% of funds only have been utilized (P-21). There are total of 1558 houses sanctioned during the year 2014-15 and thus total 5264 houses are under construction. For total 1558 houses sanctioned in the year 2014-15, only 501 houses had sanitary latrines and 29 houses had smokeless chullahs (P-26).

The team visited IAY of Lachdragarh Gram of Simdega on 9th July 2015.

IAY, Lachragarh Gram Block, Simdega

provided by the Panchayat Pramukh, is placed as **Annexure-J.**

- (i) From perusal of the List of Beneficiaries to whom the IAY houses been have allotted during the year 2014-15, it reveals that Names of all the 13 beneficiaries have been selected arbitrarilv violating serial number and ignoring merit of the score numbers given in the BPL list (Annexure-**I)**.
- (ii) While comparing the IAY beneficiaries list 2014 with the list forwarded by the Gram Panchayat on 18.09.2014, it can be seen that names of Ajit Bading and Jirmani Devi were not recommended by the Gram Panchayat.
- (iii) A casual scrutiny of the IAY beneficiaries list 2011-12, 2012-13 & 2013-14 reveals that IAY houses have been sanctioned ignoring the score priorities and

serial number given in main BPL list (Annexure-I), and even the IAY houses have been sanctioned to some persons whom names do not appear in the main BPL list .

- (iv) While inspecting IAY house of one of the of beneficiaries the vear 2014 named James Lugun's son of Prakash Lugun, it was found that he already had his own well maintained house just opposite to the IAY house (photograph is given below).
- (v) It was also noticed that the houses shown to be constructed under IAY scheme were not according to the standard norms.
- (vi) Thus, it prime-facie appears that fund of IAY scheme has been grossly misused.



(House of James Lugun's son of Prakash Lugun constructed under IAY)

VIII. Widow Pension Yojana (WPY)	
Observations of the NHRC	Actionable Points
team	
 Tara Devi of Lachragarh did not receive her widow pension for the past 2-3 months. This was the same case with many villagers as stated by the Gram Sarpanch. 	 Due widow pension of Tara Devi, including all the beneficiaries of Widow Pension Yojana should be cleared up as immediately.

Recommendations of the Team :-

- 1. The Chief Secretary, Government of Jharkhand may be asked to have a detailed investigation in the matter of allotment of the hoses under IAY in the district Gumla and Simdega, and to submit an action taken report to the Commission, along with the action taken on the other actionable points mentioned in the report.
- 2. The Chief Secretary, Government of Jharkhand may also be asked to fill up the vacancies of the doctors and other paramedical staff, and to ensure minimum basic facilities in the CHCs & PHCs of the State.
- 3. There are huge vacancies of teachers in both the districts, which may be filled up urgently.
- 4. A copy of this report may also be sent to the Secretaries of the Ministry of Health, Government of India and Ministry of Rural Development, Government of India to look into the matters of discrepancies noted by the team and to submit an taken report to the Commission.

5. A copy of the report may also be sent to the Secretary, Women & Child Development, Government of India, New Delhi to consider a reasonable enhancement of honorarium paid to Aangan Wadi Workers and Aangan Wadi Helpers, as now their services are being taken like other regular employees.

(A. K. Mishra) Inspector (Investigation) (Amit Gopal Thakre) Research Consultant

(K.K. Shrivastava) Assistant Registrar (Law) 22.07.2015 New Delhi to consider a reasonable enhancement of honorarium paid to Aangan Wadi Workers and Aangan Wadi Helpers, as now their services are being taken like other regular employees.

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