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**TOUR REPORT OF SHRI ANIL KUMAR AGARWAL, IAS, SECRETARY,  
NATIONAL COMMISSION FOR SCHEDULED TRIBES, GOVERNMENT OF  
INDIA, NEW DELHI IN RESPECT OF HIS TOUR TO ANDAMAN AND  
NICOBAR ISLANDS FROM 26.05.2016 TO 03.06.2016.**

Shri Anil Kumar Agarwal, IAS, Secretary, National Commission for Scheduled Tribes (NCST) visited Andaman and Nicobar Islands from 26.05.2016 to 03.06.2016. He reached Port Blair on 26.05.2016 and he left Port Blair in the afternoon of 03.06.2016. During his visit, he interacted with STs and Government functionaries, visited health institutions and held review meeting at the State headquarters.

2. The Secretary, NCST on 27<sup>th</sup> May left Port Blair for Dugong Creek by helicopter, where he interacted with people of Onge tribe, a PVTG. He was accompanied with Shri S. A. Awaradi, the Director, Andaman & Nicobar Tribal Research Training Institute (ANTRI). There are a total of 117 persons belonging to Onge tribe in the entire Andamans and they have been settled in Dugong Creek. They have been provided with almost everything free, such as housing, foodgrains and cloths. The Secretary, NCST visited their settlement and held discussion with them in their multipurpose community hall. During discussion they raised the following demands:

- a. Their existing wooden houses should be repaired.
- b. They should be given new pucca houses of RCC at a higher ground.
- c. They should be involved in plantation of coconut crop.
- d. They should be given Govt. Jobs, e.g., as homeguard or forest guard.
- e. They should be provided with two fibre boat with engine, particularly for transferring emergency patients from Dugong to Hutbay.
- f. President of the multipurpose society wanted his honorarium to be raised from Rs. 400 to Rs. 1000.
- g. Street lights should be provided in the settlement as well as at the jetty.
- h. A road from Dugong to Hutbay, which is about 15 kms. should be constructed.

3. During discussion, the Secretary, NCST was informed that there were a total of 40 students studying in the school located in the settlement. Among the students present, three children came forward and mentioned that they were studying in class 7. However, they


could not tell as to what exactly they were studying. It appeared that education was very-very weak link in the settlement. The Secretary, NCST advised that the UT Administration may take concerted efforts to improve the quality of education being imparted to students of Onge tribe residing in Dugong creek.

4. One ANM and one male health worker were posted at the Dugong creek. The ANM was present during the discussion. She makes daily visit to all the houses to enquire about the health problems. She has good stock of medicines for common diseases such as fever, gastric disorder. It was noticed that some of the tribal persons were having problem of obesity. The ANM informed that they were also having problem of hypertension. It emerged that since everything is being provided to them free, they were not doing any physical activity. The Secretary, NCST advised the UT Administration to take steps so that both children as well as elders undertake some physical activities.

5. The Secretary, NCST was informed that there was a proposal to construct a playground for playing football. This would be a welcome step. The elders should be involved in some economic activity so that they have some physical activity and livelihood support. The Secretary, NCST advised that the UT Administration may take necessary steps in this regard.

6. At the invitation of the UT Administration, the Secretary, NCST distributed six cycles to six youngsters and some other gifts, mainly clothes, to a large number of people present during the interaction with Onges.

7. Thereafter, the Secretary, NCST left for Hutbay by helicopter. He visited Vivekanandapur village, about 25 kms. from Hutbay. It is a refugee settlement. Refugees from Bangladesh were settled here in mid-seventies. Now they are in their third generation. They were provided with about 5 acres of land at the time of initial settlement. Currently, they are growing arecanut and coconut, which is given them good income. However, as they are into the third generation now, the land is inadequate for providing livelihood to all of them.

  
ए. के. अग्रवाल/A. K. AGARWAL  
सचिव/Secretary  
राष्ट्रीय अनुसूचित जनजाति आयोग  
National Commission for Scheduled Tribes  
भारत सरकार/Govt. of India  
नई दिल्ली/New Delhi

8. They wanted better transportation from Hutbay to Port Blair. The Secretary, NCST was also informed that quality of water was very hard and they had to purchase water from the private people at the rate of one Rupee per litre. They suggested that Hutbay could also be developed as a tourist attraction on the pattern of Havlock island. The UT Administration may like into this demand.

9. The Secretary, NCST visited primary health centre (PHC) in Hutbay and interacted with the GDMO and other staff at the PHC. It had two General Duty Medical Officers (GDMOs). The average OPD attendance was about 100 patients per day. They had good infrastructure in terms of male, female and casualty wards. There was no specific problem regarding availability of medicines, which were being supplied to patients free of cost. The main issue brought out by them was transfer of emergent patients from Hutbay to Port Blair.

10. Later in the evening, the Secretary, NCST visited the Hutbay harbour. A breakwater structure was under construction at the harbour. Its objective is to reduce the impact of very high waves, such as tsunami type waves, so that the damage to the harbour and the island is minimized or eliminated. The Secretary, NCST met with a large group of passengers waiting to catch a ship for going to Nicobar. They were quite agitated. They informed that for the past one month, they had not got the ticket for going to Nicobar. One ship was about to dock in the harbour after about half an hour. The passengers told that they were informed by the harbour authorities that ten persons would be disembarking and only ten people had been provided with ticket for going to Nicobar. Local Tehsildar was advised to speak to the captain of the ship after it had docked in and explore the possibility that the ship could take more passengers. The Secretary, NCST was informed the next morning that the captain of the ship was quite accommodative and he was somehow able to take all the waiting passengers aboard the ship for taking them to Nicobar.

11. The incident once again highlighted the need for better inter-island transportation facility. The Secretary, NCST on 28<sup>th</sup> May left Hutbay for Port Blair by helicopter.

12. The Secretary, NCST on 29<sup>th</sup> May left Port Blair for Havlock island by helicopter. He visited primary health centre (PHC) in Havlock and interacted with the GDMO and other staff there. The PHC had two GDMOs. The average OPD attendance was about 125 patients. They had facility of 25 beds. On the day of the visit, only 5 patients were admitted. There

was no shortage of medicines. The PHC had full complement of staff. The PHC had good infrastructure. However, inter-island transportation was the main problem raised by them. The Secretary, NCST on 30<sup>th</sup> May returned to Port Blair from Havlock by helicopter.

13. The Secretary, NCST was on 31<sup>st</sup> May, 2016 scheduled to go to Nicobar Island; but due to inclement weather and after a prolonged wait at the helipad, the helicopter sortie had to be cancelled. Later that day, the Secretary, NCST left Port Blair for Rangat by road and reached Rangat late in the evening.

14. The Secretary, NCST on 1<sup>st</sup> June visited Rangat Community Health Centre (CHC) and he interacted with the GDMO-in-charge and other staff. The CHC had about 45 beds separated in male, female, emergency wards, etc. It had three GDMOs, X-Ray facility, Pathology test facility, etc. The average OPD attendance was about 200 persons per day. The bed occupancy during the day of the visit was only about 15%. Overall the Community Health Centre had good infrastructure. The main issue raised by them was the lack of Specialists.

15. The Secretary, NCST also visited Kadamtala Primary Health Centre. It was also a two doctor PHC. The average OPD attendance was only about 50 per day. They had 10 beds. They also had a Jharwa (PVTG) ward. As and when Jharwa patients came, they were brought to the Jharwa ward for medical attendance. After the medical attendance was over, and if they were required to be kept at the PHC, they were kept in a separate hut about 50 yards away, exclusively meant for the stay of Jharwa patients and their attendants. One Aadim Jan Jaati Samiti worker and one police constable also stayed with the Jharwa patient and his/her attendants, during the period of their stay at the PHC.

16. The doctor on duty mentioned a few problems. The PHC was short of one ward boy. They were not getting thyroid medicine for several weeks. It was also noticed that the sole emergency bed was kept in the corridor. I.V Fluid and other store materials were also kept in the corridor. There is the a need to improve infrastructure at this PHC so that casualty ward does not have to be located in the corridor. There is also need to provide separate room for keeping stores. The number of beds may also need to be increased. The telemedicine room was found to be locked.

17. Thereafter, the Secretary, NCST visited Baratang Primary Health Centre. They had 8 beds each for male and female wards. There was no separate casualty ward. It was a two GDMO PHC. They had full complement of staff except that some field assistant posts were vacant. Average OPD attendance was about one hundred per day. Five male and three female patients were admitted on the day of the visit. The doctor on duty mentioned that during peak patient season, they needed more beds. The telemedicine room was found to be blocked at this PHC as well. They did not mention any problem of shortage of medicines, including thyroid medicine. It emerged during discussion that the doctors could be provided with refresher courses, as continuing medical education, so that they could handle delivery and other patients more confidently. The Secretary, NCST halted in Baratang.

18. The Secretary, NCST on 2<sup>nd</sup> June, left Baratang for Port Blair. Later in the day, the Secretary, NCST held a meeting at the State Secretariat. The Chief Secretary was engaged in a meeting with the Lt. Governor. The meeting was held with Shri Raajiv Yaduvanshi, Principal Secretary, Urban Development. The Principal Secretary Tribal Development, Director Tribal Welfare and Director, ANTRI were also present during the meeting.

19. The Secretary, NCST informed the meeting about his observations from the field visits. The demands raised by Ongese during the visit of the Secretary, NCST to Dugong Creek, as mentioned earlier in this report, were informed to the meeting. The UT Administration mentioned that they had plans to provide a football ground, pucca houses at a higher level and involve Ongese in coconut plantation. They were planning to provide to them one fibre glass boat with engine and the issue of street lighting in the settlement as well as at the jetty would also be considered on priority. However, they felt that separate road from Ongese settlement to Hutbay may not be very desirable, as it might lead to exploitation of Ongese by the people of Hutbay.

20. The Secretary, NCST mentioned that education was a very weak link in the Ongese settlement. He advised the UT Administration to take specific steps to provide quality education to Ongese. This may include arranging special coaching classes for them.

The Secretary, NCST also informed the meeting about strengths and deficiencies of different health institutions visited by him and advised the UT Administration to take necessary steps to remove the deficiencies.

21. The UT Administration gave the ATR on the tour notes on the visit of the Commission in November, 2011, to the Secretary, NCST during the meeting. The ATR is attached as **Annexure-I**.

22. The ATR was discussed. It appeared from the ATR that there was significant shortfall ( only 1.3% against quota of 8%) of reservation in group A posts. The UT Administration was advised to organise a special recruitment drive to bridge the gap.

23. Regarding the issue of regularisation of contract workers at Health Department, the UT Administration agreed to provide the latest status. They further stated that the matter would be examined with reference to the Supreme Court judgement in Uma Devi case.

24. The UT Administration did not have readily available data in respect of total seats available for Scheduled Tribes in professional courses. They agreed to provide the same within a month, along with an action plan for full utilisation of reserved seats meant for Scheduled Tribes in professional courses.

In respect of the issue of timely payment of scholarships to ST Students studying in mainland, the UT Administration mentioned that there were several administrative constraints and the matter was being examined so that a satisfactory solution could be found.

25. Regarding the issue of hostels for ST boys and girls in Port Blair, the UT Administration was again advised to assess the need for additional hostel facilities. They were also informed about initiatives taken by the Govt. of Orissa for setting up separate hostels for ST boys & girls studying beyond class 12 in Bhubaneswar.

26. The UT Administration was advised to provide the latest status of implementation of POA Act. In particular, they were advised to follow the provisions relating to holding regular meetings of monitoring committees at the State & District levels; having inquiry conducted at the level of Deputy Superintendent of police; timely filing of chargesheets and expeditious payments of compensation to the victims, as per rules.

27. The UT Administration was also advised to follow the provisions of act & rules regarding atrocities against STs who were residing in some other State outside A&N Islands.

28. The issue of Nicobaris having difficulty in getting loan for commercial activities was discussed. The Secretary, NCST informed that the Govt. of Orissa had set up a committee to examine various aspects of the issue and come up with a solution acceptable to different stakeholders. The UT Administration mentioned that they would examine the issue and come up with a feasible solution.

29. The ATR provided good details in respect of PVTGs, including their health status. However, it was deficient in several other respects, some of which were:

- Road in Baratang area.
- Status of repair of existing houses, and construction of new houses, for Great Andamanese Tribe.
- Status of old age pension to two persons mentioned in the Commission's Report.
- Assistance for goat & pig rearing.
- Construction of Co-operative society in the Strait Island.


30. The UT Administration agreed to provide an updated ATR, duly addressing the deficiencies mentioned above, to the Commission by 31<sup>st</sup> August, 2016.

31. After the meeting at the State Secretariat, the Secretary, NCST visited the office of Andaman & Nicobar Tribal Research Training Institute (ANTRI). Two field functionaries of Adivasi Jan Jati Samiti- Shri Bal Ram Yadav, Senior Jan Jati Sevak and Smt. Janki, Tribal Welfare officer- were also present. They mentioned that a team of Jan Jati Sevak, a forest guard and a police guard, maintain contact with Jarawas on a daily basis. One of the primary objectives for the visit of the team to different settlements of Jarawas by rotation is to prevent their contact with people in non-PVTG areas. Another important objective is to provide them with medical care. (The example of medical care was seen by the Secretary, NCST while visiting Kadamtala PHC, where he had been informed that whenever a Jarawa patient was to be brought to the PHC, one Jan Jati Sevak and one police guard also accompanied the patient to the PHC. They also stayed at PHC during the period of stay of the patient at the PHC.) Other important issues mentioned by them were:

- a. Providing food to Jarawas was not an issue as they got enough catch during hunting. Jarawas had reportedly shown interest in fruits and accordingly the UT Administration was trying to plant fruit trees with their help, in their own settlements / camps. There were over 40 Jarawa camps in an around Jarawa tribal reserve.
- b. In so far as medical care was concerned, the attempt of the UT Administration was to provide them with in-situ medical care. The Jarawas became restless if they were away from their own environment for a long period. The two approaches for in-situ medical care were: (i) through mobile health camps; and, (ii) through a health sub centre situated within the Jarawa territory where doctors and other paramedical staff could visit on a regular basis. The UT Administration was also developing special treatment protocol for Jarawas, so that the medicines given to them were appropriate to their immune system. After a prolonged debate, the UT Administration decided to provide vaccination to Jarawa children in the age group of 0-5, as the advice from the medical community was that there was no harm in vaccinating them.

32. Thereafter, the Secretary, NCST had a discussion with Director, ANTRI, its Research Associate and other staff. It emerged during the discussion that there was a need to document language and culture of tribals in the Andaman and Nicobar islands. The elders within the tribal community were repository of such knowledge. The documentation should be completed during the life time of elders.

33. It was also required to document successful initiative in bringing tribals, particularly PVTGs, to the main stream. It emerged during the discussion that the normal habits in the main land could not be transferred to tribals without adequate consideration. For example, providing clothing to PVTGs may not be as simple as it appeared. In the main stream life, cloths are washed and changed on a daily basis. This may not be feasible for PVTGs. This and several other issues had come up in the past in relation to providing clothing to PVTGs. Therefore, it was important to document successful development initiatives and use this knowledge before other development initiatives to bring PVTGs to the main stream were taken up.

  
श. कौ. अग्रवाल/A. K. AGARWAL  
सचिव/Secretary  
राष्ट्रीय अनुसूचित जनजाति आयोग  
National Commission for Scheduled Tribes  
भारत सरकार/Govt. of India  
नई दिल्ली/New Delhi




34. In respect of tribals in the Nicobar district, the main issue appeared to be livelihood and quality of education, particularly, education in Science & Maths. The Secretary, NCST was informed that the UT Administration was following a transparent transfer policy of teachers, so that they remained motivated and dedicated.

35. The Secretary, NCST on 3<sup>rd</sup> June, 2016 visited GB Pant Hospital in Port Blair. It is a 500 bedded hospital. The Casualty ward was having 10 beds. About 40 patients were being attended to in Casualty ward every day. The hospital had twenty-three dialysis machines; but, they required some more dialysis machines. Otherwise, the hospital has good infrastructure. The health set-up in the UT had good call centre for ambulance. The call centre no. is 102. At the GB Pant hospital, they had 5 ambulances. On an average, 4 to 5 patients came from within the South Andamans and another 4 to 5 patients came from other islands, either by boat or by helicopter.

36. The hospital had a separate Tribal Complex for the PVTGs, having 7 rooms with total 14 beds. There were three Onge ante-natal patients on 3<sup>rd</sup> June, 16. They were staying with their families. The food for both the patients as well as the families was being provided by the hospital. The Tribal Complex had been declared as Tribal reserve under the rules as such, except for hospital staff, non-tribals were not authorised to enter the Tribal Complex. Overall, hospital had good infrastructure. The main shortage reported was inadequate number of Super Specialists. The Secretary, NCST left Port Blair in the afternoon of 3<sup>rd</sup> June, 2016.

37. This tour report was duly approved by the NCST at its 88<sup>th</sup> meeting held on 23<sup>rd</sup> August, 2016 at NCST Headquarters.

  
ए. के. अग्रवाल/A. K. AGARWAL  
सचिव/Secretary  
राष्ट्रीय अनुसूचित जनजाति आयोग  
National Commission for Scheduled Tribes  
भारत सरकार/Govt. of India  
नई दिल्ली/New Delhi