



# **Jaisalmer & Jodhpur Visit Report**

## **Complaints of Infanticide, Foeticide & other Child Rights Violations**



**National Commission for Protection of Child Rights**  
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**Visit Report By:**

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## Executive Summary

Symbolically worshipping female as a Goddess in innumerable forms in India has ironically boiled down to bestowing them a low status by the predominantly patriarchal society with a preference for a son. The deep-rooted prejudices womenfolk face right through their life manifests in many ways. One of the most horrifying ways is their elimination through sex selection. In Rajasthan, the 2011 provisional census shows the child sex ratio to be 926 females per 1,000 males (the average national sex ratio is 940 females per 1000 males<sup>1</sup> in Rajasthan). Though there has been an increase in Sex Ratio as compared to Census of India, 2001 which was 821:1000<sup>2</sup> but still it is far below the national average. Here, a strong patriarchy and a value system based on 'son preference' make daughters unwanted. Further, the practice of dowry impoverishes families who consider the girl child an economic liability.

Recently, a shocking new trend has come to light. Many women in Rajasthan go to government hospitals for delivery to get monetary benefits through government schemes like the JSY, a scheme aimed at reducing infant and maternal mortality and promoting institutional deliveries by giving every child born in a government hospital a sum of Rs 1,400/-. However, soon after leaving hospitals, the newborn girls disappear mysteriously, never to be seen again.

The National Commission for Protection of Child Rights (NCPCR) received several complaints of female infanticide/foeticide from Jaisalmer and decided to investigate the matter. Also a case of *suo motu* cognizance of a report published in an Outlook magazine dated May, 09, 2011 necessitated constitution of a team for on the spot inquiry. With a sharply skewed sex ratio of 849 females per 1000 males<sup>3</sup> in Jaisalmer. It was obvious that somewhere the practice of sexual preference is prevalent in this area.

The constituted team visited Jaisalmer and Jodhpur from September 15-17, 2011, to inquire into the matter. Although the cases of reported female infanticide had been investigated by the district government and through various teams the deaths were found to be from natural causes, the team found several gaps & discrepancies in the statements given by the ANMs in charge of these cases when they visited the Chhor, Sitadoi and Devra villages and the Devikot Primary Health Centre. Official records pertaining to ANC for pregnant mothers and childbirth were not maintained properly. In some cases, records related to these baby girls were missing and could not be produced, arousing the suspicion of cover up attempts.

It therefore directed the District Administration of Jaisalmer, Rajasthan, to reinvestigate the circumstances leading to the death of three baby girls believed to have died soon after leaving the health facilities in normal condition. They have been asked to submit a report to the Commission within the next 10 days.

The Commission also rescued nine children, the youngest being three years old, working in the mines in Vijaynagar village, Pithola gram panchayat, Jaisalmer district. The police, reluctant at first to file a FIR against the contractor, finally did so after the insistence of the Commission

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<sup>1</sup> Census of India, 2011

<sup>2</sup> Census of India, 2001

<sup>3</sup> Census of India, 2011.

team which followed up the matter with the District Collector. The contractor was arrested within three days.

Another grave violation of child rights found by the team was the solitary confinement of a 16 year old boy in a small room in the Children's Home in Jaisalmer. The Commission was distressed by the denial of basic rights and facilities to the child and asked the District Administration to restore his entitlements immediately.

In fact the Commission found there were no proper procedures for the rehabilitation of children rescued from various forms of abuse and in need of protection. The District Administration of Jodhpur and Jaisalmer have been asked to initiate rescue operations by the district labour office and streamline functioning of CWCs. Further, the officials have been directed to map the number of children out of school and thus in the labour force in their respective districts within 30 days.

Several other issues including the high prevalence of child marriage, stigma and discrimination against children infected and affected by HIV and AIDS, inadequate ICDS services, out of school children and weak implementation of the PCPNDT Act leading to female foeticide were also taken up with the district administration including the Collector, representatives of the departments of social welfare, women and child, labour and police of both Jaisalmer and Jodhpur districts.

The Commission has given specific recommendations to redress the problems and will review the action taken after two months with the Chief Secretary, Rajasthan. It has also asked the local NGOs to cooperate with the State Government in a synergistic way to achieve the goal.

## Introduction

National Commission for Protection of Child Rights received several complaints of incidence of female infanticide and female foeticide and other child right violations in Jaisalmer and Jodhpur.

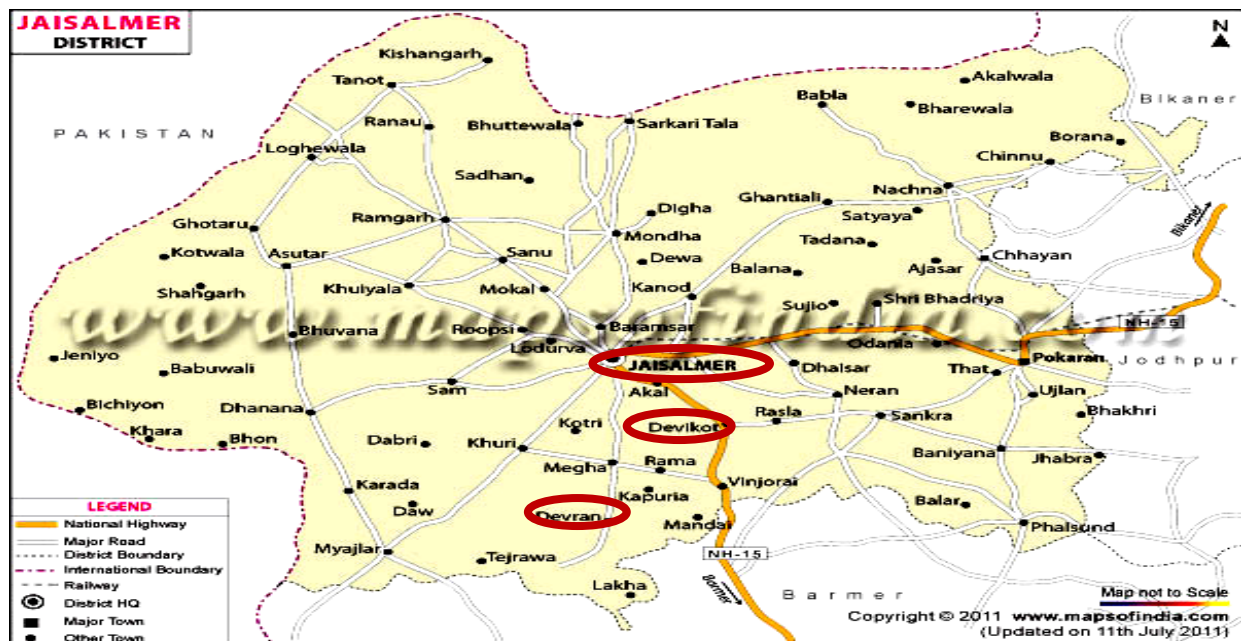
The Commission took cognizance of these complaints and constituted a team to investigate the matter. The team comprising Dr. Dinesh Laroia, Mr. Vinod Kumar Tikoo, Dr. Yogesh Dube, Members NCPCR, Shaifali Avasthi, Consultant, NCPCR, Swapna Majumdar, Media Consultant and Yogesh, Vikalp Organization, visited Jaisalmer and Jodhpur from September 15-17, 2011, to get first hand information about these child right violations.

<b>Date of Visit</b>	<b>Activities</b>
<b>15.09.2011</b>	<b>Visit to Jodhpur</b>
	<ul style="list-style-type: none"><li>• Meeting with various NGOs working on child rights issues and the state officials from Departments of WCD and Health, who were present at the Circuit House by default.</li><li>• Visit to Bhat Basti, Jodhpur, a hamlet of about 100 marginalized families employed in stone quarries in the vicinity.</li></ul>
<b>16.09.2011</b>	<b>Visit to Jaisalmer</b>
	<ul style="list-style-type: none"><li>• Meeting with various NGOs working on child rights</li><li>• Visit to Chhor, Sitadoi, Devda villages where cases of female infanticide have been reported and Devikot PHC</li><li>• Visit to Vijaynagar village, Gram Panchayat Pithola, Jaisalmer.</li><li>• Visit to Children's Home-Rajkiya Samprekshan Aivam Kishore Grah – Jaisalmer</li><li>• Meeting with District Collector and concerned officials from other departments</li></ul>
<b>17.09.2011</b>	
	<ul style="list-style-type: none"><li>• Meeting with District Collector, Jodhpur and relevant officials</li></ul>

## Basic Indicators, Jaisalmer:

Total Population	6,72,008	Census of India, 2011
Percentage Decadal Growth Rate of Population (2001-11)	32.22	Census of India, 2011
Sex Ratio	849	Census of India, 2011
Population density per Sq. Km	17	Census of India, 2011
Total Population (0-6yrs)	1,30,400	Census of India, 2011
Total no. of literates	3,14,345	Census of India, 2011
ICDS Centres, Jaisalmer	566	WCD department, Rajasthan <a href="http://wcd.rajasthan.gov.in/Anganwadi_Search.aspx">http://wcd.rajasthan.gov.in/Anganwadi_Search.aspx</a>
PHCs	14	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Dispensaries	3	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Sub- Health Centre	137	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
M.C. W/Dias Centers	1	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Private Hospitals	1	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Total No. of Police Station	13	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Police Chowki	14	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Total No. of Schools	1530	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Primary Schools	998	<a href="http://jaisalmer.nic.in/statmn.htm">http://jaisalmer.nic.in/statmn.htm</a>
Child Welfare Committee	1	Chairperson CWC
Children Homes	1	Chairperson CWC

## Map of Jaisalmer:



## Meeting in Jodhpur, September 15, 2011

On the first day, the NCPCR team held a meeting with several NGOs working on issues of child rights to get an update on the status of children in Jodhpur. Officials from the State Departments of Women and Child Development (WCD) and Health were also present and as such participated during this interaction. These inputs from NGOs included:-

### Issues raised by the NGOs in Jodhpur district

- **Female Foeticide/ Infanticide:** As in many parts of the country, modern technology had facilitated sex determination in Jodhpur too. Officials of the Health Department stated that in the past one year, about 98,000 women had registered for ANC. However, only 70,000 deliveries had taken place, while health officials claimed the rest were home births. The absence of a proper system to track pregnant women is not in place therefore it cannot be ascertained that sex selective procedures are not prevalent here

Health officials who pointed out that they had a SMS system to track pregnant women and agreed that it was not a tenable system as it could not track or prevent the practice of Sex- determination.

According to the CFAR, a NGO, working on female foeticide, informed that their sting operations in 12 districts of the state to expose doctors conducting sex determination tests had found several medical centres as guilty of this act. In Jodhpur, one such operation had been carried out. However, the centre here has been closed by the state government on the grounds that Form F, a mandatory requirement under the PCPNDT Act, had been wrongly filled. They also vehemently talked about the non- supportive government structure in their Endeavour.

In fact, NGOs present at the meeting contended that there were many anomalies in FORM F submitted by doctors. This form has to be filled by doctors and signed by the pregnant woman.

Health officials stated that institutional deliveries had increased by 50-60% over the last 10 years. At present, there are 130 sub centres covering an approximate population of 5,000 and being run by ANMs who had been given only one training module. Transport facilities were available for pregnant women and so far 1115 vehicles had been provided free of cost. The officials also said that medicines and food were given for three days by the State for women with normal delivery. In the remote areas, the health services were being provided by the ANM. They said only 10-15% of the pregnant women population is being covered by the hospitals and at one CHC there was no medical officer.

- **Children affected/infected by HIV/AIDS:** NGO–Jodhpur Network of People Living with HIV Sansthan raised the issue of 56 children being infected by HIV positive blood through transfusion at a Jodhpur government hospital. Another deprivation of their rights was the refusal of doctors to provide second line ART on flimsy grounds. Discrimination and stigma against HIV positive children has led NGO care for these children, 27 such children were forced to shift them from one building to another more than half a dozen

times in the past 2 years on account of social stigma. The NGO claimed that since there was no proper shelter home for them, they had to vacate the building where the children were housed as soon the landlords came to know about their status of living with HIV. The team was informed that the State Government has been approached several times for providing a plot or a Government building to shelter such children, but of no avail.

Health officials present stated that the Astha Card, under a government scheme enabling the children to avail ART from any nearby Health Centre, was being provided to the infected children. The team was also informed that relatives/caretakers looking after such children who were doubly orphaned are being provided with a monthly amount of Rs. 675/- under the state government's Palanhar Yojana programme. There are *approx.* 650 HIV positive children in the district and 200 in Jodhpur city.

- **Child Labour:** The team was apprised that the children continue to be employed unabated in various forms of labour in the district. In addition to being made to work in block printing industry, stone extraction quarry, dhabas, children are also seen holding gas lanterns in marriage processions. There seemed to be a laxity in getting children out of labour with only one Labour Enforcement Officer in Jodhpur district, who thought it was not within the State jurisdiction to enforce prevention of child labour. NGOs pointed out that children worked in mines, crushing stones, drilling and making cubes. In case of any inspection, these children would be hidden. These children stay in the mines and are deprived of education and health facilities. Particularly worrying was the state government's decision to stop checking for incidence of silicosis in these mines since children are exposed to lung infection.
- **Child Marriages:** Despite laws banning child marriage, it continues in especially the rural areas as was informed to the team. Families have reportedly changed their strategy to escape the legal wrath. Earlier, the child marriages took place on the eve of Akkha Teej and other important festivals. Since this was well known, there was a danger of it being stopped/annulled by State officials. Now, the marriages are reportedly conducted on the weekends, usually Saturdays, when government offices are closed on the succeeding day, so that officials can't interfere. Photographs or any other material which can be used by the police or the government department to pursue a complaint in this regard are avoided or destroyed by families.
- **Children at Railway Platform:** Many children run away from their homes as they are abused at their homes and take refuge at railway platforms. Surprisingly, the team was informed that according to state laws, unless the child is an orphan he cannot be shifted to shelter homes (which is a misconceived notion, and no one could substantiate it). NGOs working with railway children said that these children become addicts by inhaling whiteners. However, the railway police force overlooked such cases of substance abuse.
- **Malnutrition:** The ICDS programme had not been able to cover the entire child population in the district leading to a number of children suffering from malnutrition. So far, only about 30 cases had been identified by the ICDS workers and they were referred to the Malnutrition Treatment Centre in the District Hospital by the paediatricians. The



number of AWCs in the district was not sufficient for the entire child population. Over 80% of the AWWs were illiterate and were therefore unable to plot growth charts or diagnose malnutrition. The State Government had been unable to provide educated AWWs from the community and despite a relaxation in eligibility criteria from class 10<sup>th</sup> pass to class 8<sup>h</sup> pass, AWWs had been hard to get. At present, for 200 AWCs there is only one CDPO and for 13 AWCs, 6 supervisors have been appointed.

NGOs contended that marginalized children are being discriminated during distribution of food in Barmer district which was dominated by the Dalit community. There was no ICDS facility for these children.

- **Child Health:** NGOs reported that communities had to travel a distance of at least 35-80 kms to access health facilities. Even officials of the District Administration can cover only one village in a day. Moreover, there was only one Medical Officer at the PHC level. According to officials, the state government had appointed 80 doctors for Jodhpur & Jaisalmer districts, but only two had reportedly joined duty since. They said the total immunization coverage reported by the Health Department official for 3<sup>rd</sup> DPT was 80-85% whereas the State average for Rajasthan was 38.7%.
- **Child Welfare Committees:** The CWC in Jodhpur has been active but it still does not have a permanent office space which does hamper its functioning. Insufficient networking and coordination with NGO's also hampers its functioning.



*NCPCR interaction with the NGOs working in the areas of child rights violations in Jodhpur & Jaisalmer districts. State Officials from WCD, Health Department also participated in the meet on 15<sup>th</sup> Sept. 2011 at Circuit House, Meeting Hall, Jodhpur*

**Meeting attended by various NGOs working on child rights issues and the state officials from Departments of WCD and Health on 15.09.2011 at Circuit House at Jodhpur.**

S.No.	Name	Designation	Ph. No.	e-mail	Address
1.	Sangeeta Sen Gupta	Program Manager	9351304604 Phone: +91 291 2703160 Fax: +91 291 2703956	<a href="mailto:mlpctrust@gmail.com">mlpctrust@gmail.com</a> <a href="mailto:info@mlpc.in">info@mlpc.in</a> Website: www.mlpc.in	19/9 B, Choupasni Housing Board Jodhpur, Rajasthan India - 342008
2.	Urmila	District Coordinator	9309304100 91-9829569826, 09413341943, 09928912311	<a href="mailto:jodhpurCFAR@gmail.com">jodhpurCFAR@gmail.com</a> <a href="mailto:cfarjaipur@gmail.com">cfarjaipur@gmail.com</a>	Centre for Advocacy and Research, Bharti Bhawan opposite , Mahila Police Thana, Near Sati Mata Mandir, Ratnada, Jodhpur
3.	Usha	Programme Director	9414146408		Vikalp Sansthan, 257, near new lokogate opposite Police Line Ratanada, Jodhpur
4.	Govind Singh Rathore	Sambhali Trust Women and Girls Empowerment, Jodhpur	9828089293 0091-(0)-291-25 12 385 0091-(0)-98 28 089 293	<a href="mailto:rathore.jodhpur@gmail.com">rathore.jodhpur@gmail.com</a> <a href="mailto:info@sambhali-trust.org">info@sambhali-trust.org</a> <a href="http://webadmin">webadmin</a>	1st Old Public Park, Raika Bagh 342001 Jodhpur, Rajasthan INDIA
5.	Lalit Rao	Deputy Director, ICDS, Jodhpur	9252599369		
6.	Dr. Ramesh Mathur	CM&HO, Senior Specialist (TB & Chest)	9829537946		18 E/567, CHB, Jodhpur
7.	Asha Bothara	Representative	9351314400 0291- 3251997,2434166		Meera Sansthan, Jodhpur, Baktawar Malji Ka Bagh ,Chopasni Road, Jodhpur, Rajasthan ( North ) - 342003
8.	Dr. Tara Laxman Gahlot	Member	0291-2548631		Child Welfare Committee, inside Merti Gate, Jodhpur
9.	Rashida Bano	Representative	9214410769		Marwat Women's Welfare Society Nayi Sadak Bombay Dying
10.	Shashi	Representative	9828379007 91 291 2785 116, 91 291 2785 317 Fax: 91 291 2785116	<a href="mailto:email@gravis.org.in">email@gravis.org.in</a>	Gravis 3/437, 458, M. M. Colony Pal Road, Jodhpur 342 008, INDIA Phones:

11.	Bhawana Pareek	Representative , Jodhpur Network of People Living with HIV Sansthan,	9414267718		Jodhpur Network of People Living with HIV Sansthan, - CH-8,1st Floor, Choupasani Housing Board ,2nd Pullia, Opp-Preranna Secondary School, JODHPUR
12.	Aarti	Representative, Jodhpur Network of People Living with HIV Sansthan,	9462283970		Jodhpur Network of People Living with HIV Sansthan, CH-8,1st Floor, Choupasani Housing Board ,2nd Pullia, Opp-Preranna Secondary School, JODHPUR
13.	Kriti	Rehabilitation Psychologist, Vikalp Sansthan	96944-26078	<a href="mailto:kriti_rkl@hotmail.com">kriti_rkl@hotmail.com</a>	Vikalp Sansthan, 257, near new lokogate opposite Police Line Ratanada, Jodhpur
14.	Ganpat Lal Mehra	Mukhya Karyakari	9413060378 Fax: 02988-220097	<a href="mailto:idea_orgraj@yahoo.com">idea_orgraj@yahoo.com</a>	Institute of Development, Education and Awareness, Near New Bus Stand, Balotara
15.	Tola Ram Chauhan	UNNATI	9983655255 +91-291-3204618	<a href="mailto:jodhpur_unnati@unnati.org">jodhpur_unnati@unnati.org</a>	650, Radhakrishnan Puram, Near Laharia, Resort, Chopasni Pal Bypass Link Road, Jodhpur 342 008. Rajasthan
16.	Rana Sen Gupta	Representative	9414133141 +91-(0)291-2703160, Fax: +91-(0)291-2703956	<a href="mailto:info@mlpc.in">info@mlpc.in</a> Web: <a href="http://www.mlpc.in">www.mlpc.in</a>	Mine Labour Protection Campaign, MLPC, 19/9B, Choupasni Housing Board, Jodhpur-342008 (Rajasthan), India
17.	Dinesh Joshi	Representative	9413577969		Jodhpur Network of People Living with HIV Sansthan, CH-8,1st Floor, Choupasani Housing Board ,2nd Pullia, Opp-Preranna Secondary School, JODHPUR
18.	Rajendra Soni	Advocate	9928066420	<a href="mailto:betibachao@gmail.com">betibachao@gmail.com</a>	HRLM Jodhpur
19.	Yogesh	Representative	9414105995	<a href="mailto:vikalporg@gmail.com">vikalporg@gmail.com</a>	Vikalp Sansthan, 257, near new lokogate opposite Police Line Ratanada, Jodhpur
20.	Madhu Bala Rajpreet	Member, Child Welfare Committee	9414247643		

## Visit to Bhat Basti

The NCPCR team decided to visit Bhat Basti, a slum hamlet of about 100 families working in the mines after complaints of child right violation made by one of the NGOs working for children in the mining industry were reported. Located on the outskirts of Jodhpur city (barely 12 kms., from the city). The hamlet was adopted by Hindustan Petroleum Corporation in collaboration with Indian Child Protection Council about five years ago and had constructed a community kitchen. The support has since been withdrawn and about 30-40 children in hamlet

do not receive any of their entitlements. The slum does not have any access to either drinking water or to AWC/Mini AWC.

The slum today is nobody's child. The main source of income for the community here is quarrying and they had no qualms in admitting that they get their children to crush stones and load trolleys who are paid pittance like Rs 30/- to 50/- per day by the owners. No State Government official was reported to have visited the site in the past two years. The families here have no access to any facilities since they are cut off from the city. The inhabitants informed the team that education for their children was a distant dream. Not only were children deprived of education, many appeared undernourished. Since the district administration seems to have overlooked this cluster, basic healthcare under

*Located on the outskirts of Jodhpur city Bhat Basti (barely 12 kms., from the city). The hamlet was adopted by Hindustan Petroleum Corporation, but today does not receive any support from any quarters including the State Govt. and is devoid of basic amenities including water, AWC, mini health centre etc.*

the ICDS programme was also lacking. The Commission found a lack of proper hygiene and sanitation, problems of clean drinking water and no electricity. Families also admitted that they married their children, especially girls, young.



*NCPCR Members interacting with the residents of Bhat Basti*

## Interaction with NGOs in Jaisalmer September 16, 2011

On the second day of the visit (September 16, 2011), a meeting was held in Jaisalmer with local NGOs working on child rights to get an insight into the issues requiring attention, in particular to the reported three suspect cases of female infanticide which took place after the families had accepted funds from the government under Janani Suraksha Yojana. The team which had planned a visit to the villages from where the cases had been reported also sought information of other violations of child rights. Some of the issues that were highlighted included:-

- **Female Foeticide/Infanticide:** The NGOs informed the team that the sex ratio was skewed against the girl child especially among the Rajput community. They said that various ways were adopted to kill the girl child including forcible inhalation of opium, stuffing of cotton in the mouth, burying them in a hot sand pit or drowning them in milk or hot boiling water. They complained that very little was being done for raising awareness among the community to stop this inhumane practice. It was pointed out that of the 101 villages in the panchayat, the mindset in 45 villages continued to be feudal and should be considered vulnerable for girls. The problem of incomplete forms required to be filled under the PCPNDT Act was also emphasized.
- **Child Labour:** Efforts to rescue child labour had not been made said the NGOs despite children openly working in mines, block dyeing & printing units, in offices and guest houses as errand boys, in hotels & dhabas and also employed to help tourists ride camels at Sam tourist centre was also raised.
- **Poorly functioning Anganwadi Centres:** NGOs contended that rations and midday meals required to be given to the children in the AWCs were irregular. The AWC worker was mostly illiterate and did not receive any kind of training
- **Right to education violated:** The school in Dhani village had been closed and needed to be looked into. There was only 20% school enrollment reported in the district.
- **Children with special needs:** There are 1,100 children in the district with special needs. According to NGOs, these children faced a problem in getting enrolled in age specific classes. The specific case of refusal of admission to a blind child was cited. It was only after the NGOs pursued the case with higher authorities that admission was given.
- **Health Care & immunization coverage:** Only 20-25% of the children were reported to have been covered under the mandatory immunization.



*NCPCR team interacted with the NGOS at Jaisalmer Circuit House on 16<sup>th</sup> September, 2011*

**Meeting attended by various NGOs working on child rights issues dated 16.09.2011 at Circuit House at Jaisalmer**

S.No.	Name	Designation	Ph. No.	e-mail	Address
1.	Jagdish Tripathy	Administrator	02992-253191	<a href="mailto:jagdishtripathy43@gmail.com">jagdishtripathy43@gmail.com</a> <a href="mailto:childlinejaisalmer@gmail.com">childlinejaisalmer@gmail.com</a>	Childline- India Jaisalmer, CECEOEDON, 648, Aachalvanshi Colony, near Vyas Chattrejeen, Jaisalmer
2.	Arsum Singh Rajawat	Central Coordinator	9828129675	<a href="mailto:childlinejaisalmer@gmail.com">childlinejaisalmer@gmail.com</a>	Childline- India Jaisalmer, CECEOEDON, 648, Aachalvanshi Colony, near Vyas Chattrejeen, Jaisalmer
3.	Prem Lata Bhatia	Samaj Sevika, Jaisalmer			
4.	Meera Paliwal	Representative	9828809823		Ekal Nari Shakti Sansthan (Savera)
5.	Suresh Kumar	Representative	9782942630		We Can
6.	Sakhi Mohammad	Project Coordinator	978490887	<a href="mailto:wecanchandan@gmail.com">wecanchandan@gmail.com</a>	We Can
7.	Ashok Sharma	Representative	9610421973	<a href="mailto:asharma2020@gmail.com">asharma2020@gmail.com</a>	Urmul Trust, Ganga Nagar Road, Bikaner, near Roadways Bus Stop, Jaisalmer
8.	Bhaum Singh, Bhati	Representative	9414743472		Sarvahit Karini Sansthan, Jaisalmer
9.	Mr. Nakhat Dan Detha	Representative	9829446228 02992- 250702 <a href="mailto:skss_jsmr@yahoo.co.in">skss_jsmr@yahoo.co.in</a> <a href="mailto:ndetha@rediffmail.com">ndetha@rediffmail.com</a>  Website on Karmayog - <a href="http://www.karmayog.org/ngo/skss/">http://www.karmayog.org/ngo/skss/</a>		Semant Kisan Sahyog Sansthan 1207 kandhare pada madarsa rod jaislmer post box 21, Rajasthan,, Jaisalmer - 345001 Rajasthan, Karmayogi : kapil gour
10.	Satyanarayan Shyor		9214425635		
11.	Magharam Kadela	Marketing Manager	9414410491	<a href="mailto:mrkadela@gmail.com">mrkadela@gmail.com</a>	Ragsutrakar, PO Shri Mohangath, , Jaisalmer, Rajasthan- 345033

The team was subdivided to look into various issues at the same time.

**Team A:** Dr. Dinesh Laroia, Shri Vinod Kumar Tikoo, Swapna Mazumdar, Yogesh, to inquire into complaints of female foeticide / infanticide

**Team B:** Dr. Yogesh Dube, Shaifali Avasthi to inquire into complaints of child labour & institutional care

### *Team A*

#### **Visit to Villages Reporting Female Infanticide**

In order to make best use of the limited time available, NCPCR Members Dr. Dinesh Laoria and Mr. Vinod Kumar Tikoo, along with Yogesh from NGO Vikalp and Media Consultant Swapna Majumdar, visited the villages where cases of female infanticide had allegedly taken place even after accepting incentives from the government under Janani Suraksha Yojana for institutionalized delivery.

#### **Visit to Chhor Village**

The first village visited was Chhor. It was reported that a healthy girl child born to Bhanvri Devi, a resident of Chhor village, died soon after her mother reached home after being discharged from the Devikot primary health centre. When the team questioned the ANM who had recorded the case, they were informed that the child died of natural cause. However, she could not provide the registers recording the details of the child. She claimed her records were kept at the Devikot PHC.



*Investigation of the issues pertaining to Bhanvri Devi by Dr. Dinesh Laroia and Shri Vinod Kumar Tikoo. The AWW claimed to have known the family of Bhanvri Devi and confirmed the baby died of natural causes. The ANM stated the ANC register and the other records were kept at Devikot PHC*

The team found that neither the ANM nor the AWW were trained in providing services. The AWW was completely illiterate and could not plot growth charts. The ANM was not aware of immunization process. She claimed that she has recently joined. On enquiring about the ANC

registers & other records, the team was informed by ANM that the records are kept at the Devikot PHC and could be verified there. The AWW informed that she knew Bhanvri Devi as a family friend and that her infant had died due to natural causes. Although the school in the village with about 250 children in classes I to VIII was well maintained, the fact that two children of Class 6 who were reportedly married indicated that they needed to pay greater attention in raising awareness about stopping the tradition of child marriage. The custom of making children take an oath that they would not marry until the legal age needed to be more than just a formality.

### Visit to Devikot PHC

The Devikot PHC, headed by only one MBBS doctor and one AYUSH doctor, is six bedded facility but had admitted 15 patients. Many patients were lying on the floor with drip stands propped next to them. There was no light or proper equipment in the labour room. Hygiene was poor. Majority of the children and their parents admitted they were suffering from malaria and viral. The team was informed that there had already inquiries into the death of the girl child born



*Patients lying on the floor at Devikot PHC*

to Bhanvri Devi at the Devikot PHC by the SDM, CDPO and MOIC. All three had concluded that the death was from natural causes. On the first postnatal visit when the ANM visited the family at their residence the next day she was told that the baby has died last night and last rites have already been performed. But here again, the same ANM who was questioned at Chhor Village, was not able to produce the postnatal registers and other records in front of the team despite having claimed earlier that these would be available at the PHC. This time she said the records had got left behind at her house in Barmer district. Several inconsistencies in her statements in presence of the District Health Officials accompanying the team, raised suspicion but due to paucity of time the same could not be probed deeper. This matter was taken up later with the District Administration.



## Visit to Village Sitadoi

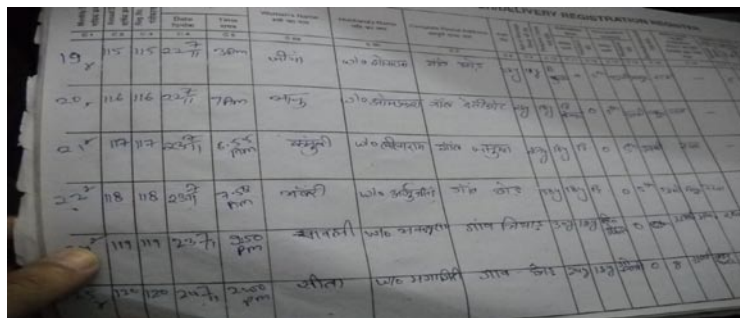
The team visited the village to inquire into the case of Mahim Kanwar, who gave birth to a baby girl on November 30 last year and availed the JSY funds. However, the inquiry revealed that when the ANM went on a follow up, she was told that the infant had died on December 1. The team found that Ms Mani Devi, the ANM, did not belong to Sitadoi but was a resident of Dungarpur. She had pasted the registers containing the details of the mother and her daughter Laxmi Kanwar. The ANM claimed that the pages had been pasted because she had erroneously made some entries related to malaria instead of pregnancies.



*Investigation of the records in case of Mahim Kanwar by  
Dr. Dinesh Laroia and Shri Vinod Kumar Tikoo*

In this case too, official inquiries by the SDM, CDPO and MOIC had taken place. Their conclusion, in this case too, had been death due to “natural causes”. Sudden death in “a healthy baby weighing 3 kg at birth needs to be probed from all angles. Their suspicions were also raised when the ANM claimed that the baby had already been buried when she went on the follow up visit the next day. They decided detailed investigation in the cause of death was needed as was the reasons for the pages of the register being glued together, which was ordered to be seized and to be produced in the meeting with DM and other District Officials at the Collectorate scheduled at 4.30 PM.

Further examination of the registers revealed records of spontaneous abortions of 12 week fetuses. The fact that the women undergoing these abortions already had two or three daughters, sex selection could not be ruled out by the team.



*Glued pages*

## Visit to Devra Village

Devra village is 80 kms from Jaisalmer and is dominated by the Bhati Rajputs. This village also reported a case of female infanticide which was investigated by the state officials. The body of the child was exhumed and her viscera sent for forensic examination. It was revealed by the forensics that the exact cause of death could not be ascertained.



*Interaction with the Village elders in Devra Panchayat Bhawan on the incidence of Female Foeticide.*

The village elders of the community denied any case of female infanticide had taken place when questioned by the team. In fact, they claimed it was a rumour and girls were not killed in their village. However, boys significantly outnumbered girls in this village. When the team asked for the AWW or her helper (AWH), they were told neither were available although both resided in the village. They were told that both the Anganwadi Centres in the village were locked and records could not be inspected.

The team also found suspicious the manner in which one of the villagers was sought to be projected as the head master of the school. The village had one primary school and one secondary school for boys and another one for girls. The team was told that 107 girls were enrolled in the school. However, no records were shown so it could not be verified whether these girls belonged to the Bhati Rajput community or to other communities. The team was told that there were 220 families in the village out of which 50 were from the Bhati community.

The sarpanch of this village is a woman (being a reserved seat for women). Since there was strict code of women not permitted to appear before menfolk, she was reluctant to come in front of the team. However, team member Ms. Swapna Majumdar went to visit her at her house. The interaction revealed that she belonged to the Bhati Rajput community and was unanimously chosen from this seat reserved for women. She was completely illiterate and could only sign her name. All her work was handled by her husband. Although the sarpanch, now 35 years old, has been married for the past 20 years, she has very young children aged four and one. And, not surprisingly, both were reported to be boys.

The team was told that in one AWC that out of the 29 children registered, 17 were girls. But, again, it was not clear which community they belonged to. The Bhati community was requested to furnish the Commission with a list of families stating the number of children and their gender.

Although a list was furnished by the team in the evening and showed 49 Bhati families who had **93 boys and 52 girls**. However, this list did not show the age wise distribution of girls. The

Commission has sought revalidation of the list and details of age and gender of the children especially in the 0-6 yrs of age.

### ***Team B***

#### **On the Spot Inquiry to rescue Child Labour working in stone crushing mines**

On visit to Vijaynagar village, Pithola gram panchayat, Jaisalmer district, children were found to be working in the stone crushing mines in the area. Children were paid paltry sums for loading stone trolleys. Basic facilities like water and electricity were missing and a school was about 2 kms away. Unfortunately, the community did not cooperate with the team. But the Commission managed to rescue nine children working in this mine. The children are;

1. Dhanu, 5 yrs, S/o Mr. Bediya
2. Mukesh, 3 yrs, S/o Mr. Behriyat
3. Alahrakha, 7 yrs, S/o Mr. Rungrala
4. Narendra, 10 yrs, S/o Mr. Mularam
5. Arjun, 4 yrs, S/o Mr. Mularam
6. Vikaram, 6 yrs, S/o Mr. Mularam
7. Sushila, 10 yrs, D/o Mr. Keshuram
8. Neena, 8 yrs, F, D/o Mr. Keshuram
9. Narma, 5 yrs, D/o Mr. Nugraram

The team was able to get a FIR registered against the contractor Mr. Raidmal Singh, who did not have the license for stone picking in this area. Incidentally, the police was initially reluctant to file the complaint but did so after the team took up the matter with the District Collector, as this was reportedly the first time in the history of Jaisalmer district that a FIR was filed against anyone under Child Labour.



*Rescue of 9 children involved in stone crushing in a mine by Dr. Yogesh Dube & Shaifali Avasthi*

Ironically, the team found Gajendra Kumar, 15, digging the road in front of CMHO's office under the employment of contractor Khar Singh.



*15 yrs old child digging the road in front of CMHO's Office.*

The team was also informed that child labour existed at Sonu Mines too but could not visit the site due to shortage of time. They were also informed that children lived in miserable conditions in Navodaya Vidyalay, a residential school in Mohangarh, Jaisalmer. Both the issues were later brought to the notice of the DC, Jaisalmer.

### Visit to Rajkiya Samprekshan Aivam Kishor Grah, Jaisalmer

Visit to the Rajkiya Samprekshshn Aivam Kishor Grah (Government. Children Home & Observation Home) revealed that both the Observation home and Children Home was in the same building. The Bal Niwas was running out of government building and accommodated 25 children against a capacity of 35.

Another grave violation of child rights observed by the team was the solitary confinement of Ravi (Rohtash), a 16 year old child, in a small room in the Home. Distressed by the denial of basic rights and facilities to the child, the team directed the District Administration to restore his rights immediately. Interaction with the children of Bal Niwas revealed that that there was no cooler and the children had to clean their own utensils and clothes and there was a duty chart for every child to clean their rooms. The walls were in a dilapidated condition and no one seemed to care about the repairs. The children had not been provided with clothes. Sometimes 10-12 children were accommodated in a room with only 4-5 beds. The team also observed that sports equipment and toys available in the campus were in a packed condition and had never been used.



*The dilapidated condition of the walls and the roof of the Children/Observation Home Jaisalmer*



*Team member Dr Dube interacting with the children.; Confinement of a 16 year old child of the Rajkiya Samprekshshn Aivam Kishor Grah; Duty chart depicting allotment of duties of the children which includes cleaning the rooms*



*Play equipments packed in the rapper and never allowed to be used by children in the Rajkiya Samprekshshn Aivam Kishor Grah.*



*The electric sockets & switches that need repairs.*

## Meeting of the Team with District Administration, Jaisalmer, 16<sup>th</sup> September, 2011

### Focus of discussion, Observation of the Team and Recommendations made

A meeting was held with the District Magistrate and other concerned district officials of the departments of health, social welfare labour and police. The discussion centered around the issue based problems and focused on the concerted efforts to be undertaken in combating the same:-

#### Female Foeticide & Infanticide

Officials present stated that there had been an increase in the number of institutional deliveries with pregnant women being regularly registered. Details of sonography machines seized were reported to be available with the administration. The district administration denied the three cases investigated were of female infanticide claiming that the official inquiry had found the deaths were due to natural causes.



*NCPCR Team interacting with the District Administration at DM office, Jaisalmer, 16<sup>th</sup> Sept 2011*

The Team was not satisfied with the statements given by the officials and shared their findings which were contrary to the official claims. The DM was informed that although the cases of reported female infanticide had been investigated by the district government and the deaths found to be from natural causes, the team had observed several gaps & discrepancies in the records and statements given by the ANMs in charge of these cases, when they visited the Chhor, Sitadoi and Devra villages and the Devikot primary health centre. The observation of the Team was conveyed to the DM and other District Officials that the records pertaining to ante natal care services (ANC) for pregnant mothers and childbirth were not maintained properly. In some cases, records related to these baby girls were missing and could not be even produced (in case

of Chhor village ). The fudged ANC register seized from the Sitadoi village PHC was shown to the DM, and other officials by the Health Official accompanying the team.

The team also made strong observation underlining the need to take steps to combat the alarming Low child sex ratio in a particular community.

**The recommendations made include;**

- **Reinvestigate Deaths:** The DM has been asked to arrange reinvestigation of the circumstances leading to the death of three baby girls believed to have been killed by their families soon after leaving the health facilities. The District Administration has been directed to submit a report to the Commission within the next 10 days. (The D.M. instantly constituted a team of SDM, CDMO and RCHMO to look into the matter). Preparing detailed report on Bhati Community, it has been advised to send the complete report of no. of families, no. of children with their age and sex of Bhati community staying at Chhor village.
- **Tracking system needed:** A system to back track pregnant women to be put in place. There have been incidences of women travelling from as far as Jaisalmer for sex determination at centres in Jodhpur, since the only Sonography machine in the Government sector and three machines in the private sector ( Fourth machine has been confiscated ) in Jaisalmer, do not conduct sex determination tests. There seemed to be a nexus operating in the area for referral of such willing pregnant women to Jodhpur where approx 120 such machines are operating. The team directed the D.M to take up with Jodhpur D.M. for a strict watch in this case in Jodhpur on such labs reported to be involved in sex determination tests.
- **Training for ANM and AWW:** Better training for ANMs so that they have clear cut guidelines and can improve knowledge about their duties. Illiterate AWWs need greater attention so that they can plot growth charts. Of the 824 AWCs registered, only 627 are running. About 197 AWCs are not working because of non availability of AWWs. This must be looked into and staff to be appointed on an urgent basis so that the children are not devoid of their basic entitlements.
- **Record maintenance:** The team's observation on the maintenance of records as very shoddy in the AWCs as well as the ANCs was conveyed to the District Administration, and directed that a proper mechanism be adopted to make surprise checks in all the AWCs and the ANCs at least once in three months with a reporting system and retracing the action taken.

- **Focus on physically challenged & children with special needs:** Admissions must be ensured and special equipments for these children must be made available to children with special needs as envisaged in the SSA scheme. The district administration has been directed to provide the commission with data on children with special needs within two months.
- **Rescue & Rehabilitation of Child Labour:** Children to be immediately rescued restored and rehabilitated from the stone crushing mines. The labour department should trace these children and produce them before the CWC. The labour department must take cognizable action against the contractor who has been found to be engaging child labour. The amount of recoveries ( Rs 20,000/) made from the employers and the amount to be released by the State Government (Rs 5000/) must be credited to the District Child Welfare Fund and ultimately utilized for the benefit of such rescued, restored and rehabilitated children. The young child (Gajendra Kumar) seen digging a road must be rehabilitated and the contractor penalized. Data on child labour engaged in Sam block for tourist camel rides to be mapped and provided by the State Government to the Commission in three months' time.
- **Protection of Children in Homes:** The team observed that the Government run Children / Observation Home was in a very dilapidated condition and needed immediate repairs. The broken electric sockets & switches made the young children very vulnerable to the dreaded and dangerous electric shocks.

The Commission directed that the necessary repairs to the Children/Observation Home be undertaken on an urgent basis. The necessary entitlements including clothes, chappals/shoes, toiletries, play equipments, etc. to the children be made available on an immediate basis. Arrangements be made for the Observation Home and Children Home to be separate and the rights of the child kept in solitary confinement must be restored immediately.

**Meeting attended by various NGOs working on child rights dated 16.09.2011 at Circuit House at Jaisalmer**

S.No.	Name	Designation	Ph. No.
1.	Shri Mahaveer Prasad Swami	Collector & District Magistrate	02992-252201, 252202
2.	Ramesh Chandra Jainth	SDM Jaisalmer	
3.	Parshu Ram Dhanka	ADM Jaisalmer	
4.	Ganpat Lal RPS	Additional SP, Jaisalmer	9414010429
5.	P.L. Meena	Secretary, JSM	9950440845
6.	S.D. Ratnu	Coordinator, IEC, NREGA, Shambhuban RACNU c/o information and Public Relation Officer, Jaisalmer	9414760202
7.	Kamla Sharma	Deputy Director, WCD	9414274451
8.	Umeed Singh	CDPO, Sam Block	9414470038
9.	Lt Col. R.P. NAIN	Officer Commanding, SCLU	
10.	Dr. B.P. Singh	Health Officer	9414149319
11.	Rakesh Thana	Joint Labour Commissioner, Vijwal Niwas Outer- B Road, Jodhpur e-mail- djlcjodhpur@gmail.com	02912544142
12.	Pit Ram Yadav	L.O. Jodhpur	0291-2544142
13.	Jeetendra Singh Narula	ACEM, Jaisalmer	0291-2544142
14.	K.C. Meena	XEN PHED, District, Jaisalmer	
15.	Hari Ram	CE9TA to S8 L & M	
16.	Dr. AGM Purohit	CMHO Jaisalmer	
17.	Dr. Ramesh Mathur	Jt, DMHS Jodhpur	
18.	Ashok Modi	Chairperson, Child Welfare Committee JSM	9829255555
19.	O.P. Verma	PHED Jaisalmer	



## Meeting of the Team with Administration at Divisional Level, Jodhpur, 17<sup>th</sup> Sep., 2011

### Focus of discussion, Observation of the Team and Recommendations made :-

A meeting was held with the Administration at the Divisional Collectorate with the concerned government officials at the Collector's office, Jodhpur on September 17, 2011, to share some of the observations and get an update on the steps being taken to uphold child rights. It was shared with the district administration that since the district of Jaisalmer did not have the requisite number of labs (Jaisalmer has just 4 machines) for conducting the sex determination tests, there was reportedly some kind of nexus operating for referral of the pregnant women willing to travel all the way to Jodhpur which is reported to be a liberal centre (with 120 sonography machines) for getting the sex determination test conduct clandestinely. The team made several recommendations to protect child rights. These included:-



*NCPCR team interacting with the DC & District Administration at Collectorate, Jodhpur*

- **Female Foeticide & Infanticide Audit of Form 'F':-** While officials of the PNNDT cell said on account of complaints received by them, seven ultrasound machines had been seized during the period 2010-11, the Commission informed the Collector that there were huge discrepancies in implementation of PCPNDT Act. FORM F was not only not being filled correctly but there was no visible back tracking the registrations by the ANMs, which resulted in huge gaps in the registrations and the institutional deliveries in the two districts visited by the team. Therefore, there was a need to audit FORM F especially since many families came to Jodhpur from places as far as Jaisalmer to determine the sex of their unborn child.
- **Data on ANC registrations and Births:** It was pointed out by the Commission that comparable ANC registration data from private and government hospitals was needed to track pregnant women and check female foeticide especially in the cases of over 12 weeks old foetuses. According to the data given by the health officials, there was a gap between number of registrations and births. The Commission has sought data on total number of ANC registered and deliveries, ultrasound labs operational, MTP particularly the number of abortions conducted of women who were past 12 weeks pregnancy.

- **Advocacy & awareness generation:** Programmes to raise awareness by the government needs to be doubled in partnership with civil society groups operating in the district in the areas of concern.
- **Mapping of children excluded from Anganwadis:** There are 27 CDPOs and 13000 children in the project. The government must map the children who have been left out of Anganwadis. Special attention must be paid to *approx.* 100 families staying in a hamlet in the vicinity of Jodhpur whose children in the age group of 0-6 years have been deprived of education, healthcare and denied other basic rights. The health department must opt for mobile AWCs, mini AWCs or mobile crèches to include these children.
- **Malnutrition data:** The Commission has directed the district administration to provide the realistic data on the number of children referred from AWCs to Malnutrition Training Centres and percentage of prevailing malnutrition.
- **Protecting HIV positive children:** The team directed the government to protect the HIV positive children from stigma and discrimination. Not only must they be tracked but due arrangements be made to provide care, protection and shelter to the ‘double orphaned’ children suffering from HIV. The case of 27 HIV positive children who had to be shifted seven times in the past two years after their status became known must be looked into in as much as the request has already been reportedly made with the District Collector’s office. The commission directed the district administration to provide a status report in the matter within two months positively.
- **Mapping and Rescue, restoration & Rehabilitation of Child Labour:** The Commission directed the Labour department to rescue child labour by taking *suo motu* cognizance in coordination with the CWCs, especially for children reported to be working in stone crushers and on railway tracks. The Commission was surprised to hear that no case had been registered yet despite common knowledge of children being employed in various activities. It directed the department to map child labour and send the data within three months. The callous attitude of the DLC was particularly unacceptable.
- **Police Training of SJPU officers Essential:** The team was informed by the Police Commissioner that the Special Juvenile Police Units have been set up but the officials are yet to be imparted necessary training. The Police Commissioner was directed to organize a training course with the help of Child Line Foundation at the earliest and a report must be sent to the Commission.

**Meeting attended by the District Collector, Jodhpur and relevant officials dated 17.09.2011 at Jodhpur, DC office.**

S.No.	Name	Designation	e-mail	Ph. No.	Address
1.	G.S. Charan	Additional Commissioner, Jodhpur			
2.	Sarla Dadhich	District Coordinator, Office of CM&HO, Jodhpur			
3.	B.R. Bishnoi	DY SP Centre	<a href="mailto:sp/jop/raj@nic.in">sp/jop/raj@nic.in</a>	9413366777	Upayukt Police Commissioner, Mahanagar, Jodhpur, Rajasthan
4.	Lalit Rao	Dy. Director		9252599369	
5.	Khursheeda Khan	CDPO Jodhpur City,			
6.	Manmeet Kaur	SJE, Jodhpur			
7.	Kailash Chandra Yadav	SDM Jodhpur			
8.	Narpat Singh	Additional DCP Police Commissioner Office			
9.	Kalpana Aggarwal	APH-II			
10.	Prabhu Lal Meena	DEO Ele & Second & DPC Jaisalmer			
11.	Smt. Gajra Chaudhary	D.D. Secondary/ DEO Sec. Jodhpur			
12.	Om Singh Raj Purohit	Sr. Dy. DEO, D.D. Ele, Jodhpur			
13.	Dr. Rajendra Singh Chawra	Chairman (CWC)			
14.	Pit Ram Yadav	Labour Office, Jodhpur			
15.	Madhu Bala Ralpurohit	CWC, Member			
16.	Hingley Dan Charan	APC SSA, Jodhpur			
17.	Dr. M.L. Gupta	PRO			
18.	Dr. Ramesh Mathur	CMHO/JO			

### *Abbreviations Used:*

NCPCR	National Commission for Protection of Child Rights
ICDS	Integrated Child Development Services
WCD	Women and Child Development
CWC	Child Welfare Committee
CFAR	Centre for Research and Advocacy
AWC	Anganwadi Centre
AWW	Anganwadi Worker
AWH	Anganwadi Helper
CDPO	Child Development Project Officer
ANM	Auxiliary Nurse Midwife
ANC	Ante Natal Care
MTP	Medically Terminated Pregnancy
NGO	Non- Government Organization
PHC	Primary Health Centre
CHC	Community Health Centre
JSY	Janani Suraksha Yojana
HIV	Human Immunodeficiency Virus
AIDS	Acquired Immune Deficiency Syndrome
PCPNDT	Pre-conception and Pre-natal Diagnostic Techniques
PNDT	Pre-natal Diagnostic Techniques
ART	Anti Retroviral Treatment
DPT	Diphtheria, Pertusis and Tetanus
MOIC	Medical Office In- Charge
DM	District Magistrate
DC	District Collector
SJPU	Special Juvenile Police Unit
SSA	Sarva Shiksha Abhiyan
CMHO	Chief Medical and Health Officer

RCHMO	Reproductive and Child Health Medical Officer
DLC	District Labour Commissioner
MCW/Dias Centre	Maternity and Child Welfare Centre
SDM	Sub Divisional Manager
SP	Superintendent of Police
FIR	First Information Report
SMS	Short Message Service

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