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भारत सरकार
GOVERNMENT OF INDIA
राष्ट्रीय महिला आयोग
NATIONAL COMMISSION FOR WOMEN
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To

The Chief Secretary
Govt. of Uttar Pradesh
Bapu Bhawan, Secretariat,
Lucknow, UP

Sub- Recommendations of the Inquiry Committee visit at Kushinagar, UP

Sir,

I am directed to state that the National Commission for Women (NCW) had taken suo-motu cognizance and constituted an Inquiry Committee under Section 8(1), read with Section 10(1) and (4) of the NCW Act, 1990 to inquire into the alleged incident reported in various media, wherein it was reported that a mass sterilisation camp was held in Uttar Pradesh's Kushinagar district. in which six doctors allegedly operated on 42 women within two hours at a community health centre. Many of the women were forced to take rest on the floor after their surgery due to lack of adequate beds at the community health centre in Nebua- Naurangia village and the doctors operated on many women under the light of lantern.

After examining into the facts and circumstances of the present case, the Commission recommends the following:-

Key Recommendations :

1. **Lack of Medical Staff:-** There is a severe lack of medical staff in Kushinagar in the entire district. There are just three female doctors of which two are gynaeccologists. There is not adequate female staff in these centres in the district and it need to be rectified. Rural women face lots of problems coming to hospital and in the absence of female staff. According to CMO, Kushinagar, officially they require 181 doctors in Kushinagar and against that they have a staff of 80 doctors. 15 doctors are gone for higher studies and some are on leave while others on administrative duties practically they have just 50 doctors for work who are looking after centre, 3 are district hospitals and 53 primary health centre.



- a. Ensure one male and one female doctors at each PHC/CMC.
- b. Ensure that there is equal number of other staff. Presence of female administrative – nursing staff should be mandatory at every centre.
- c. For a better functioning of hospitals, it is essential to regularly monitor them and put a complaint register or box in these hospitals to ensure quality work and fair treatment to the patients.

2. **Stop targeting without enough medical staff and equipments:-** There is a dereliction of duty on part of doctors to complete their target. While the doctors claimed against the target of 16000 they could only complete 450 by this time, last year they conducted over 11000 such operations. It is good to promote sterilization for family planning purpose but it must desist fixing targets. Without enough medical staff and equipments, how come such large – numbers of surgeries are being conducted without complete medical teams? It is suggested that it is time to provide enough infrastructures for the same and then fix up the targets.

3. **Organise Camps as per needs and not for the sake of it:-** It was informed to us that camps are organized at the CHCs and PHCs on regular period. Doctors are not given numbers in advance as it depends on people who register. It means there is no proper preparation for it. How is it allowed that one doctor performing operation of 42 women in nearly 6 hours. This kind of attitude put the patient at risk and must be discarded for the better of all. It is important therefore, that camps are planned well in advance and number of people to be operated should be known in advance so that suitable arrangements are done for the process and camps be organized in two-three days if the number exceeds. No patient should be compelled to sleep on the floor. It must not be repeated without complete preparation and enough number of doctors to do the operation.

4. **Insurance:-** Each patient brought up for operation must be provided health and life cover insurance (while we were informed it exists there is no information about it to the people). An insurance cover should be given to the people on the time of operation with clear, ambiguous and simple instructions printed on it.

5. **Sensitization of medical staff :-** Most of the medical staff hails from the urban locations and hence suffer from rural – caste and gender bias. It is important therefore to sensitize the medical staff of these realities of rural life and ensure that all those rural poor get a dignified treatment in the hospital. It is suggested that engagement with NGOs in this direction which talks of not just family planning but also of medical ethics and dignity of the patient.

6. **Ensure Quality work from Asha Workers:-** Asha workers encourage women in the villages to opt for operation and they get Rs. 150/- per person. Hence most of the Asha workers looked like middle women actually who had already authored 'patients' that everything was 'fine'. Their worry is about their remuneration. It is high time when they are regularized and paid – regularized and paid fairly to ensure accountability on their part. It is suggested that Asha workers who encourage women to conduct sterilization should explain everything about the procedure pre and post operation.

7. It is suggested that the medical services need to be improved and the emergency services need to be maintained and kept clean and it should be mandatory for the doctors to study not only medical ethics but they should be sensitized about rural situation.

8. It is suggested that community approach where NGO's community organisations must be used to mobilized people with interaction with the doctors. It would do well if the faith of people is reinforced in the government hospitals through such a process where they can express their concern and opinion. CMO and other senior doctors should be part of community sensitization programme.

I am directed to convey the recommendations of the Inquiry Committee and to request that the State Government is requested to take appropriate action in the matter and kindly intimate the Commission about action taken by an early date.

Yours sincerely,



(Narendra Kumar)
Deputy Secretary