

Review of action points taken on the Action Points contained in Minutes of the Review Meeting taken by the Chairman, NCST during his visit to Andaman and Nicobar Islands from 19.11.2011 to 25.11.2011

Sl. No.	Item No. as per Minutes	Action Point	Action Taken
1	2.0	<p>Formal welcome and briefing the Commission about various aspects of tribal development by Secretary, Tribal Welfare Department A&N Administration.</p> <p>After arrival at Port Blair Airport, Secretary Tribal Welfare Department welcomed Hon'ble Chairperson and Members of the Commission. Representatives of many tribal Associations and other social groups also welcomed them. Thereafter, the Commission departed for Port Blair Circuit House where Secretary, Tribal Welfare Department briefed the Commission about the general information related to the islands. It was informed that the Andaman & Nicobar is an archipelago consisting 572 small and big islands, islets and rocks aligned north to south in the form of broken chain of approximately 700 km between Cape Negrais of Myanmar in north and Achin head in Sumatra of Indonesia in south. The total geographical area of the UT is 8249 Sq.kms of which 7171 Sq.kms is forest area. The Commission was also informed that there are six aboriginal tribes in the UT which are great Andamanese (Strait Island), Onges (Little Andaman), Jarawas (South & Middle Andaman), Sentinelese (North Sentinel Island), Nicobarese (Chowra, Teressa, Bampuka, Little Nicobar, Great Nicobar and some other Islands and Shompens (Great Nicobar Island). Nicobar group of Island is far away from Port Blair. It was also informed that the UT administration has re-scheduled the visit of the Commission to different part of</p>	<p align="center">No action required</p>

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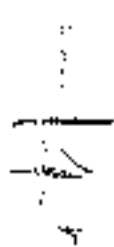
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		the UT keeping in view the availability of helicopter service, Lt. Governor's vessel and other local conditions.	
	2.1	<p>Visit of National Memorial Cellular Jail, Anthropological Museum and Rose Island.</p> <p>In the afternoon the Commission visited National Memorial Cellular Jail Which is an important place related to the freedom struggle of the country. Here the Commission witnessed a light and sound show related to the freedom movement and suffering of the freedom fighters. The Commission also visited Anthropological Museum, Port Blair and Rose Island on the same day.</p>	No action required
2	3.0	<p>Visit of the Commission to Jarawa Tribal reserve and Baratang area</p> <p>The Commission left Port Blair in the morning for Baratang through Andaman Trunk Road (ATR) which passes through Jarawa tribal reserve. Assistant Commissioner, Tribal Welfare Department, A&N Administration and officials of Andaman Adim Janjati Vikas Samiti also accompanied the Commission.</p>	No action required
	3.1	<p>On the way the Commission was briefed that Andaman & Nicobar Islands has originally been the adobe of the aboriginal tribes all of them hostile. The government had passed a regulation to protect the interest of socially and economically backward aboriginal tribes of the islands in 1956 named as THE ANDAMAN AND NIOCBAR ISLANDS (PROTECTION OF ABORIGINAL TRIBES) REGULATION, 1956. The areas, which are predominantly inhabited by the aboriginal tribes, have been declared to be reserve areas. Several restrictions have been imposed by the</p>	<p>The A&N Administration through AAJVS and its organization has served well to keep these communities on a relatively increasing demographic curve. For example we had no clear idea about the Jarawas until about the late 1990s when a certain set of circumstances led to the establishment of a 'friendly' contact with them. At that time the total population was enumerated to about 320. Since then the provision of health services and ensuring the conditions of resource availability for the community has led to an increase in the Jarawa population to above 451 till today.</p> <p>During the last 3 years, following new initiatives have been carried out by the Administration for the welfare and wellbeing of Jarawa Tribes</p> <ul style="list-style-type: none"> The Buffer Zone Notification dated 30.7.2007 has been modified excluding as many as 34 Revenue Villages from the buffer zone as per the Administration's Notification dated 17.1.2013. However, no activity directly or indirectly which may be prejudicial to the safety, security of the interest of the

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3.2	<p>Government by way of a policy on Jarawa tribe to protect them from harmful effects of exposure and contact with the outside world while they are not physically, socially and culturally prepared for such interface. Besides that, the policy is also aimed to preserve the social organization, mode of subsistence and cultural identity of the community, to provide medical help to the Jarawas to reduce mortality and morbidity in case of their sudden affliction with diseases which their systems are unaccustomed to, to conserve the ecology and environment of the area and to sensitize settler communities around the Jarawas habitat and personnel working for the protection and preservation of the Jarawas about the need to preserve this ancient community and to value their unique culture and life styles.</p> <p>The Commission met some tribal people of Jarawa community near R.K.Nala area of the reserve to see their condition and habitat. The Commission was informed that the Jarawas are hunters and gatherers belonging to Negrito race who were hostile to the outside world till 1997. The Jarawas themselves started frequenting the non tribal areas like villages and Andaman Trunk Road which led to unprecedented interaction of the Jarawas with no tribals which would have deleterious impact on Jarawas. A PIL was filed in Calcutta High Court wherein the issue of protection of members of Jarawa tribes was raised. The Hon'ble High Court passed certain directions, pursuant to which a policy was framed by the Government of India in the year 2004 with the objectives mentioned in para 3.1 above.</p>	<p>Jarawa in any of the above settlement villages shall be permitted. This notification have been upheld by the Supreme Court in judgement order dated 5.3.2013 in the SLP No. 12125/2010 and also directed the Administration to strictly implement the provisions of A&N Islands (amended) PAT Regulations, 2012. Established and operationalized 08 Community Centres (Hot-spots) for establishing two way communications between the Jarawas and the welfare staff for attending to their requirements for the welfare and development of the community. These centres are also used for providing informal education to the Jarawa children.</p> <p>Implementation of "Kangapoo" project, the stitched garments are being given to Jarawa women on their specific demand and on barter basis so that the individuals do not lose their dignity.</p> <p>ANTRI in collaboration with AAJVS & TW Department has started the schooling concept and provided the books of bi-lingual & bi-cultural curriculum of education to the Jarawa children on 22.10.2014. 143 Jarawa students have been enrolled in the school set up by AAJVS in Community centres. The Tribal Welfare Officer has been appointed as Principal Facilitator for the Ang Katha project (Jarawa Education).</p> <p>The Administration has already finalized the protocol for "Disease Surveillance" to address the epidemiological emergencies as also for meeting the day to-day health requirement of the Jarawas and the institutional arrangement is likely to be put in place shortly. Similar institutional arrangement is also being considered for Shompens.</p> <p>In order to augment their food resource base, AAJVS in the Directorate of Tribal Welfare with the help of Department of Agriculture and the Forest Department had been assisting the community in making the planting material and providing the techniques of their \ in the Jarawa Reserve, Andamanese and Onge Settlements.</p> <p>415 Nos. of Banana, 125 Nos. of Mango, 90 Nos. of Jackfruit, 415 Nos. of Coconut, 60 Nos. of Guava, 200 Nos. of Lemon, 5 Nos. of Orange & Mausambi and, 40 Nos. of Papaya have been got planted through the Jarawas.</p> <p>Intensified patrolling by Ang Sena in the Jarawa Reserve Area for the protection of Jarawa tribes.</p> <p>Collection of biological samples including blood samples of PYTGs to assess normality of immune related cells and their ability to induce immune response against known immunogens/ antigens.</p> <p>A protocol of surveillance has been put in place to secure Western Coast of South and Middle Andaman islands, bordering Jarawa Tribal Reserve from intruders/poachers. Three layers of surveillance through Joint Patrol Parties in the seaward side of the Western Coast involving Navy, Coast Guard, Police Marine force, AAJVS and Forest Departments have been formulated.</p>

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3.3		<p>The Jarawas still continue to lead their own way of life and follow their traditional customs of hunting and gathering. They use bows and arrows for hunting the games like wild pig, monitor, lizards and even for fishing. They are strictly monogamous. However, widow remarriage is allowed among them. They live in big hunts made up of locally available vegetation. They migrate seasonally from one part of the reserve to another in search of food. They take boiled and roasted food. Their present population is 383 out of which 197 are males and 186 are females.</p>	
3.4		<p>After meeting the Jarawas, the Commission proceeded for Baratang forest guest house where a delegation of settlers, whose predecessors had migrated from the Chhota Nagpur Plateau region of the main land (locally called as Ranchi Association), met the Commission. They produced following demands before the Commission:</p> <p>It was informed that in the states from where their ancestors had migrated in search of livelihood, their communities had been included in the list of scheduled tribes. But in Andaman & Nicobar Islands, they are not being declared as scheduled tribe in spite of the fact that they had worked hard in the cutting of forests and construction of roads and building in the Islands. They demanded for tribal status in the UT.</p> <p>The Commission was informed that these settlers have not been given any plots for construction of houses in the Baratang areas. They demanded for allotment of plots for the purpose.</p> <p>Roads should be constructed,</p>	<p>Since the road in question is outside the Tribal Reserve, the matter has been referred to APWD for taking appropriate action</p>

Action Taken

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3	4.0	<p>urgently to join Kanchangarh village and Khattakhari. All weather roads should also be constructed to connect Rajatgarh and Raptashri villages.</p> <p>After the meeting the Commission returned to Port Blair from Baratang in the evening.</p> <p>The Commission proceeded for Strait Island by special boat in the morning to meet the Great Andamanese tribes and reached their by noon. The Commission was accompanied by Secretary and Assistant Commissioner, Tribal Welfare Department, A&N Administration. The officials of Andaman Adim Janjati Vikas Samiti were present on the Strait Island.</p>	<p>They were just 19 persons in late 1960's and individual Andamanese roamed around aimlessly in the Islands. The A & N Administration decided to rehabilitate the surviving Andamanese on Strait Island. Andamanese population has gradually increased to 63 now over a period of time as a result of various welfare measures undertaken by the Administration.</p> <p>The Administration has introduced a few economic activities like rearing of poultry for the tribals to improve their economic condition and the nutritional status. Besides, they are being engaged in raising and maintenance of the coconut plantation so as to provide them permanent means of sustenance. Administration provides free rations and clothes to the Andamanese. The potable water supply, electrification of Andamanese settlement, free medical care, school and other amenities like Police Wireless for communication, - Direct Receiving Set for T.V., Community Hall, footpath, jetty for berthing of the boats etc. have been provided at the settlement. A Great Andamanese Multipurpose Co-operative Society is functioning at Strait Island. All the Andamanese are the members of this Society. Tribal consumer goods to the Andamanese and also helps them in marketing of their agricultural produce. Tribal houses and other infrastructure facilities were damaged during Tsunami 2004. Repairs to structures were carried out. The new houses have been built for Andamanese at high ground at Strait Island. 10 new houses at higher ground have been handed over to the tribal families. However, the additional requirement of residential building at Strait Island is being provided by the AAJVS.</p>
4.1		<p>The Commission proceeded for Strait Island by special boat in the morning to meet the Great Andamanese tribes and reached their by noon. The Commission was accompanied by Secretary and Assistant Commissioner, Tribal Welfare Department, A&N Administration. The officials of Andaman Adim Janjati Vikas Samiti were present on the Strait Island.</p>	<p>At present 20 Andamanese Children are studying and the total expense of which is borne by the Govt. through Andaman Adim Janjati Vikas Samiti (AAJVS). 22 Andamanese are employed in various Govt. Departments. For the first time during academic session 2011-2012, two Andamanese boys have successfully passed Xth Std under CBSE pattern of education and one boy ITI in welding trade. One girl completed ANM Training with the Govt. support and she has been given regular appointment in the Health Department. Jetty at Great Andamanese settlement, Strait Island has been constructed by ALHW made operational. 17 eligible Andamanese has been covered under the social security schemes namely Pradhan Mantri Suraksha Bima Yojana" (accident insurance) and, Pradhan Mantri Jeevan Jyoti Yojana" (life insurance) launched by the Govt of India.</p>

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		<p>roamed around aimlessly in the islands. The A&N administration decided to rehabilitate the surviving Great Andamanese on Strait Island. Their population has gradually increased to 55 now over a period of time as a result of various welfare measures undertaken by the administration.</p>	
4.2		<p>The Commission was also briefed that the A&N Administration has introduced a few economic activities like rearing of poultry for these tribes to improve their economic condition and the nutritional status. They are being engaged in coconut plantation with an objective to provide them a permanent mean of sustenance. The administration provides free ration and cloth to the Great Andamanese. The potable water supply, electrification, free medical care, school and other amenities like police wireless communication, direct receiving set for TV, community hall, foot path Jetty for berthing the boards etc. have been provided at the settlement. A Great Andamanese multipurpose co-operative society is functioning at the Strait Island. All the Great Andamanese are members of the society. The society provides the consumer goods to them and also helps ten in marketing of their agricultural produces. Tribal houses and other infrastructure facilities were damaged during Tsunami 2004. Repairs to structure were carried out. The new houses are being built for Great Andamanese at high ground on Strait Island. This new colony is likely to be completed and handed over to the tribal families by June 2012.</p>	
4.3		<p>On reaching the island Smt. Surmai, lady Chief of the Great Andamanese community welcomed the Commission. The</p>	

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		<p>Commission held a detailed discussion with several community members. Some of the members of the community are working on lower posts in government departments like Police Deptt, Health Deptt., Education Deptt, and Strait Island Electric supply company. They speak Hindi very well. The people were quite satisfied with the efforts made by the administration for their welfare.</p> <p>The Commission visited the Government middle school, dispensary and some of the houses. After detailed discussion, the following issues emerged out for action:</p> <p>New houses are being built for the Great Andamanese on higher ground after damage of their houses during Tsunami 2004. Till the time these houses are handed over to them, they want to repair the houses in which they are residing at present. For this purpose they require wood and pillars. The Commission was assured that the administration will settle this demand through DFO, Port Blair.</p> <p>Two persons of the community are eligible for old age pension. The administration should take necessary action in the matter.</p> <p>The quality of education provided to the children of the community was not found to be satisfactory by the community members as well as the Commission. The teachers were not serious in their duty. The student of Class I and II were not able to read the text books. The Commission recommended for placement of dedicated teachers in the school. The Tribal Welfare Department Officer assured the Commission that social worker, working in</p>	

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		<p>the Island for Andaman Adim Janjati Vikas Samiti shall be deputed with additional remuneration to impart education to the children of the community after school hours.</p> <p>Mobile signals are not available on the island as a result of which they face difficulty in communication with their children studying in Port Blair or else. For the purpose range of the towers in nearby Islands may be enhanced.</p> <p>Some of the community member demanded assistance for goat and pig rearing.</p>	
	4.04	<p>The Commission was informed that an amount of Rs. 2 Lakh was provided to the PWD for construction of building of co-operative society on the Strait Island but it has not been constructed so far. The Secretary, Tribal Welfare Department informed the Commission that now the amount will be taken back by the Department from PWD and old houses left by these tribal shall be used for the purpose after shifting them to the new houses.</p>	No action required
	4.05	<p>From Strait Island the Commission proceeded for Havelock Island by special boat and reached there in the afternoon. The Commission and accompanying officers halted there in the night.</p>	No action required
	5.00	<p>The Commission had a meeting with Lt. General (Retd.) Bhopinder Singh, Hon'ble Lt. Governor, A&N Islands at 10.00 hrs. the Commission briefed him about the purpose of visit of the Commission and the responsibilities given to the Commission under the Constitution for the welfare of</p>	No action required

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5.01		<p>Scheduled tribes. The Commission briefed him about the demand of tribal status made by the migrants of Chhota Nagpur placed by them before the Commission. Various demands related to development in the tribal areas were also discussed in the meeting.</p> <p>Dr Rameshwar Oraon, Hon'ble Chairperson, National Commission for Sch. Tribes attended a function organized by Indian Tribal Welfare Association, Port Blair in the afternoon as Chief Guest. Following issues were presented before the Commission in the function by the tribal delegates:</p> <p>Many Scheduled tribe persons belonging to different tribal communities in the main land are residing in A & N Islands, which is a Union Territory where Central Government rules are applicable. Many such persons secured employment under ST quota in the services of A & N administration on the basis of certificates issued by the competent authorities of different states. But now A & N Administration is not accepting the caste certificates produced by them. Thus, they are being deprived of their legitimate claim. They demanded that the judgment of the Supreme Court in the case of S. Pushpa should be made applicable in A & N also. Local Police is not registering the complaints of the tribals belonging to main land under SC & ST (POA) Act 1989 on the plea that they do not belong to the Scheduled Tribe community of the A & N Island.</p> <p>The tribals of the Chhota Nagpur area of the main land, who had migrated in search of livelihood to A & N Islands in the year 1918 and onwards, have been denied tribal status in the Islands. Many settler communities, who migrated later on, were given status of</p>	<p>Since long the Chotanagpuri Tribes - Orans, Mundas, Kharias, Santhalis, Lohras and others (popularly known as Ranchis) living in Andaman and Nicobar Islands are demanding for recognition as a Scheduled Tribe of A & N Islands. As far as the reservation policy of A & N Administration is concerned, it is confined to the indigenous tribes only and reservation benefits are not extended to the migrant STs of other States/UTs. Administration's view on this issue is that the migrant Scheduled tribes are not the original inhabitants of these islands like other aboriginal tribes of A&N Islands. Therefore, the demand for recognition as a tribe has not been considered so far.</p> <p>Present status: Ministry of Home Affairs vide letter No. U-13034/39/2012-ANL dated 13.4.2013 has intimated that the matter regarding recognition of migrant Ranchi community as Scheduled Tribe in relation to A&N islands is sub-judice in the Hon'ble Supreme Court of India and the proposal for grant of special status to Chora Nagpuri (Ranchi Community) will be considered after pronouncement of the verdict of the Apex Court.</p>

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		<p>OBC by the administration. This is discrimination on the part of local administration.</p> <p>Atrocities are being committed by non-tribals against the Jarawa community persons. The local police should be directed to take immediate and proper action against the culprits.</p> <p>Hon'ble Chairman addressed the gathering and assured that the issues raised by the tribal delegates shall be discussed in the review meetings scheduled on 24-11-2011.</p>	
	5.02	<p>In the evening, Dr. Rameshwar Oraon, Chairperson, NCST attended a function organized by Ranchi Association at Chhota Nagpur Bhawan, Port Blair as Chief Guest. Shri R.K. Dubey, Assistant Director was also present in the function. Hon'ble Chairman garlanded the statue of Shahid Birsa Munda at the venue. Thereafter many office bearers of the Association welcomed Hon'ble Chairperson. Many delegates from different parts of the Islands attended the function. Following issues/demands emerged out of the speeches given by the office bearers of the Association:</p> <p>Many persons belonging to Chhotta Nagpur region spread in the states of Jharkhand, Chhatisgarh, Orissa and some other states of the main land were taken to A&N Islands in the year 1918 by the then DFO of South Andaman for working as labour in forest department. For the first time, about 400 persons belonging to Oraon, Munda and some other tribes arrived in the islands on one-year contract. Subsequently many other groups followed them. Some of them returned to their native places in the main land but many others could not do so due to Second World War and settled in the Island</p>	



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		<p>More persons from the Chhota Nagpur area of the mainland arrived at the islands after independence to help in settling the Bangladeshi refugees. Many of these persons were given appointment in the Forest Department and PWD. These people have contributed a lot in the development of these Islands. Now, their number has reached to about 70,000 but these people have not been given the status of Scheduled Tribe in A&N. On the contrary large number of settlers coming to A&N as refugee have been given land and social status as backward classes after migration from Bangladesh. A demand was made for considering them as Scheduled Tribe in the A&N Islands.</p> <p>There is no separate reservation for their children in admission in Engineering and Medical Institutions of the main land 50% seats in these Institutions has been reserved for descendants of persons settled in the Islands by the administration prior to 1940. 20% seats were reserved for the Scheduled Tribe of A&N and another 10% seats are reserved for Central Government employees. The children/descendants of the persons originally hailing from Chhotta nagpur region of the main land were left in the last category having 20% reservation where they have to compete with all others. Thus, they have not been able to get any benefit in admission to these Institutions. Dr. Rameshwar Oraon, Chairman, NCST also addressed the gathering in the end. He assured that the problems of the Chhota Nagpur migrants shall be taken up at the appropriate forum.</p>	



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	5.03	In the afternoon many tribal delegates, office bearers of ST welfare association and political leaders met the Commission.	
	6.00	<p>Shri R.Mohan, State President, BJP called on Dr. Rameshwar Oraon, Chairman, NCST at the circuit house, Port Blair. He discussed about the problems being faced by the tribals residing in the Islands. He put up following demands before the Commission:</p> <p>Separate parliamentary seat for Nicobar group of Islands reserved for Scheduled Tribes should be created due to geographical distance and different problems of the Nicobarese tribes.</p> <p>The settlers hailing from Chhota Nagapur region of the main land settled in the A&N Islands should be declared as Scheduled Tribe by the Government of India.</p> <p>To consider granting of SC status to all those communities settled in the A&N Islands hailing from Kerala, Tamil Nadu, Andhra Pradesh, Punjab etc.</p> <p>Hon'ble Chairman, NCST pointed out in the meeting that National Commission for Scheduled Tribes is not competent to deal with the issues related to scheduled castes and informed that the other two requests shall be taken up at appropriate level by the Commission.</p>	No action required
	6.01	<p>The Commission proceeded for Dugong creek, Little Andaman Island at 11.30 hrs by helicopter to see the conditions of Onges tribes residing on the Island. The Commission was briefed that the Onges community is having a population of 102 only Onges belong to Negrito race. They have been in contact with the civilization for over 100 years. The Onges are still keeping their indigenous activities of hunting, fishing and gathering. Initially their</p>	<p>The Onges belong to Negrito race. They have been in contact with the civilization for over 100 years. The Onges are still keeping their indigenous activities of hunting, fishing and gathering. The traditional rites and rituals are still observed by them.</p> <p>The present population of the Onges is 118. Initially the Onges were scattered all over the Little Andaman Island in different bands, but later they have been settled at two places viz. Dugong Creek and South Bay in Little Andaman Island. After Tsunami, 2004, all the Onges have, on their own choice shifted to Dugong Creek, Little Andaman.</p> <p>Onges have been provided with permanent houses. Coconut plantations have been raised at the Onge Settlements by the Administration for the economic benefit of Onges. The coconuts are collected by</p>

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6.02		<p>population was scattered all over the little Andaman island in different bands but later they were settled at two places viz. Dugong creek and South Bay in the little Andaman island. After Tsunami, all the Onges have, on their own choice, been shifted to Dugong creek.</p>	<p>the Onges and sold to A & N Islands Marketing Federation, and the sale proceeds are deposited in the Onges common account. There is an Onge Multipurpose Co-operative Society to collect and sell the coconuts and provide consumer goods to them. All the Onge are members of the Society and the Chief of Onge is the President of the Society. They are being engaged in economic and other activities like raising and maintenance of plantation of coconut and other fruit bearing trees, rearing of poultry birds and fishing.</p> <p>Administration provides free ration and clothes to the Onges. The potable water supply, electrification of Onge settlements, free medical care, school and other amenities like Police Wireless for communication, Community Hall, footpath, jetty for berthing of the boats etc. have been provided at the Onge settlements.</p>
6.03		<p>After arrival at Dugong creek helipad, the Commission was welcomed by Shri Tai, the cheif of the community and Shri Soge, second chief. Old chief named Bada Raju was also present there alongwith the community members. The Commission visited the Government middle school at the island and held interaction with the teachers and students. The Commission observed that a good number of youths (38 in number) of the community were coming to the school for education. However, the Commission felt that the quality of education imparted to these students could be improved as many of the students could not read their text book lessons. The Commission was briefed that the community had its own language called Onge but now a days, all the community members are interacting in Hindi. The Commission also visited some of the houses and Anganwadi kendra where some students were having nutritional meals at the time of visit. After interaction with the kids, their parents and the local anganwadi worker, the Commission praised the efforts of the A&N administration to provide nutritional food to the children of the community.</p>	<p>No Action required</p> <p>Following measures have been taken by AAJVS for the welfare and development of Onges in Dugong Creek</p>

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		<p>have been provided with permanent houses. These houses are made of woods on about four feet high platform. However, most of the houses require immediate repairing. Coconut plantations have been raised at the Onges settlement by the administration for their economic benefit. The Commission was informed that the coconuts are collected by the Onges and sold to A&N Marketing Federation. The amount so received is deposited in the common account of the community. There is an Onges multipurpose co-operative society to collect and sell the coconut and provide consumer goods to them. All the Onges are members of the society and the chief of the community is also the president of the society. The administration is also engaging them in rearing of poultry birds and fishing. The administration provides free ration and cloths to the Onges. Potable water supply, electrification, free medical care, school, community hall, footpath, jetty for berthing of the boat etc. have been provided at the Onges settlement. The local ANM informed the Commission that a health sub center has been established at Dogong creek. There are 29 families residing in 26 houses. 3 persons of the community had a surgery of Cataract recently. Mainly, the Onges suffer from fever and itching. They take fish, rice, dal and coconut besides the prey they had hunted. Three Onges are working in Government jobs, two in Andaman Adim Janjati Vikas Samiti and one in PWD.</p>	<ul style="list-style-type: none"> • The estimate for construction of permanent house for the Onges Tribe at Dugong Creek prepared by the APWD is being revised after taking considered view of Prof. Vishwajit Pandya, Honorary Director (ANTRI). • New Guest House has been constructed. Further, the APWD has been requested to submit the estimate for construction of Transit accommodation for the staff posted at Dugong Creek • A health and nutritional study of the Onge tribe of Dugong Creek in Little Andaman was conducted by the District Health Society (South Andaman) under the National Health Mission in collaboration with the experts from the Regional Medical Research Centre (ICMR), Port Blair, the Directorate of Health Services (DHS) and Andaman & Nicobar Adim Jan Jati Vikas Samiti (AAJVS) of the Department of Tribal Welfare in the month of December, 2013 and submitted their report on December, 2013, which has been accepted and taking action as per the recommendations of the report. • Painting of Onges Houses has been done • Grass Cutters have been provided to the Onges under Swatch Bharat Mission • 6 bicycles have been provided to the Onges 			
6.04	<p>The chief and other people of the community placed following demands before the Commission:</p>	<p>I. Immediate repairing of the houses.</p>	<table border="1"> <tr> <td data-bbox="1662 1697 1733 1779">I.</td> <td data-bbox="1662 1103 1733 1697">Immediate repairing of the houses. Pucca houses should be constructed for them.</td> <td data-bbox="1662 439 1733 1103">APWD has already been requested to construct the Pucca house, as per the convenience of Onge.</td> </tr> </table>	I.	Immediate repairing of the houses. Pucca houses should be constructed for them.	APWD has already been requested to construct the Pucca house, as per the convenience of Onge.
I.	Immediate repairing of the houses. Pucca houses should be constructed for them.	APWD has already been requested to construct the Pucca house, as per the convenience of Onge.				

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		<p>Pucca houses should be constructed for them.</p> <p>2. Power supply during day time</p> <p>3. Repair of community hall</p> <p>4. Construction of roof in the guest house.</p> <p>5. Government job for some youths of the community preferably in Forest deptt.</p> <p>6. The land allotted in the year 1964 for accommodation school students is not having any utility on the date. The same may be used for ration godown.</p> <p>7. Providing BSNL mobile/telephone connectivity.</p> <p>8. A road be constructed up to Vivekanandpur through forest for their convenient.</p> <p>The Commission directed the officers accompanying the Commission to consider the demands of the community and the observations made by the Commission during the visit and to inform the Commission accordingly.</p>	<p>Tribes</p> <p>Duration of Power supply enhanced from 12 hrs to 24 hrs has been enhanced</p> <p>Repair of community hall has been completed</p> <p>New Guest house has been constructed</p> <p>16 Onges have been employed in various departments as DRM. AAJVS has engaged 17 Nos Onges on Daily Rated Basis for maintenance of coconut plantation for three months. As per the direction of Hon'ble Lt Governor, one Onge boy Shri Samir has been engaged as Teacher to educate the Onge children in their own language and traditional</p> <p>As per the commission advice, ration godown has been constructed in the said land</p> <p>Request has been made to the BSNL for providing mobile/ telephone connectivity</p> <p>It is not feasible in the interest of Onge tribe.</p>
	6.05	The Commission proceeded for Port Blair in the afternoon.	
	7.00	<p>7.00 Dr. Rameshwar Oraon, Hon'ble Chairman, NCST held a meeting at 10.30 hrs. on 24-11-11 with ST representatives/ office bearers of ST Welfare Associations of A&N. In the meeting, Smt. K.Kamla Kumari and Shri B.L.Meena, Hon'ble Members of the Commission and Shri R.K.Dubey, Assistant Director was also present. Secretary, Tribal Development Department was present in the meeting on behalf of A&N administration. Representatives of Ranchi Association, Car</p>	

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		<p>Nicobar tribal council and many tribal individuals were also present in the meeting. Following issues were discussed in the meeting:</p> <ul style="list-style-type: none"> • Demand of Ranchi Association for providing scheduled tribe status to the ST migrants of Chhotta Nagpur region of the mainland in A&N Islands. In this connection, it was informed that there is 38% reservation for OBCs in the A&N Islands which also includes the ST migrants originally hailing from Chhotta Nagpur region of the mainland. It was informed that if the population percentage of this community is separated from the OBC quota, the OBC quota shall be only 27%. It will be in the interest of justice to provide the remaining 11% reservation to the settlers of Chhotta Nagpur region either by including them in the list of scheduled tribes of A&N Islands or alternatively by providing special status in the matter of employment, education or other development schemes 	
		<ul style="list-style-type: none"> • The scheduled tribes migrated from the mainland are demanding ST status in A&N Islands. Providing them ST status in the A&N Islands shall be detrimental to the interest of aboriginal tribes of the Islands particularly in the field of employment and education. (Opinion of Car Nicobar tribal council). 	<p>The Ministry of Home Affairs vide letter No. U-13034/39/2012-ANL dated 13.4.2013 has intimated that the matter regarding recognition of migrant Ranchi community as Scheduled Tribe in relation to A&N islands is sub-judice in the Hon'ble Supreme Court of India and the proposal for grant of special status to Chota Nagpuri (Ranchi Community) will be considered after pronouncement of the verdict of the Apex Court.</p>
		<ul style="list-style-type: none"> • Reduction of reservation quota for scheduled tribes in direct 	
			<p>Total population of the Andaman & Nicobar Islands is 3,80,581 (2011 census) of which, the tribal population is 28,530 (as per 2011 census) constituting 8% of the total population. As per the instructions of</p>

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Action Taken

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		<ul style="list-style-type: none"> recruitment in Group C and D posts from 12% to 8% (as per the ST population in 2001 census). There are 14 ST employees working for the last 10 to 15 years in the Medical Department of the Administration on contract basis. Their services have not been regularized so far. The tribal students getting their education in the mainland institutions are not receiving scholarships on time. They are facing hardship due to delay in sanctioning of scholarship. Non filling of backlog posts reserved for STs in various departments of the administration. No reservation is being provided to the Scheduled Tribes in promotion in the Department of Statistics of the A&N Administration. 	<p>the Govt of India, the 8% percentage of reservation fixed in proportion to the population of STs in these islands for STs</p> <p>The report from DHS is being sought on this account and would be intimated in due course to the Commission</p> <p>With the approval of Hon'ble Lt. Governor, A&N Islands, the rate of additional scholarship paid to ST students of these islands who are undergoing undergraduate/ postgraduate courses in mainland and island institutions has been enhanced from Rs. 500/- to Rs 1000/- per month vide Order No. 340 dated 26.9.2014. scholarship amount are being disbursed to the eligible ST candidate on as and when required basis.</p> <p>Every Appointing Authority has appointed Nodal Officer in respect of their department to ensure implementation of reservation in posts & services for STs. Director of Tribal Welfare is the Nodal Officer for implementation of reservation in services. Roster for reservation in services maintained by Appointing Authorities are inspected by the Nodal Officer from time to time. The reservation in services is monitored through annual statement collected from the appointing authorities. However, the issue of providing reservation to STs in promotion has been referred to Personnel Department for examination and implementation</p> <p>Statement showing staff strength of the UTs Administration as on 31.3.2013 as per following proforma:</p> <table border="1"> <thead> <tr> <th rowspan="2">Category of posts</th> <th rowspan="2">Total No. of employees</th> <th colspan="2">Filled in position</th> <th colspan="2">Percentage of</th> </tr> <tr> <th>SCs</th> <th>STs</th> <th>SCs</th> <th>STs</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>A</td> <td>990</td> <td>0</td> <td>13</td> <td>0</td> <td>1.31</td> </tr> <tr> <td>B</td> <td>6630</td> <td>0</td> <td>488</td> <td>0</td> <td>7.36</td> </tr> <tr> <td>C</td> <td>12809</td> <td>0</td> <td>900</td> <td>0</td> <td>7.02</td> </tr> </tbody> </table> <p>Note: Although there is overall excess reservation due to revision of percentage of reservation from 12% to 8% effective from 2011 onwards in view of 2011 census population as per GoI DOPIT instructions, there is shortfall in number of posts in respect of certain technical posts due to non availability qualified candidates.</p> <p>09 banks (02 SBI, 06 Coop. Bank & 1 Syndicate bank) are functioning in the Nicobar group of Islands. However, the DC(Nicobar) has been requested to look into the matter and facilitates sales of copra including transaction through banks available in the islands</p>	Category of posts	Total No. of employees	Filled in position		Percentage of		SCs	STs	SCs	STs	1	2	3	4	5	6							A	990	0	13	0	1.31	B	6630	0	488	0	7.36	C	12809	0	900	0	7.02
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		<p>through cheque after procurement by the agencies As there is no bank in the Nicobar group of Islands, the scheduled tribes of the Island are facing difficulty.</p> <ul style="list-style-type: none"> There is no revenue land in the Nicobar group of Islands and all the land belongs to the community. The A&N administration demands land from the tribal council and makes payment through cheque in lieu of the land. The individuals residing in the Island who are all scheduled tribes are facing difficulty in getting loans as NAFED or any other financial institution demands individual right of land as a surety before sanctioning any loan to them. 	
7.01		<p>Keeping in view, the different opinions of tribal associations on the issue of providing ST status to the migrants, who are scheduled tribe in the mainland, Hon'ble Chairman referred to the Supreme court case of S.Pushpa and briefed the delegates about the decision of the Hon'ble court in the matter He opined that the administration should consider granting of special status to the migrants originally hailing from the Chhotta Nagpur region of the mainland in the A&N Islands. He also directed the Secretary, Tribal Development Department, A&N to take necessary action on all other issues raised by the tribal delegates/association in the meeting.</p>	<p>The Ministry of Home Affairs vide letter No. U-13034/39/2012-ANL dated 13.4.2013 has intimated that the matter regarding recognition of migrant Ranchi community as Scheduled Tribe in relation to A&N islands is sub-judice in the Hon'ble Supreme Court of India and the proposal for grant of special status to Chota Nagpuri (Ranchi Community) will be considered after pronouncement of the verdict of the Apex Court.</p>
7.02		<p>Dr. Rameshwar Oraon, Hon'ble Chairman, NCST chaired a meeting with Chief Secretary and Sr. officers of the A&N administration to review the implementation of reservation policy and development</p>	<p>No action required</p>

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7.03		<p>programmes being run for the welfare of scheduled tribes in the Islands and implementation of SC & ST (PoA) Act, 1989 and rules 1995 at 11,30 hrs. Smt. K.Kamla Kumari and Shri B.I.Meena. Hon'ble Members of the Commission also joined him. Shri Aditya Mishra, Jr. Secretary and Shri R.K.Dubey, Asstt Director in the Commission were also present in the meeting. Shri Shakti Sinha Chief Secretary, A&N administration was also present alongwith all the Sr. officers of the UT administration. This meeting was held on the basis of a detailed questionnaire sent by the Commission to the A&N administration and reply/information furnished by the administration to the Commission</p> <p>In the beginning, Chief Secretary welcomed Hon'ble Chairman, Members and accompanying officers in the meeting. At the outset, he informed the Commission that the data related to expenditure under tribal sub-plan furnished by the A&N administration may not be correct due to different way of understanding the question. He also admitted that the administration has not been able to fill up some posts reserved for scheduled tribes and assured the Commission that the administration will take necessary measures shortly in this direction. Thereafter, he requested Hon'ble Chairman, NCST to share his views and give necessary directions for the betterment of scheduled tribes in the UT.</p>	<p>8% of the total outlay of the UT Budget is earmarked for implementation of tribal sub plan by the 29 line departments of this Administration with special emphasis on development of tribal women.</p> <p>STATEMENT SHOWING FINANCIAL ACHIEVEMENT UNDER TRIBAL SUB PLAN 2010-11, 2011-12, 2012-13, 2013-14, 2014-15, 2015-16 & Outlay 2016-17 (Rs. In Lac)</p> <p>Table - II</p> <table border="1"> <thead> <tr> <th>S. No.</th> <th>Year</th> <th>Overall Plan Expenditure</th> <th>TSP Expenditure</th> <th>% of TSP</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2010-11</td> <td>84982.91</td> <td>5390.68</td> <td>6.34</td> </tr> <tr> <td>2</td> <td>2011-12</td> <td>128739.27</td> <td>9430.64</td> <td>7.33</td> </tr> <tr> <td>3</td> <td>2012-13</td> <td>148288.36</td> <td>18279.25</td> <td>12.33</td> </tr> <tr> <td>4</td> <td>2013-14</td> <td>159119.80</td> <td>11207.89</td> <td>7.04</td> </tr> <tr> <td>5</td> <td>2014-15</td> <td>173247.93</td> <td>10555.78</td> <td>6.09</td> </tr> <tr> <td>6</td> <td>2015-16</td> <td>236724.00</td> <td>24193.00</td> <td>10.22</td> </tr> <tr> <td>7</td> <td>2016-17 (Outlay)</td> <td>225000.00</td> <td>22597.00 (Outlay)</td> <td>10.0</td> </tr> </tbody> </table>	S. No.	Year	Overall Plan Expenditure	TSP Expenditure	% of TSP	1	2010-11	84982.91	5390.68	6.34	2	2011-12	128739.27	9430.64	7.33	3	2012-13	148288.36	18279.25	12.33	4	2013-14	159119.80	11207.89	7.04	5	2014-15	173247.93	10555.78	6.09	6	2015-16	236724.00	24193.00	10.22	7	2016-17 (Outlay)	225000.00	22597.00 (Outlay)	10.0
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	7.04	<p>In his address, Chairman thanked the UT administration for providing assistance to the Commission in performing its duties assigned by the Constitution of India. He focused on the discussion held by him with the tribals during field visits and feedback given to the Commission by the tribal delegates/representatives of ST welfare associations in his address. He stressed on providing quality education to those tribal groups who are willing to come in the main stream. He advised to post committed teachers in the schools at Great Andamanese and Onges settlements. He also informed that there were demands by the tribal groups for construction of roads, rescheduling electric supply by providing electricity during day time also and for providing telephone/mobile connectivity. He appreciated the scheme for providing food security to the tribal groups and advised the administration not to make them dependent on the government. He advised that the tribals should be encouraged to get education and employment.</p>	<p>Education</p> <p>The literacy rate of ST population is 75.6 (2011), which was only 66.8 as per 2001 Census showing an increase of 11%. The literacy rate amongst male & female is 80.9% and 69.9% respectively. The number of School-going STs Students is 5942 (M 3080 + F 2862) and ST Teachers is 415 (M 181 +F 234).</p> <p>The Administration is providing scholarships to the STs students for pursuing their studies at various levels. An MoU has also been executed with Manidha Naeyam Free IAS, IPS Academy, a charitable trust located at CIT Nagar at Chennai, for preparing aspirants belonging to Nicobarese tribe for Civil Services Examination, the expenditure of which is being borne by the Administration through the Integrated Tribal Development Agency headed by Deputy Commissioner (Nicobar).</p> <p>The A&N Administration through Andaman Adim Janjati Vikas Samitie extends all financial support to the tribal students of Onges & Andamanese communities for their education at the primary, middle and higher secondary levels. Exclusive Middle level schools have been established in the tribal settlements for Onges at Dugong Creek, Little Andaman and for Andamanese at Strait Islands. Informal education system has been introduced amongst the Jarawa tribes through bilingual curriculum developed by ANTRI and AAJVS.</p> <p>Grant of additional scholarship for ST students of these islands who are undergoing undergraduate/postgraduate courses in mainland and island institutions @Rs. 1000/- per month</p> <p>Social Infrastructure & Economic Development:</p> <ul style="list-style-type: none"> (i) The Administration provides free ration and clothes to the Onges & Andamanese. (ii) Infrastructures like potable water supply, electrification of settlements, free medical care, schools, house and other amenities like Police Wireless for communication, Community Hall, footpath, jetty for berthing of the boats, helipad etc. had been provided for the tribal settlements by the Administration. (iii) The Administration also provides fishing kits, iron tools and implements to the PVTGs through AAJVS. (iv) Based on the recommendations made by the Study Group of the study report "Kangapo" the stitched garments are being given to Jarawa women on their specific demand and on barter basis so that the individuals do not lose their dignity. (v) Multipurpose Coop. Societies have been formed by the Onges & Andamanese tribes for their economic development. All the members of the tribes participate in the management of the Society and the profit so earned by is being equitably distributed amongst the members. (vi) Besides, the development plans of the line departments in the tribal areas are executed under their respective Tribal Sub-Plans. (vii) Duration of Power supply enhanced from 12 hrs to 24 hrs has been enhanced (viii) 55 Nos. of Banana suckers and Tapioca planted in Strait Island for the benefit of Andamanese. 415

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7.05		<p>Hon'ble Chairman further stated that there are demands for providing house sites, complaints have been made that many posts reserved for scheduled tribes are lying vacant He advised the UT administration to conduct special recruitment drive to fill up the posts. He added that the Commission has been briefed that 14 Nicobarese Doctors are working on contract basis for a long time. In other departments also, many scheduled tribe employees are working on ad-hoc/contract basis for years together and their services have not been regularized so far. The administration should regularize the services of such employees. The orders related to reservation in promotion should also be strictly followed in the A&N administration.</p>	<p>Nos. of Banana, 125 Nos of Mango, 90 Nos. of Jackfruit, 415 Nos. of Coconut, 60 Nos. of Guava, 200 Nos. of Lemon, 5 Nos. of Orange & Mausambi and, 40 Nos. of Papaya have been got planted through the Jarawas. • There is 8% reservation in Group 'C' & 'D' posts for the Scheduled Tribes of this UT. There are 1208 STs in Govt. jobs (Nicobarese-1179, Andamanese-22 & Onges-07). Special Recruitment Drives are being conducted by the Administration. Every Appointing Authority has appointed Nodal Officer in respect of their department to ensure implementation of reservation in posts & services for STs. Director of Tribal Welfare is the Nodal Officer for implementation of reservation in services. Roster for reservation in services maintained by Appointing Authorities are inspected by the Nodal Officer from time to time. The reservation in services is monitored through annual statement collected from the appointing authorities.</p>
7.06		<p>Hon'ble Chairman also gave voice to the demands made before the Commission in the list the non local tribals for inclusion in the list of scheduled tribes of A&N Islands particularly the settlers originally hailing from scheduled tribe dominant Chhotta Nagpur region of the main land. He also expressed the apprehension made by the local tribal groups of the Island in this regard. He quoted the Supreme Court judgement in the case of <i>S. Pushpa</i> and opined that being a union territory, it is also applicable to the A&N Islands. He further advised the administration to take a view on the matter whether any special status can be provided to these non local tribals originally hailing from Chhotta Nagpur area of the</p>	<p>The Ministry of Home Affairs vide letter No. U-13034/39/2012-ANL dated 13.4.2013 has intimated that the matter regarding recognition of migrant Ranchi community as Scheduled Tribe in relation to A&N islands is sub-judice in the Hon'ble Supreme Court of India and the proposal for grant of special status to Chota Nagpuri (Ranchi Community) will be considered after pronouncement of the verdict of the Apex Court.</p>

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		<p>mainland settled in the A&N Islands. Then, Hon'ble Chairman requested Shri Aditya Mishra, Jt. Secretary, NCST to discuss the issues as per the reply to the questionnaire. Following issues/points of action emerged out of the detailed discussion held in the meeting:</p> <ul style="list-style-type: none"> The Commission observed that there was inconsistency in expenditure of TSP out of the state plan funds during the 10th plan period and thereafter. A good amount of money remained unutilized during the period. As the Chief Secretary, A&N had admitted that the figures provided by the administration may not be correct, it was advised to check the same and submit correct figures to the Commission. 	<p>In all three districts of this UT TSP is implemented. The details of total tribal reserve area is as under :-</p> <table border="1"> <thead> <tr> <th>Sl.No</th> <th>Name of Tribes</th> <th>Population</th> <th>Total Geographical Area (in sq.kms)</th> <th>Tribal Reserve Area (in sq. Kms)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Andamanese</td> <td>63 (as per actual)</td> <td>6.01</td> <td>6.01</td> </tr> <tr> <td>2</td> <td>Nicobarese</td> <td>27168 (As per 2011 census)</td> <td>899.764</td> <td>899.764</td> </tr> <tr> <td>3</td> <td>Jarawa</td> <td>451 (as per actual)</td> <td>2896.54</td> <td>1040.84</td> </tr> <tr> <td>4</td> <td>Onge</td> <td>118 (as per actual)</td> <td>734.39</td> <td>403.37</td> </tr> <tr> <td>5</td> <td>Seninelese</td> <td>50 (estimated)</td> <td>59.67</td> <td>59.67</td> </tr> <tr> <td>6</td> <td>Shompen/Nicobarese</td> <td>220 (estimated)</td> <td>1044.54</td> <td>853.19</td> </tr> <tr> <td></td> <td>Total</td> <td></td> <td>16,441</td> <td>16,441</td> </tr> <tr> <td></td> <td></td> <td></td> <td>5657.355</td> <td>3279.285</td> </tr> </tbody> </table> <p>(Source: Forest Statistics 2013, Department of Environment & Forest, A&N Islands)</p> <p>As per guidelines lay down by the Govt. of India, Ministry of Tribal Affairs and Planning Commission, Tribal sub-plan for this Union Territory covering as many as 29 sub-sectors are formulated and implemented by the respective line departments of this Administration. Though the population of ST constitutes about 7.5% of the total population, plan funds to a tune of 10% is allocated under TSP.</p> <p>There is an exclusive sub-head of account for Tribal Sub Plan (Code 796) under each functional Major Head / Sub Major Head of each department having Tribal Sub Plan. Tribal Sub Plan schemes are deliberated and finalized by the respective District Planning Committee composed of elected representatives of Panchayati Raj Institutions in respect of South Andaman and North & Middle Andaman Districts. As for Nicobars District which is a tribal district, where majority of the Nicobarese tribal population live, an ITDP has been constituted for implementation of TSP. The DPC for Nicobars District, comprising DC as Chairman, representatives of the Traditional Tribal Councils and local heads of line departments as members deliberates and finalizes the TSP schemes for ITDP area.</p> <p>An Integrated Tribal Development Agency (ITDA) comprising DC, Nicobar as Chairman and line department, representatives as members is functioning to monitor implementation of the TSP in the ITDP</p>	Sl.No	Name of Tribes	Population	Total Geographical Area (in sq.kms)	Tribal Reserve Area (in sq. Kms)	1	Andamanese	63 (as per actual)	6.01	6.01	2	Nicobarese	27168 (As per 2011 census)	899.764	899.764	3	Jarawa	451 (as per actual)	2896.54	1040.84	4	Onge	118 (as per actual)	734.39	403.37	5	Seninelese	50 (estimated)	59.67	59.67	6	Shompen/Nicobarese	220 (estimated)	1044.54	853.19		Total		16,441	16,441				5657.355	3279.285
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		<ul style="list-style-type: none"> The Commission observed that many seats (almost 2/3) in the professional institutions reserved for scheduled tribes during 2007-08, 2008-09 and 2009-10 were not filled. It also happened in the case of admission in ITIs. The Commission advised the UT administration to impart special 	<p>area periodically. At the UT level, the progress on implementation of TSP is reviewed and evaluated by the Secretary (TW), A&N Administration by holding meetings with line departments every quarter. The operational difficulties if any are resolved/ removed by taking corrective measures to achieve the targets under TSP.</p> <p>To look after the welfare of five Particularly Vulnerable Tribal Groups (PVTGs), namely Andamanese, Onges, Jarawas, Sentinelese & Shompens, an autonomous body viz. Andaman Adim Janjati Vikas Samiti (AAJVS) is functioning and it is financed by Grant-in-Aid provided by the A & N Administration under Plan schemes</p> <p>During the year 2015-16 expenditure to the tune of 2413.00 Lakh has been incurred under TSP constituting 10% of the total UT Plan expenditure. Rs. 22597.00 Lakh has been allocated for the year 2016-17 under TSP</p> <p align="center">STATEMENT SHOWING FINANCIAL ACHIEVEMENT UNDER TRIBAL SUB PLAN 2010-11, 2011-12, 2012-13, 2013-14, 2014-15, 2015-16 & Outlay 2016-17</p> <p align="center">(Rs. In Lac)</p> <table border="1"> <thead> <tr> <th colspan="3">Table - II</th> </tr> <tr> <th>S. No.</th> <th>Year</th> <th>Overall Plan Expenditure</th> <th>TSP Expenditure</th> <th>% of TSP</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2010-11</td> <td>84982.91</td> <td>5390.68</td> <td>6.34</td> </tr> <tr> <td>2</td> <td>2011-12</td> <td>128739.27</td> <td>9430.64</td> <td>7.33</td> </tr> <tr> <td>3</td> <td>2012-13</td> <td>148288.36</td> <td>18279.25</td> <td>12.33</td> </tr> <tr> <td>4</td> <td>2013-14</td> <td>159119.80</td> <td>11207.89</td> <td>7.04</td> </tr> <tr> <td>5</td> <td>2014-15</td> <td>173247.93</td> <td>10555.78</td> <td>6.09</td> </tr> <tr> <td>6</td> <td>2015-16</td> <td>236724.00</td> <td>24193.00</td> <td>10.22</td> </tr> <tr> <td>7</td> <td>2016-17 (Outlay)</td> <td>225000.00</td> <td>22597.00 (Outlay)</td> <td>10.0</td> </tr> </tbody> </table> <ul style="list-style-type: none"> There is 8% reservation in Group 'C' & 'D' posts for the Scheduled Tribes of this UT. There are 1208 STs in Govt. jobs (Nicobarese-1179, Andamanese-22 & Onges-07). Though ST population constitutes only 7.5% of the total population, 20% of total seats allocated at GOI and A & N Administration are reserved for STs. Instructions has been issued to the Directorate of mainland and island institutes are reserved for STs. Instructions has been issued for XI/XII Education as well as DC (Nicobar) to provide special coaching for STs. No medical institutes are available in A & N Islands, however out of seats allotted by GOI for the UT students in medical institutions situated in mainland, STs are allotted as per the reservation (i.e. 	Table - II			S. No.	Year	Overall Plan Expenditure	TSP Expenditure	% of TSP	1	2010-11	84982.91	5390.68	6.34	2	2011-12	128739.27	9430.64	7.33	3	2012-13	148288.36	18279.25	12.33	4	2013-14	159119.80	11207.89	7.04	5	2014-15	173247.93	10555.78	6.09	6	2015-16	236724.00	24193.00	10.22	7	2016-17 (Outlay)	225000.00	22597.00 (Outlay)	10.0
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		<p>coaching to the scheduled tribe students at class XI & XII level to fill up the gap. The Commission was informed that the administration is focusing on the subject and professional training in fisheries and computer shall be started from the next session in Car Nicobar Islands. The Commission advised to impart training to the youths in new areas as per the requirement of the market such as crafts, hospitality industry, construction work etc. so that the students taking admission in such courses get employment in the open market.</p>	<p>20%).</p> <ul style="list-style-type: none"> ITI/VTI and Employment Exchange has been established in the Nicobar District. 67 tribal youths were given skill training and 65 undergoing training for their gainful employment. Due to non-availability of qualified ST candidates for technical posts special recruitment drives are planned to fill up the vacant posts. The tribal students are being nominated to professional and technical courses in mainland institutions and colleges against the reserved quota in order to improve their representations in technical posts in due course in time The Administration is providing scholarships to the STs students for pursuing their studies at various levels. An MoU has also been executed with Manidha Naeyam Free IAS, IPS Academy, a charitable trust located at CIT Nagar at Chennai, for preparing aspirants belonging to Nicobarese tribe for Civil Services Examination, the expenditure of which is being borne by the Administration through the Integrated Tribal Development Agency headed by Deputy Commissioner (Nicobar).
	<ul style="list-style-type: none"> The Jt. Secretary of the Commission inquired about the preparation made by the UT administration with regard to implementation of Right to Education Act. It was informed that as per the norms, parent teacher ratio at primary level is 35 and at secondary level it is 40. In A&N, it is 15 and 16 respectively which is quite better in comparison to many states and UTs. It was also informed that the number of primary and secondary schools are sufficient as per the requirement. Recently some primary schools have been upgraded to secondary school to serve the people. As far as improvement in quality education is concerned, teachers are being given in service training to improve their skills. The Commission pointed out that at graduate level, 608 students appeared in the examination out of which 391 students passed the examination. It included 59 ST students who appeared in the examination but only 25 of them could pass the exam. 	<ul style="list-style-type: none"> The literacy rate of ST population is 75.6 (2011), which was only 66.8 as per 2001 Census showing an increase of 11%. The literacy rate amongst male & female is 80.9% and 69.9% respectively. The number of School-going STs Students is 5942 (M 3080 + F 2862) and ST Teachers is 415 (M 181 + F 234). ANTRI in collaboration with AAJVS & TW Department has started the schooling concept and provided the books of bi-lingual & bi-cultural curriculum of education to the Jarawa children on 22.10.2014 Shri Anup Kumar Mondal, Tribal Welfare Officer has been appointed as Principal Facilitator for the Ang Katha project (Jarawa Education). Two Laptops and 2 Tablets have been provided to the Principal Facilitator. The details showing the number of Jarawa students enrolled are as under: - <ul style="list-style-type: none"> Middle Strait - 59 students Kadamtala - 55 students Tirur - 29 students. 15 days class has been completed last three months. The average students in each class are 17 students. 42 Onge students are enrolled in the Primary School at Dugong Creek. One Onge boy Shri Samir has been engaged as Teacher to educate the Onge children in their own language and traditional. 21 Great Andamanese students are studying in different schools and colleges in various classes. The Education Department however is seized with the matter to upgrade the skill knowledge of STs in clearing the exams 	

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		<p>Thus there is a need for more attention to improve the performance of scheduled tribe students at this level. The Commission also desires to know the number of special coaching classes organized for the scheduled tribe students during last two years and the number of students who attended these classes. It was assured that the information will be sent to the Commission shortly.</p> <p>The Chairman, NCST intervened in the discussion and desired to know whether the UT administration has sought any assistance from Ministry of Tribal Affairs for construction of hostels for tribal students, especially girls in view of the fact that the hostel at Teressa Island got completely destroyed during Tsunami in the year 2004. The Commission was informed that at present, tribal students from Nicobars are staying in general hostel at various schools and colleges at Port Blair and other places. Hon'ble Chairman advised the UT administration to assess the demand of the tribal boys and girls and in case there is a demand, proposals should be sent to MTA for providing such assistance. He also advised the administration to review the situation and ensure timely payment of scholarship to the tribal students studying in the mainland.</p> <p>The Commission also discussed about the availability of health services to the scheduled tribes in the Islands. It was admitted that there is shortage of specialist doctors as they are not willing to serve here. However the</p>	<p>Under Centrally Sponsored Scheme namely "Scheme of Hostel for ST Girls and Boys and Establishment of Ashram Schools in TSP areas", the Dy Commissioner, Nicobar District has been requested to explore the feasibility of constructing the hostels for boys and girls of ST community in Nancowrie group of Island in Nicobar Tribal District in consultation with the Tribal Councils. The proposal shall be submitted to the Ministry for seeking financial assistance once the requisite information/ detailed estimates etc are received.</p> <p>As regards the mainstreamed tribal community of Nicobarese is concerned, it may be pointed out that they constitute the largest tribal community amongst the Scheduled Tribes of A&N Islands and their health requirements etc are met through the District Hospital at Car Nicobar, the Community Health Centre at Nancowry, two Primary Health Centre at Katchal & Teressa Island and 31 Sub-Centres in Nicobar Group of Islands serving 27676 Nicobarese Tribe. In addition to above they are also entitled to specialized medical treatment in the Premier Health Institutions in the mainland, the entire cost of which including their</p>

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		<p>administration has made arrangements through tie up with Amritha Institute of Medical Sciences and the services of specialist doctors are taken for shorter duration. There is GB Pant hospital at Port Blair where all specialist doctors are available. If any emergency arises in the far-flung Islands, the patients are evacuated from there and brought to Port Blair for treatment. On being asked, the Commission was informed that the problem of hypertension is occurring in the tribals of Car nicobar mainly due to change of lifestyle and trauma of Tsunami.</p>	<p>travelling expenses with or without attendant is borne by the Administration. In the year 2014-15, four such patients had availed this benefit and their entire cost on medical treatment including the cost of their travelling along with attendants were borne by this Administration.</p> <p>In regard to the status of the health of Particularly Vulnerable Tribal Groups (PVTGs) of Andaman and Nicobar Islands, the information required by the Hon'ble Committee has been prepared based on the available health survey reports in the Directorate of Health Services, the Regional Medical Research Centre, Port Blair and the Directorate of Tribal Welfare, as under :</p> <p>1. Shompens of Great Nicobar Island :</p> <p>The Deputy Director (Tribal Health) in the Directorate of Health Services, A&N Administration had carried out the health survey of Shompen tribes of Lawful Bay on 29th October, 2014 and submitted his report on 28.11.2014, the salient features of which were as under :</p> <p>(a) The health survey of 21 Shompens belonging to two families (Maingie with 12 members and Akaaon with 8 members) comprising of 8 adults (5 male + 3 female and 13 children below 18 years (5 male + 8 female) of Lawful Bay area in Great Nicobar was conducted by DD(TH).</p> <p>(b) Out of 3 Adult females, 2 were carrying full term pregnancy and the other was lactating mother with 6 month old female infant.</p> <p>(c) The Tribal Community of Shompen at Lawful Bay was very young with average age of 21 years, minimum age 6 month and maximum of 55 years. Among 21 people, 11 are female, 10 are male with healthy sex ratio at birth of 1100 females/1000 males, as compared to 946/1000 males of Andaman & Nicobar Islands, shown in the table below.</p> <table border="1" data-bbox="1088 626 1218 1601"> <thead> <tr> <th></th> <th>Male</th> <th>Female</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Adult</td> <td>5</td> <td>3</td> <td>8</td> </tr> <tr> <td>Children</td> <td>5</td> <td>8</td> <td>13</td> </tr> <tr> <td>Total</td> <td>10</td> <td>11</td> <td>21</td> </tr> </tbody> </table> <p>(d) The members of the community were moderately built and moderately nourished and their weight for age as per WHO criteria was well within the normal range.</p> <p>(e) There was no obesity or underweight except for 2 children i.e. one girl child named Obadai aged 13 years and one male child named Madhao 8 years, both children of Mingie, who were diagnosed as underweight.</p> <p>(f) None of them were found to be suffering from Vitamin 'A' deficiency, goiter, protein energy malnutrition, cardiac or respiratory disease.</p> <p>(g) As the children aged less than 10 years were found having protuberance of abdomen (pot bellied) indicating worm infestation, medication in the form of tablet /syrup Albendazole stat dose were given to them for de-worming.</p> <p>(h) Four persons were suffering from extensive fungal infection of the skin and were treated with anti fungal ointment, and tablet Ketokonazole.</p> <p>(i) Of the two pregnant women, Aahoon w/o Kakauan 42 years old had full term normal pregnancy with</p>		Male	Female	Total	Adult	5	3	8	Children	5	8	13	Total	10	11	21
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		<p>(i) approximately 36 weeks' size of uterus, vertex presentation, foetal heart sound was heard and was also found to be suffering from gingivitis and moderate anemia (Hb 8.5 %). The other pregnant woman, Anaayat w/o. Mingie aged 45 years had with full term pregnancy with approximately 36 weeks' size of uterus, foetal heart sound was faintly heard and found suspected to be hydromnion. Both were treated with Haematinic (Iron Syrup) and advised/motivated to come to PHC Campbell Bay for safe delivery.</p> <p>The analyses of hemoglobin count revealed that the average Hb% was 10 gm with minimum 7 gm and maximum 13 gm. and 90% (20/21) of the total subjects surveyed was suffering from anaemia of which 10% (2/20) was having severe anaemia, 30% (6/20) having moderate and 60% (12/20) having mild anaemia. Two children namely Madhao 8 yrs and Obadae 13 yrs female child were suffering from severe anaemia, as per the details below :</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">Adult</th> <th colspan="2">Children</th> <th rowspan="2">Total</th> </tr> <tr> <th>Male</th> <th>Female</th> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>Anaemia</td> <td>5</td> <td>1</td> <td>2</td> <td>4</td> <td>12</td> </tr> <tr> <td>Mild</td> <td>0</td> <td>2</td> <td>1</td> <td>3</td> <td>6</td> </tr> <tr> <td>Moderate</td> <td>0</td> <td>0</td> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>Severe</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> </tr> <tr> <td>No anaemia</td> <td>1</td> <td>0</td> <td>4</td> <td>8</td> <td>21</td> </tr> <tr> <td>Total</td> <td>6</td> <td>3</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>All the individuals except 6 month infant and 2 pregnant women were administered with deworming tablet Albendazole (400 mg stat) and the anaemic adult /children were given Haematinics (Iron Syrup) and advised them to take 5 ml (1 cap full) for mild and moderate anaemia and 10 ml (2 caps full) for severe anaemia. One 13 years old female child Obadae D/o. Mingie was suffering from severe anaemia with Polyarthritus and Multiple Pyoderma in left thigh and was treated with appropriate antibiotic.</p> <p>2. Onges of Little Andaman A health and nutritional study of the Onge tribe of Dugong Creek in Little Andaman was conducted by the District Health Society (South Andaman) under the National Health Mission in collaboration with the experts from the Regional Medical Research Centre (ICMR), Port Blair, the Directorate of Health Services (DHS) and Andaman & Nicobar Adim Jan Jati Vikas Samiti (AAJVS) of the Department of Tribal Welfare in the month of December, 2013 and submitted their report on December, 2013, the salient features of which were as under :</p> <p>(a) The population of 112 Onges comprising of 54 females and 58 males were surveyed by the team. The overall sex ratio was found to be 931 females per 1000 males as against 946/1000 males of Andaman & Nicobar Islands. However, there was a great deal of variation in the sex ratio in different age categories and varied from 91 in the age group of 10-14 years to 4000 in the age group of 45-49 years which was due to small number of persons in each category.</p> <p>(b) The demographic features indicated that the Onge population was young population as compared to the Indian population and the age pyramid was consistent with an early expanding population with high birth rate, however, the high mortality in the middle ages was observed.</p> <p>(c) The nutritional disorders, both under and over nutrition were prevalent amongst the Onge community. The school age children and adolescents suffered from both under-nutrition and over-nutrition while</p>		Adult		Children		Total	Male	Female	Male	Female	Anaemia	5	1	2	4	12	Mild	0	2	1	3	6	Moderate	0	0	1	1	2	Severe	1	0	0	0	1	No anaemia	1	0	4	8	21	Total	6	3			
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			<p>almost all pre-school children had severe degree of under-nutrition with majority of them having stunting as well.. The Onge adults had rather desirable nutritional status with about 2/3rd of them having desirable Body Mass Index (BMI). Although the growth standards are considered to be race neutral, the role of hereditary factor in the overall lower heights of the Onge pre-school children could not be entirely ruled out.</p> <p>(d) The prevalence of under nutrition observed among children in the age group of 0-18 years during the survey in the 1990s was 92.7%. The results of the present survey showed that the prevalence of under nutrition among the older children had substantially decreased and a significant proportion of the older children had become over weight/obese. While the reduction in the prevalence of under-nutrition was observed to be a welcome change, the emergence of overweight and obesity was viewed with concern, because this could be an early warning to indicate adult Onge population was moving towards a high cardiovascular risk zone.</p> <p>(e) The estimation of Hemoglobin concentration carried out by rapid method using strips for a total of 67 Onge subjects showed that none of the children below 15 years of age was found anemic. On clinical examination, 'slight' pallor was observed in 35 (31.3%), mild pallor in 32 (28.6%) and moderate pallor in one (0.9%) of the Onges.</p> <p>(f) Total cholesterol was estimated in 51 subjects (28 females and 23 males) above the age of 14 years. The mean level of total cholesterol was 157.5 mg/dL (SD: 33.3). The mean levels in men was 147.2 mg/dL (SD: 36.3) and that among women was 165.9 mg/dL (SD: 28.5). None of the Onges had total cholesterol level above 250 mg/dL (considered as a definite cardiovascular risk factor).</p> <p>(g) The mean HDL level of the 51 Onges who were tested for HDL levels was 48.6 mg/dL (SD: 15.6). The mean HDL level for men was 41.5 mg/dL (SD: 13.3) and that for women was 54.4 mg/dL (SD: 15.1). A total of eight (15.7%) of the tested Onges had HDL levels <35 mg/dL. The low HDL levels appeared to be more prevalent among Onge men than in Onge women.</p> <p>(h) At the time of the survey, eight (7.1%) of the Onges were found suffering from fever of 1-2 days' duration and two (1.8%) subjects were having diarrhea. At present there are two registered cases of pulmonary tuberculosis and one case of extra-pulmonary tuberculosis (Spinal TB). These two cases were among the 61 Onges aged 15 years and above. There were two old cases of pulmonary TB and one old case of extra-pulmonary TB. The current prevalence of TB was 32.8 cases per 1,000 population (95% CI:4.0, 113.5). Though the number was too small to draw any conclusions about the problem of pulmonary tuberculosis among the Onges, but the present data had raised concern about the TB situation among the Onges.</p> <p>(i) Three subjects were diagnosed with congenital heart disease giving a prevalence of 2.7% for congenital heart disease among them. There were three known cases of bronchial asthma giving a prevalence of 2.7% besides a case of psychiatric disorder (bipolar disorder) diagnosed.</p> <p>(j) Serum samples from 50 Onges were tested for anti-leptospiral antibodies by Microscopic Agglutination Test (MAT) using 10 live leptospiral strains as antigens and three (6%) gave a titre of 1 in 80 or more. One reacted against serogroup Hebdomedis, another against serogroup Icterohaemorrhagiae and the third gave equal titres against serogroups Grippityphosa and Pyrogenes. The fourth sample gave a titre of 1 in 40 against serogroup Pomona. All the three seropositives were aged above 30 years and two of the three were males.</p>

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		<p>(k) A total of 25 Onges were subjected to blood grouping, genotyped R traits, tested for duffy status, Glucose-6-Phosphate Dehydrogenase deficiency and haemoglobin types. Twenty (80%) of the Onges tested had Blood Group 'A' Rh positive and the remaining 5 (20%) had 'O' Rh Positive. The most probable genotype of 20 Onges tested was R₁ R₂. The Duffy status was Fy(a+b-) for 20, Fy(a+b+) for four and Fy(a-b-) for the remaining one Onge. None of the Onges tested had G6-PD deficiency and the haemoglobin type of all was found normal.</p> <p>(l) Fasting blood glucose levels were measured in 51 subjects, of which 37 were 25 years and above and 14 subjects in the age group of 15-24 years. A fasting blood glucose level ≥ 127 mg/dL was taken as indicative of diabetes mellitus and a blood glucose ≥ 100 mg/dL, but < 127 mg/dL as indicative of pre-diabetes. A total of six diabetics (three males and three females) were detected with an overall prevalence of 11.8% (95% Ci: 4.4, 23.9). Another 17 (33.3%, 95% Ci: 20.8, 47.9) were detected as pre-diabetics.</p> <p>(m) Stool samples were collected from 50 Onges including 8 children below the age of five years. These samples were microscopically examined for ova/cysts of intestinal parasites. Out of the 50 Onges including 08 children screened, 35 (70%) harboured ova/cyst of one or more intestinal parasites. Trichuris trichura was found to be the most frequent intestinal helminthes infesting the Onges, the ova of which were detected in 27 (54%) Onges. The only other helminthic infestation detected was Ascariasis, which was present in 15 (30%) of the subjects and 7 (14%) subjects had mixed infestation of Ascaris and Trichuris. However, among the eight under-fives screened, four (50%) had Ascaris infestation and three (37.5%) had Trichuris infestation whereas the children had mixed infestation of Ascaris and Trichuris.</p> <p>(n) Of the 28 Onge children in the age group of 2-9 years, 8 of them had palpable spleen giving a spleen rate of 28.6% (95% Ci: 13.2, 48.7). As per the malaria endemicity classification, this indicates that malaria could be mesoendemic among the Onge community, however, this date required to be correlated with other malaria indices such as child parasite rate.</p> <p>3. Jarawas of South Andaman and Middle & North Andaman: The Deputy Director (Tribal Health) of the Directorate of Health Services of this Administration jointly with the Regional Medical Research Centre, Port Blair and AAIYS of the Dept of Tribal Welfare had just carried out survey of 304 out of 442 Jarawas in South and North & Middle Andaman Districts. The survey of the remaining subjects is likely to be completed soon and preparation of a detailed report like that of Onges/Andamanese shall take some time.</p> <p>Besides the above, the Administration, with the objective of preventing vaccine-preventable diseases, had got a study carried out by the Regional Medical Research Centre, Port Blair on health and nutritional status by collecting biological samples including blood samples to assess normality of immune related cells and their ability to induce immune response against known immunogens/antigens of 57 children aged 1-14 years of Jarawas. The findings of the report received on 18.05.2015 are as under:</p> <p>(a) Absolute count of T Cell subsets (CD4 and CD8) and ratio (CD4:CD8) were estimated. Out of 57 blood</p>

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			<p>samples, 46 samples from Jarawa along with samples from 7 age matched non-tribal children from South Andaman could be processed for absolute quantification of CD4 and CD8 T lymphocyte subsets. The CD4 (helper/inducer T lymphocyte subsets) counts in the majority of Jarawa children were observed to be in the range of 952-1589/?L. However in a small proportion of the children raised levels of CD4 T lymphocytes was observed. This could probably be due to viral infections. CD8 (cytotoxic/suppressor T lymphocyte subsets) cells were found to be in the range of 363-998/?L.</p> <p>These observations indicate that the counts of T helper cells (CD4+) in majority of the Jarawa children are within the normal range. Results also indicate that none of the Jarawa children has the CD4+ (T helper cell) count < 500/?L.</p> <p>(b) Immune response was assessed by stimulation of PBMCs/whole blood with known immunogen, intracellular cytokine staining and estimation of levels of IL2, IFN-g and TNF. Blood samples from 30 to 57 Jarawa children along with samples from 7 age matched non-tribal children from South Andaman could be processed for this. PBMCs/whole blood were stimulated and immune response among the stimulated cells were analysed. PBMCs/whole blood collected from seven age matched non-tribal children in South Andaman acted as controls.</p> <p>The expression levels of the cytokines i.e. IL-2,IFN-g and TNF by the stimulated T lymphocytes of the tribal children were equal or higher than the expression levels of these cytokine by the T lymphocytes in non-tribal children.</p> <p>The significant expression levels of IFN-γ and TNF indicate that T cell mediated immune response among the Jarawa children is adequate. The increased expression levels of IL-2 indicate that immune response is long lasting in nature as IL-2 is crucial for the maintenance of regulatory T cells and is involved in differentiation of CD4(+) T cells in to effector T cells (CD8+ T cells). Moreover, IL-2 signals optimize both effector T cell generation and differentiation into memory cells.</p> <p>(c) Studies were undertaken to assess the normalities of the cells involved in conferring immunity and immune response among the Jarawa children. Age matched non-tribal children in South Andaman were included as controls. The absolute counts of cells involved in the immune system, particularly CD4+ T lymphocytes (T helper cells), were found to be within normal ranges. These T helper cells play an important role in preventing acquisition of various infectious diseases. CD8+ T lymphocytes (cytotoxic or suppressor cells) counts were also found to be within the normal range. However, in a small proportion of the children, elevated levels of T helper cells were observed. This phenomenon could be due to current sub-clinical viral infections or viral infections in the recent past from which the subject has recovered. None of the Jarawa children had CD4+ lymphocytes (T helper cells) counts <500 cells/μL indicating that none of the Jarawa children were immune-deficient.</p> <p>(d) The study also showed that the cellular immune response (Th1 response - cell mediated) of the tribal children was as good as that of non-tribal children. However, when the PBMCs or whole blood was stimulated with known immunogen, the expression levels of the cytokines among the T lymphocytes were observed to be comparatively higher. This could be because of the comparatively lower exposure of Jarawa children to various infectious agents as the Jarawa children reside in areas away from those areas inhabited by the non-tribal people among whom circulation of infectious agents is common.</p>

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			<p>(e) Because of the observed normal counts of the immune related cells that conferring immunity in particular CD4+ T lymphocytes (T helper cells) and CD8+ T lymphocytes (cytotoxic or suppressor cells) and the normal immune response to stimulation by immune stimulant among the Jarawa children, it is expected that if vaccines are administered the immune responses would be adequate and the persistence of vaccine induced antibodies would be long lasting.</p> <p>(f) The study assessed the normalities of the cells involved in conferring immunity and the response to non-specific immune stimulant among the Jarawa children and these were found to be normal. However, response to specific vaccine can only be assessed by estimating the levels of antibodies produced in response to the respective vaccine. This information would be valuable in understanding the exact nature of the response to each vaccine. Therefore, immunological follow up of the vaccinated children is essential because Jarawa population has no prior exposure to vaccines and it is important to document their immunological response to specific vaccines.</p> <p>4. Great Andamanese of Strait Island : A health and nutritional study of the Great Andamanese tribe of Strait Island was conducted by the District Health Society (South Andaman) in collaboration with the experts from the Regional Medical Research Centre (ICMR), Port Blair, the Directorate of Health Services (DHS) and Andaman & Nicobar Adim Jan Jati Vikas Samiti (AAJVS) of the Department of Tribal Welfare in the month of December, 2014/January, 2015, and submitted their report on 20.05.2015, the salient features of which were as under :</p> <p>(a) There were only 2 preschool aged children, a one month old baby girl and a boy aged 20 months. While anthropometric measurements were not made on the baby girl, measurements were taken on the boy and he was found to be stunted by having body weight within normal range, but was slightly overweight for his height.</p> <p>(b) Anthropometric measurements were available from 23 school aged (6-18 years) children and among them 15 (62.5%) had normal Body Mass Index (BMI). Two girls had a better nutritional status as none of them was underweight or obese, though 3 out of the 12 girls were overweight.</p> <p>(c) Out of the 32 Andamanese adults, whose anthropometric measurements were available, 9 (29.0%) had BMI within normal range, Fourteen (43.8%) were overweight and 7 (22.6%) were obese. Overweight and obesity were more among the males while underweight were more prevalent among the Andamanese women as shown in the table given below :</p> <p style="text-align: center;">Nutritional categories of Andamanese adults</p> <table border="1"> <thead> <tr> <th rowspan="2">Nutritional category</th> <th colspan="2">Male</th> <th colspan="2">Female</th> <th colspan="2">Total</th> </tr> <tr> <th>No.</th> <th>(%)</th> <th>No.</th> <th>(%)</th> <th>No.</th> <th>(%)</th> </tr> </thead> <tbody> <tr> <td>Underweight (BMI < 18.5)</td> <td>0</td> <td>0.0</td> <td>2</td> <td>13.3</td> <td>2</td> <td>6.3</td> </tr> <tr> <td>Normal (BMI 18.5 - 24.9)</td> <td>6</td> <td>35.3</td> <td>3</td> <td>20.0</td> <td>9</td> <td>28.1</td> </tr> <tr> <td>Overweight (BMI 25.0 - 29.9)</td> <td>10</td> <td>58.8</td> <td>4</td> <td>26.7</td> <td>14</td> <td>43.8</td> </tr> <tr> <td>Obese (BMI >30.0)</td> <td>1</td> <td>5.9</td> <td>6</td> <td>40.0</td> <td>7</td> <td>21.9</td> </tr> </tbody> </table>	Nutritional category	Male		Female		Total		No.	(%)	No.	(%)	No.	(%)	Underweight (BMI < 18.5)	0	0.0	2	13.3	2	6.3	Normal (BMI 18.5 - 24.9)	6	35.3	3	20.0	9	28.1	Overweight (BMI 25.0 - 29.9)	10	58.8	4	26.7	14	43.8	Obese (BMI >30.0)	1	5.9	6	40.0	7	21.9
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		<p>(d) Complete blood counts and liver and kidney function tests were performed on 23 Andamanese. No gross abnormalities in blood counts or other haematological parameters were detected. Blood urea, serum creatinine, serum bilirubin, ALT, AST and alkaline phosphatase levels were found within their normal range.</p> <p>(e) Haemoglobin concentration was estimated in 55 Andamanese and among them 36 (65.5%) were anaemic based on the haemoglobin cut-off for anaemia for their age, gender and physiological status. Anaemia prevalence was 48.3% among males and 84.6% among women. Four Andamanese, three girls aged less than 10 years and a man aged 40 years were severely anaemic. The prevalence of Anaemia by age group and gender in Great Andamanese was found as under :</p> <p style="text-align: center;"><i>Prevalence of anaemia by age and gender</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Age group</th> <th colspan="2">Male</th> <th colspan="2">Female</th> <th colspan="2">Total</th> </tr> <tr> <th>Tested</th> <th>Anaemic (%)</th> <th>Tested</th> <th>Anaemic (%)</th> <th>Tested</th> <th>Anaemic (%)</th> </tr> </thead> <tbody> <tr> <td>0-9</td> <td>3</td> <td>0.0</td> <td>6</td> <td>4 66.7</td> <td>9</td> <td>4 44.4</td> </tr> <tr> <td>10-19</td> <td>10</td> <td>50.0</td> <td>6</td> <td>5 83.3</td> <td>16</td> <td>10 62.5</td> </tr> <tr> <td>20-29</td> <td>7</td> <td>3 42.9</td> <td>3</td> <td>3 100.0</td> <td>10</td> <td>6 60.0</td> </tr> <tr> <td>30-39</td> <td>5</td> <td>3 60.0</td> <td>6</td> <td>5 83.3</td> <td>11</td> <td>8 72.7</td> </tr> <tr> <td>40-49</td> <td>3</td> <td>2 66.7</td> <td>3</td> <td>3 100.0</td> <td>6</td> <td>5 83.3</td> </tr> <tr> <td>50-59</td> <td>0</td> <td>0 -</td> <td>1</td> <td>1 100.0</td> <td>1</td> <td>1 100.0</td> </tr> <tr> <td>60+</td> <td>1</td> <td>1 100.0</td> <td>1</td> <td>1 100.0</td> <td>2</td> <td>2 100.0</td> </tr> <tr> <td>Total</td> <td>29</td> <td>14 48.3</td> <td>26</td> <td>22 84.6</td> <td>55</td> <td>36 65.5</td> </tr> </tbody> </table> <p>(f) Blood pressure was recorded in 9 men and 8 women and among them 7 men 3 women had hypertension (BP \geq140/90 mm Hg) and four men had severe hypertension (BP \geq160/100 mm Hg. Hypertension prevalence appeared to be on the higher side but the number was too small to make a definite conclusion.</p> <p>(g) Fasting blood glucose was estimated in 16 Andamanese adults and three (18.8%) had fasting blood glucose level more than 125 mg% indicative of diabetes mellitus. In addition, two other individuals had fasting blood glucose levels in the range of 110-125 mg% indicative of prediabetes.</p> <p>(h) Serum lipid profile test was done on 32 Andamanese (17 males and 15 females) of which only five (15.6%) subjects had cholesterol level above 200 mg% (3 males and 2 females) and none of them had</p>	Age group	Male		Female		Total		Tested	Anaemic (%)	Tested	Anaemic (%)	Tested	Anaemic (%)	0-9	3	0.0	6	4 66.7	9	4 44.4	10-19	10	50.0	6	5 83.3	16	10 62.5	20-29	7	3 42.9	3	3 100.0	10	6 60.0	30-39	5	3 60.0	6	5 83.3	11	8 72.7	40-49	3	2 66.7	3	3 100.0	6	5 83.3	50-59	0	0 -	1	1 100.0	1	1 100.0	60+	1	1 100.0	1	1 100.0	2	2 100.0	Total	29	14 48.3	26	22 84.6	55	36 65.5				
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			<p>cholesterol levels of 250 mg% or above. Three (20%) of the 15 women had triglyceride level above 200 mg% and one amongst them had level more than 400 mg%. In contrast 7 (41.2%) men had levels more than 200 mg% and one had triglyceride level more than 400 mg%, nine (53.0%) men and 8 (53.3%) women had HDL cholesterol levels below 40 mg%.</p> <p>The report submitted by RMRC indicated that</p> <ol style="list-style-type: none"> i. the population of Andamanese were found to be increasing after it declined to alarmingly low numbers in late 1990s. ii. the overall sex ratio was low (794 per 1000 males as per RMRC's Report, 2014-15) and there existed some imbalance between genders in several age groups. The reason for low number of pre-school aged children however required to be ascertained whether they had the problem of low fertility. iii. the nutritional status of the school aged children had improved since the last survey when 77% of the children below 19 years of age were undernourished. The nutritional problems among the Andamanese adults seem to be that of over nutrition with about 66% (21 of the 32) of the adults being either overweight or obese. iv. Anaemia was found to be widely prevalent among the women and to a lower extent among the men also. v. there is a need to monitor their hypertension levels and the data, though too small to make a definite conclusion, indicated that a large proportion of the adults were hypertensive. vi. the prevalence of diabetes appeared to be as high as 19%. Dismissing it because of the small sample size could probably be erring on the risky side. vii. Dyslipidaemia, particularly low HDL levels also appeared to be an important problem. viii. the high prevalence of obesity and overweight, hypertension, diabetes, dyslipidaemia and alcohol and smokeless tobacco use makes the Andamanese a high risk population group for chronic non-communicable disease. <p>5. Sentinelese of Sentinel Island : Though no data is available as the tribe is still hostile to anybody's approaching their territory, the Administration has put in place an institutional arrangement of proper surveillance of the island territory through Police Marine Force of the Administration and Indian Coast Guard/Indian Navy to prevent any attempt of unlawful activities/entry into their territory by outsiders.</p> <p>HEALTH CARE AND MEDICAL FACILITIES EXTENDED TO THE PYTGS BY THE ADMINISTRATION.</p>

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			<p>A. Exclusive medical wards in PHCs located near the Jarawa Reserve at Tushnabad, Kadamtala and GB Pant Hospital, Port Blair have been set up for treatment of Jarawas. Such wards are also declared as Tribal Reserve under the Protection of Aboriginal Tribes Regulation, 1956 to prevent any interaction of the unauthorised non-tribals with the PVTGs.</p> <p>B. Medical sub centres have been established by the Administration at Dugong Creek in Little Andaman & Strait Island for providing the health care facilities to the Onges & Andamanese tribes. Two Special Health Camps with Super Specialists were organized at Dugong Creek & Strait Island.</p> <p>C. Health card of each individual of PVTGs is maintained by Tribal Welfare Officers of AAJVS/Medical Sub Centres and are regularly updated.</p> <p>D. Dy Director (Tribal Health) along with Para Medical staff of Directorate of Health Services periodically visit the Jarawa/ Shompen/ Onges/ Andamanese areas to provide in-situ health care. In cases of emergency, the patients are evacuated for specialized treatment to the nearest hospitals / GB Pant Hospital at Port Blair or even to the mainland alongwith the attendant/medical escort for specialized treatment at the cost borne by the Administration.</p> <p>E. During the year 2014-2015, the Jarawas, Onges & Andamanese have availed medical/ health care on 388, 1123 & 216 occasions, PVTG-wise details of which are given below: -</p>																																																																																																																																																																									
			<p>(I) JARAWA TRIBE AVAILED MEDICAL FACILITIES FROM APRIL 2014 TO MARCH, 2015</p> <table border="1"> <thead> <tr> <th>Months</th> <th>No. of Cases</th> <th>RTI</th> <th>Diarrhoea</th> <th>Viral fever</th> <th>Malaria</th> <th>TB</th> <th>Injury</th> <th>Mensles</th> <th>Skin infection</th> <th>Mumps</th> <th>Conjunctivitis</th> <th>Others</th> </tr> </thead> <tbody> <tr> <td>April 2014</td> <td>11</td> <td>03</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>02</td> <td>00</td> <td>00</td> <td>00</td> <td>02</td> <td>03</td> </tr> <tr> <td>May 2014</td> <td>21</td> <td>10</td> <td>02</td> <td>03</td> <td>00</td> <td>00</td> <td>02</td> <td>00</td> <td>00</td> <td>00</td> <td>02</td> <td>02</td> </tr> <tr> <td>June 2014</td> <td>67</td> <td>28</td> <td>05</td> <td>14</td> <td>02</td> <td>00</td> <td>04</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>14</td> </tr> <tr> <td>July 2014</td> <td>34</td> <td>10</td> <td>06</td> <td>07</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>05</td> <td>00</td> <td>00</td> <td>05</td> </tr> <tr> <td>Aug 2014</td> <td>11</td> <td>01</td> <td>00</td> <td>04</td> <td>00</td> <td>00</td> <td>03</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>03</td> </tr> <tr> <td>Sept 2014</td> <td>61</td> <td>08</td> <td>02</td> <td>32</td> <td>00</td> <td>00</td> <td>04</td> <td>00</td> <td>02</td> <td>00</td> <td>00</td> <td>13</td> </tr> <tr> <td>Oct 2014</td> <td>53</td> <td>17</td> <td>03</td> <td>12</td> <td>00</td> <td>00</td> <td>07</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>14</td> </tr> <tr> <td>Nov 2014</td> <td>15</td> <td>04</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>03</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>07</td> </tr> <tr> <td>Dec 2014</td> <td>56</td> <td>23</td> <td>05</td> <td>07</td> <td>00</td> <td>00</td> <td>04</td> <td>00</td> <td>05</td> <td>00</td> <td>00</td> <td>12</td> </tr> <tr> <td>Jan 2015</td> <td>38</td> <td>12</td> <td>02</td> <td>11</td> <td>00</td> <td>00</td> <td>03</td> <td>00</td> <td>03</td> <td>00</td> <td>00</td> <td>07</td> </tr> <tr> <td>Feb 2015</td> <td>08</td> <td>03</td> <td>01</td> <td>02</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>02</td> </tr> <tr> <td>Mar</td> <td>13</td> <td>03</td> <td>01</td> <td>03</td> <td>00</td> <td>00</td> <td>02</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>03</td> </tr> </tbody> </table>	Months	No. of Cases	RTI	Diarrhoea	Viral fever	Malaria	TB	Injury	Mensles	Skin infection	Mumps	Conjunctivitis	Others	April 2014	11	03	00	01	00	00	02	00	00	00	02	03	May 2014	21	10	02	03	00	00	02	00	00	00	02	02	June 2014	67	28	05	14	02	00	04	00	00	00	00	14	July 2014	34	10	06	07	00	00	01	00	05	00	00	05	Aug 2014	11	01	00	04	00	00	03	00	00	00	00	03	Sept 2014	61	08	02	32	00	00	04	00	02	00	00	13	Oct 2014	53	17	03	12	00	00	07	00	00	00	00	14	Nov 2014	15	04	00	01	00	00	03	00	00	00	00	07	Dec 2014	56	23	05	07	00	00	04	00	05	00	00	12	Jan 2015	38	12	02	11	00	00	03	00	03	00	00	07	Feb 2015	08	03	01	02	00	00	00	00	00	00	00	02	Mar	13	03	01	03	00	00	02	00	01	00	00	03
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2015	388	122	27	97	02	00	35	00	00	16	00	04	85
Total													

I) ONCE TRIBE AVAILED MEDICAL FACILITIES FROM APRIL 2014 TO MARCH, 2015

Months	No. of Cases	RTI	Diarrhoea	Viral fever	Malaria	TB	Measles	Injury	Mumps	Hepatitis	Skin infection	Conjunctivitis	Others
April 2014	54	10	07	06	00	00	00	01	00	00	02	00	66
May 2014	98	13	04	04	00	00	00	06	00	00	05	00	24
June 2014	73	19	12	05	00	00	00	11	00	00	02	01	26
July 2014	70	20	05	07	00	00	00	11	00	00	02	00	35
Aug 2014	83	25	14	07	00	00	00	02	00	00	04	00	35
Sept 2014	64	08	11	04	00	00	00	02	00	00	02	00	25
Oct 2014	53	15	04	02	00	00	00	05	00	00	02	00	34
Nov 2014	64	09	10	05	00	00	00	02	00	00	04	00	07
Dec 2014	58	25	15	05	00	00	00	01	00	00	05	00	101
Jan 2015	163	27	31	02	00	00	00	00	00	00	02	02	50
Feb 2015	114	30	08	21	00	00	00	03	00	00	00	00	178
Mar 2015	229	15	29	05	00	00	00	01	00	00	01	00	609
Total	1123	216	150	73	00	00	00	43	00	00	29	31	609

II) ANDAMANNESE TRIBE AVAILED MEDICAL FACILITIES FROM APRIL 2014 TO MARCH, 2015

Months	No. of Cases	RTI	Diarrhoea	Viral fever	Hypertension	TB	Measles	Injury	Mumps	Hepatitis	Skin infection	Conjunctivitis	Others
April 2014	18	09	00	01	02	00	00	00	00	00	00	00	12
May 2014	23	02	05	03	00	00	00	01	00	00	00	00	01
June 2014	06	02	00	01	00	00	00	02	00	00	01	00	06
July 2014	20	03	03	00	02	00	00	05	00	00	00	00	08
Aug 2014	18	00	03	05	00	00	00	02	00	00	00	00	08

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Sl. No.	Item No. as per Minutes	Action Point	Action Taken																																																																																																																																																
			<table border="1"> <tr> <td>2014</td> <td>23</td> <td>08</td> <td>01</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>12</td> </tr> <tr> <td>Sept 2014</td> <td>17</td> <td>03</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>11</td> </tr> <tr> <td>Oct 2014</td> <td>15</td> <td>03</td> <td>02</td> <td>02</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>03</td> <td>00</td> <td>03</td> </tr> <tr> <td>Nov 2014</td> <td>18</td> <td>05</td> <td>00</td> <td>03</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>02</td> <td>00</td> <td>00</td> <td>00</td> <td>03</td> <td>00</td> <td>05</td> </tr> <tr> <td>Dec 2014</td> <td>15</td> <td>05</td> <td>01</td> <td>02</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>02</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>03</td> </tr> <tr> <td>Jan 2015</td> <td>25</td> <td>05</td> <td>00</td> <td>04</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>01</td> <td>01</td> <td>12</td> </tr> <tr> <td>Feb 2015</td> <td>18</td> <td>07</td> <td>01</td> <td>03</td> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>05</td> <td>00</td> <td>01</td> </tr> <tr> <td>Mar 2015</td> <td>216</td> <td>52</td> <td>17</td> <td>24</td> <td>09</td> <td>00</td> <td>00</td> <td>00</td> <td>18</td> <td>00</td> <td>00</td> <td>00</td> <td>15</td> <td>01</td> <td>80</td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	2014	23	08	01	00	01	00	00	00	00	00	00	00	00	00	12	Sept 2014	17	03	01	00	00	00	00	00	01	00	00	00	01	00	11	Oct 2014	15	03	02	02	01	00	00	00	01	00	00	00	03	00	03	Nov 2014	18	05	00	03	00	00	00	00	02	00	00	00	03	00	05	Dec 2014	15	05	01	02	01	00	00	00	02	00	00	00	01	00	03	Jan 2015	25	05	00	04	01	00	00	00	01	00	00	00	01	01	12	Feb 2015	18	07	01	03	01	00	00	00	00	00	00	00	05	00	01	Mar 2015	216	52	17	24	09	00	00	00	18	00	00	00	15	01	80	Total															
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			<p>(II) The Administration has already finalized the protocol for "Disease Surveillance" to address the epidemiological emergencies as also for meeting the day to-day health requirement of the Jarawas and the institutional arrangement is likely to be put in place shortly. Similar institutional arrangement is also being considered for Shompens.</p> <p>(III) The expertise available with the Central Govt Institutions like RMRC, AYUSH & GB Pant Hospital of this Administration is utilized for the wellbeing of the PVTGs from time to time.</p> <p>(IV) Nutritional supplements are being provided to the pregnant women, lactating mothers and infants belonging to Onge & Andamanese tribes through AAJVS.</p> <p>(V) For the Shompens living deep inside the forests in Great Nicobar Island and which is inaccessible, the Department of Tribal Welfare is exploring feasibility of having temporary/emergency help pads close to their habitation for extending medical aid and evacuation serious patients in case of emergency.</p> <p>(VI) The Department with the help of AYUSH has decided to take up the documentation of Medicinal Plants used by the Nicobarese and the medical practices followed by them for healing for their record and benefit of the tribal groups.</p> <p>(VII) Currently Shompen/ Nicobari/ Onges patients are airlifted to Port Blair for treatment in case of emergency from Campbell Bay & Dugong Creek by the Administration through the existing fleet of Helicopters.</p> <p>(VIII) However, much more is required to be done to take care of the health requirement of the PVTGs in Andaman and Nicobar Islands for which the Administration is fully committed and always forthcoming in extending any help of any kind for the welfare of the PVTGs.</p>																																																																																																																																																
		<ul style="list-style-type: none"> The issue of food security also came up for discussion. It was informed that among the scheduled tribes of the islands, only Nicobarites demand for 	<ul style="list-style-type: none"> The Administration provides free ration and clothes to the Onges & Andamanese. Administration has started implementing the project namely "Grains for gains among Angs at Anaholey Chaddas" submitted by Prof V. Pandya, Honorary Director, under which, 1410 Kgs rice has been supplied to the Tribal Welfare Officer, Kadamtala and Tirur for distribution to the Jarawa Childrens (School going 																																																																																																																																																

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		<ul style="list-style-type: none"> The government has made rice adequate arrangement to supply ration to them. They do not prefer to take wheat. As far as Jarawas, Shompens and Sentinelese are concerned, they still live nomadic life and carry out their traditional practice of hunting and gathering. The implementation of MG NAREGA was also discussed in the meeting. It was informed that 437062 man-days were generated last year and the average number of days per worker is 22. The Commission opined that it is quite a low figure against the requirement of 100 man-days per worker per year and advised to improve the performance. On the basis of information provided to the Commission, the Commission observed that the number of cases of atrocity registered under SC and ST (PoA) Act, 1989 was reducing in between year 2006 to 2009. However, the Commission also took notice of the fact that the court disposed no case of atrocity during the same period and 38 cases were pending in the court at end of the year 2009. The Commission advised the UT administration to take necessary action in the matter. 	<ul style="list-style-type: none"> Jarawa) from August, 2015. The Administration has adopted an 'eyes-on and hands-off' policy for Sentinelese tribe to ensure that no poachers enter into the island. A protocol of Circumnavigation of the North Sentinel Island has been made and notified in consultation with Govt of India. 63954 mandays were generated and Rs. 161.51 Lakh has been released as wages. Average mandays generated per household is 62 days during the year 2014-15 During the financial year 2015-16, 25358 mandays were generated and Rs 62.26 Lakhs were paid as wages. Average mandays generated per household is 27 days. Low progress due to lack of fund released by the Govt of India. 38 cases are pending as on December, 2015, of which one case is under investigation and 37 cases are pending in trial court. Year wise details of court cases are as under: - <table border="1" data-bbox="528 1441 1067 2737"> <thead> <tr> <th>Sl. No.</th> <th>Year</th> <th>No. of cases</th> </tr> </thead> <tbody> <tr><td>1.</td><td>2002</td><td>1</td></tr> <tr><td>2.</td><td>2006</td><td>7</td></tr> <tr><td>3.</td><td>2007</td><td>5</td></tr> <tr><td>4.</td><td>2008</td><td>2</td></tr> <tr><td>5.</td><td>2009</td><td>3</td></tr> <tr><td>6.</td><td>2010</td><td>1</td></tr> <tr><td>7.</td><td>2011</td><td>5</td></tr> <tr><td>8.</td><td>2012</td><td>2</td></tr> <tr><td>9.</td><td>2013</td><td>1</td></tr> <tr><td>10.</td><td>2014</td><td>7</td></tr> <tr><td>11.</td><td>2015</td><td>4</td></tr> <tr><td colspan="2">Total</td><td>38</td></tr> </tbody> </table> <p>The Administration has already requested the Public Prosecutor, District & Session Court for early disposal of these cases</p> <p>The Administration has already requested the Public Prosecutor, District Level Vigilance & Monitoring Committee and State Level Vigilance & Monitoring Committee, District Level Vigilance & Monitoring Committee and Sub-Divisional Vigilance and Monitoring Committee has already constituted and functioning in these islands. Year wise details of District Level Vigilance and Monitoring Committee meeting held is as</p>	Sl. No.	Year	No. of cases	1.	2002	1	2.	2006	7	3.	2007	5	4.	2008	2	5.	2009	3	6.	2010	1	7.	2011	5	8.	2012	2	9.	2013	1	10.	2014	7	11.	2015	4	Total		38
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	<ul style="list-style-type: none"> The Commission also desired to know about the constitution of state/UT level atrocity monitoring committee and the 	<p>The Administration has already requested the Public Prosecutor, District & Session Court for early disposal of these cases</p> <p>The Administration has already requested the Public Prosecutor, District Level Vigilance & Monitoring Committee and State Level Vigilance & Monitoring Committee, District Level Vigilance & Monitoring Committee and Sub-Divisional Vigilance and Monitoring Committee has already constituted and functioning in these islands. Year wise details of District Level Vigilance and Monitoring Committee meeting held is as</p>																																								

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		<p>dates of meetings held during last two years. The Chief Secretary informed that the UT administration will take necessary action in this regard and informed the Commission shortly. The Commission sought information about the rules related to payment of fare and compensation for the loss of wages to the witnesses attending the courts in the cases registered under SC & ST (PoA) Act, 1989. The information could not be given in the meeting and it was assured that the same shall be submitted to the Commission shortly.</p>	<p>under:-</p> <table border="1"> <thead> <tr> <th>Sl. No.</th> <th>Year</th> <th>No. of cases</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>2012</td> <td>3</td> </tr> <tr> <td>2.</td> <td>2013</td> <td>2</td> </tr> <tr> <td>3.</td> <td>2014</td> <td>0</td> </tr> <tr> <td>4.</td> <td>2015</td> <td>3</td> </tr> </tbody> </table>	Sl. No.	Year	No. of cases	1.	2012	3	2.	2013	2	3.	2014	0	4.	2015	3
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		<ul style="list-style-type: none"> The Commission also observed that the cases under SC & ST (PoA) Act. 1989 were registered during the year 2007, 2008 and 2009. However, in answer to the questionnaire sent to the Commission, it has been informed that no monetary relief was provided to the victims as per SC & ST (PoA) Rules, 1995. The Chief Secretary assured the Commission that he will look into the matter and sent factual information to the Commission. 	<p>As on December, 2015, 38 cases are registered/ pending before the Court of Law, of which 30 cases are related to PVTGs. AAJVS an autonomous body under A&N Administration who are arranging travel facilities to the Atrocity victims. So far no monetary benefit has been provided to PVTGs as most of their monetary needs are fulfilled by Administration. Further, no proposal has been received from District Vigilance & Monitoring Committee regarding release of compensations. It is also stated that heinous crime like murder, violence resulting grievous hurt, mischief of tribal property etc are rare in this UT.</p>															
		<ul style="list-style-type: none"> The Chairman of the Commission informed that there is a complaint regarding non registering of FIR of a scheduled tribe employee hailing from the Mainland by the police on the plea that his caste is not included in the ST list of the UT. He informed that as per rules, the police should have registered complaints of such persons. The Chief Secretary thanked the Commission for valuable guidance and assured the Commission that UT administration will take necessary action on the issues discussed in the 	<p>As per the policy of A&N Administration, the migrants tribes are not treated as Scheduled Tribes in these islands. The Ministry of Social Justice & Empowerment vide letter No. 11012/4/2013-PCR (Desk) dated 5.12.2013 has clarified that the offences under SC&STs (POA) Act 1989 imply offences against only such members of the SCs/STs whose caste/tribe has been specified as a SCs/STs in relation to a State/UT.</p>															

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7.07		<p>meeting.</p> <p>Dr Rameshwar Oraon, Hon'ble Chairman, NCST held a press conference at 15.30 hrs in Port Blair along with Hon'ble Members of the Commission. He briefed the media about the field visits, interaction with the tribal individuals and associations and the discussions held with the Sr. officers of the UT administration. He also thanked the local media for providing wide coverage to the tour of the Commission as a result of which a large number of tribal delegates/representatives of the ST welfare associations could meet the Commission. He also briefed them about the assurances given to the Commission by the UT administration on issues relating to the welfare of scheduled tribes.</p>	No action required
7.08		<p>The Hon'ble Chairman, Members and the officers of the Commission departed for New Delhi at 10.30 hrs by AI 9604. Principal Secretary, TW Department, Director (TW), Asstt. Director (TW) and Protocol Officer joined the Commission up to airport to see off the visiting dignitaries.</p>	No action required

