

# The Public Newsense

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## Eviction Mapping: Uncovering Chennai's Invisible Injustice

In 1971, the state government passed the Tamil Nadu Slum Areas (Improvement and Clearance) Act. The Act continues to be the only regulation that governs how the government can and should intervene in slum areas in Chennai. The law states that the government must first identify a slum area on the basis of the definition provided in the Act, officially "declare" the area to be a slum, and then improve the area. After a city-wide survey in 1971, the government identified and declared 1,202 slums, and added 17 slums to the list in 1985. Over decades, the government built tenements or provided in-situ improvements like roads, sanitation, and water connections for many of these declared slums.

# New Approach to slums: evict all, resettle some far away

Since the tsunami of 2004, there has been a clear change in the government's approach to slums in the city.

Firstly, no new slums have been declared since 1985, meaning that hundreds of thousands of poor city residents who moved to slums that came up in the last 30 years are living illegally. Residents of these undeclared slums live without tenure security, and most have lived for decades without access to basic services like running water and toilets.

Secondly, with funding primarily from the central government, the Tamil Nadu Slum Clearance Board has constructed three large scale resettlement colonies on the outskirts of the city: Semmenchery, Kannagi Nagar, and Perumbakkam, with a total of nearly 35,000 units in all already constructed, and at least 13,000 more currently being constructed.

The existence of these resettlement colonies has allowed for a new approach towards slums in the city. Rather than declaring slums and improving them insitu, as laid out in the TN Slum Areas Act, the city has been evicting slums from the city and resettling some residents (those deemed "eligible") in these resettlement colonies.

There is no official and comprehensive record of these evictions because they take place through different city and state departments, and for a range of projects - meaning that evictions are an invisible injustice, felt only by those men, women, and children whose homes, lives, and communities are demolished.

To bring visibility to these evictions, the Transparent Cities Network (housed at CAG) is collecting a body of information on evictions in Chennai. In May and June, on the request of Penn Urimai lyakkam (a women's rights community based organisation), we conducted a fact-finding on the attempted eviction at Konnur High Road in November of last year. Some of the evicted residents were moved to Ezhil Nagar, a resettlement colony in Okkiyam Thoraipakkam, adjacent to Kannagi Nagar.

The fact finding report provides a history of the settlement, the process followed by the government in the attempted eviction, and looks at the impact that resettlement would have on the lives of the residents in terms of access to basic services, facilities such as health and schools, and on their livelihoods. (Summaries of the fact finding reports with a focus on Konnur High Road and Ezhil Nagar are provided in this newsletter for our readers. Do write in to us for more details!)

We are also collecting information on evictions in Chennai in the last decade. We are doing this by interviewing citizen groups, activists and residents of resettlement colonies to identify evictions that took place over the last decade, including their location and the numbers of affected people. Our team will also physically visit many of the sites to verify the exact location and to triangulate our reports with feedback from locals.

Spatial representation of this data shall be presented at a public meeting on Chennai's residents' Right to City organised in August 2015 to showcase the impact forced evictions have had on the city's residents and reinvigorate the Right to City Movement as a collective of residents, civil society organisations, and activists to demand for the resident's right to the city's spaces.

# An Assessment of Infrastructure and Services at Ezhil Nagar, a Newly Constructed Neighbourhood in the Kannagi Nagar Resettlement Colony

Kannagi Nagar has 15,656 tenements with a population of approximately 78,280 residents. Ezhil Nagar, which was added onto the Kannagi Nagar neighbourhood in 2013, has 8,048 tenements, approximately 2,650 of which are presently occupied. Almost no facilities have been provided for Ezhil Nagar. Therefore, the Kannagi Nagar facilities are effectively for the use of a population of about 1,18,520 residents of 23,704 tenements, including both the original Kannagi Nagar neighbourhood and the Ezhil Nagar extension.

This article summarises the main findings of a factfinding exercise of Ezhil Nagar that the Transparent Cities Network, housed at CAG undertook in May, 2015. In addition to verifying the facilities available, we looked at their quality and adequacy. This information was collected through interviews with the Councillor, TNSCB representative, residents and persons in charge of infrastructure (such as the headmaster of a school), and through physical verification of the infrastructure.

#### MAJOR INFRASTRUCTURE

Ezhil Nagar tenements are four-storey buildings with 24 units on each floor.

Design challenges: The buildings have no lifts: only a narrow staircase with no facilities for the disabled or elderly. Houses are on either side of a long and poorly lit corridor.

Water and sanitation: Water is supplied twice a day to overhead tanks. Each unit has a single tap in the toilet/bathroom. Ground floor houses are not connected to sewerage lines, and many pipes are broken and unattended. Drainage leads to, and floods, the rear side of the tenements.

Child care: Ezhil Nagar has 1 anganwadi, with 2 more proposed, while the actual requirement for current population is 16. Kannagi Nagar has 19 anganwadis run by the government, and 15 anganwadis and 1 centre for special children run by NGOs. The centres have poor infrastructure and insufficient resources and facilities for the children.

Schools: Ezhil Nagar has 0 schools; Kannagi Nagar has just 1 government higher secondary school and 3 primary schools, all running beyond capacity and unable to admit more students. Only 43 children from Ezhil Nagar study in the government school, some go to the nearby private schools, while most travel to the school near the site from which they were evicted, a journey of up to two hours each way.

Public Distribution System: Ezhil Nagar has 0 ration shops, and 1 constructed and awaiting inauguration. Kannagi Nagar has 7 ration shops, 2 of which serve Ezhil Nagar residents. The ration shops were found to be over-crowded and residents reported shortages of supplies.

Health: Ezhil Nagar has 0 PHCs and dispensaries. Kannagi Nagar has 0 PHCs and 1 CoC dispensary, with no in-patient facility. The closest PHC facility is at 3 km away Thoraipakkam; it caters to all the residents around and is under enormous pressure as a result. Travel to the closest government hospital takes two hours by bus.

Safety: Many incidents of theft have occurred in Ezhil Nagar, but have gone unaddressed by the local police. The unoccupied tenements and dark, long corridors are frequently used by anti-social elements according to residents. Transport: The bus depot is at Kannagi Nagar, 1 km away for Ezhil Nagar residents. Buses do not ply to several important areas, such as Koyembedu and Tambaram, are over-crowded and have poor frequency. Journeys to the city take upwards of two hours and are extremely expensive.

Livelihood: Many residents have had great difficulty in continuing their former means of livelihood, owing

to the great distance and costs to reach their erstwhile place of work. For example, Ezhil Nagar is 25 km from Broadway. This has either resulted in them having to change their jobs or spend considerable amounts of money and time on transportation.

From the above it is clear that access to basic services is very poor in Ezhil Nagar and it is not fit for occupation in its current state.



FIGURE 1: MAP SHOWING BASIC AMENITIES OBSERVED DURING THE FACT FINDING STUDY IN EZHIL NAGAR

## Attempted Eviction at Konnur High Road Settlement

The settlement along Konnur High Road presently houses more than 1,000 households and 200 shops along a 700-metre stretch. In 1971, this settlement was declared as a slum under the Tamil Nadu Slum Areas (Improvement and Clearance) Act, 1971 in the first round of declaration. Despite being declared, the slum has had a history of eviction drives. There is a closed canal that runs underneath a part of the settlement. This canal and the expansion of Konnur High Road have been cited as reasons for the evictions. In 1984, the Corporation of Chennai (CoC) demolished the entire settlement stating that it was on objectionable land. Post a stay order on the demolition by the Madras High Court, residents came back and rebuilt their huts. In 2011, a part of the settlement that was very close to the road was demolished and paved over in order to expand Konnur High Road.

The government again attempted to evict the residents of Konnur High Road in November 2014. This article summarises the fact-finding exercise we undertook to document the procedure followed, the violations of rights of the residents, and the facilities available to the residents around the settlement.

EVICTION PROCEDURE On 10th November 2014, a Monday morning, CoC officials along with the police came to the locality to evict the residents and demolish their houses. The residents had not been given any prior notice and were taken unawares. According to one of the respondents, an auto driver, "On the day of eviction, the Corporation officials accompanied by some police officials went door-to-door and spoke with house owners individually. The residents were told that if they do not agree to vacate their houses and move to Ezhil Nagar that very day, they would be evicted without any alternative housing. Those who agreed to relocate under this pressure were given tokens for allotment and their houses were demolished. After which, as per CoC protocol, these families and the few belongings they could carry with them were transported to Ezhil Nagar in a Corporation garbage collection lorry. The houses of those residents who refused to go to the relocation sites were not demolished nor were tokens given to them."

Many residents felt coerced into accepting the eviction. Only on reaching the resettlement site were residents told that they would have to pay an amount of Rs. 25,000/- to finalise the allotment. No assessment of the economic impact on evicted residents was undertaken at all. No compensation for loss of livelihood was even considered. In all, 75 houses were demolished and the families residing in them were relocated to Ezhil Nagar, an extension of Kannagi Nagar at Okkiyam Thoraipakkam.

#### REASON FOR EVICTION UNCLEAR

There is no clarity among the residents whether the entire settlement or only some residents will be evicted to clear a portion of the area. The reason for the evictions also remains indeterminate. Some residents said that it was due to the construction of a storm water drain, some mentioned that a nearby canal needed to be cleaned, while still others said that it was for a road-widening project. Some residents also mentioned the area was classified as "objectionable," but it was not clear the grounds on which such a classification was made.

#### MAJOR INFRASTRUCTURE

Konnur High Road residents benefit from their central city location by having many public services within walking distance of the neighbourhood. This is in sharp contrast to the facilities in Ezhil Nagar, an extension of the Kannagi Nagar resettlement colony, which are extremely limited.

Child care: 3 Anganwadi centres functioning in the premises of the CoC primary school, located within 300m of the settlement.

Schools: 2 CoC schools - 1 primary and 1 higher secondary - are within a distance of 300m. There are 2 private and 1 government-aided schools within 1km radius of the slum.

Health: 1 Primary Healthcare Centre, 1 Community Welfare Centre, 1 TB hospital, located within 500m. 3 private hospitals and 3 private clinics, located within 1km radius of the slum.

Transportation: 2 bus stops adjacent to the settlement and the Ayanavaram bus depot is close by, with buses to Koyembedu, Broadway, ICF, etc. Perambur suburban railway station is 3.5km away, Chennai Central and Egmore railway stations are 5.9km and 6.5km away, respectively. All these important hubs are easily accessed by buses and shared auto services.

Public Distribution System: 1 ration shop, located opposite the settlement.

#### LIVELIHOODS

The occupations of residents include flower vending, domestic work, supply of water cans, vegetable vending, construction work, petty shops, catering services, tiffin shops, small businesses, daily wage labour, rickshaw, auto, and tricycle driving, painting, etc., Almost all residents, except auto drivers, have their place of work at a distance of 3-5km from the settlement.

#### IN SITU DEVELOPMENT

There are several pockets of empty and unused land around the settlement, some that are being used by private bus and trucks as parking spaces. We identified five such pieces of vacant land, including a government-owned plot leased to a defunct company and one owned by the Tamil Nadu Housing Board. There is also a piece of land adjoining the settlement that is owned by the Revenue Department that is currently used by the adjacent government-aided school. These could instead be used for in situ development for the residents so that they can continue to live close to their present livelihood,



FIGURE 2: MAP INDICATING THE VACANT SPACES AVAILABLE NEAR THE KONNUR HIGH ROAD SETTLEMENT

## Complaints received by CAG during April '14 - March'15

In the period between April 2014 and March 2015, CAG received maximum number of complaints in the form of "general enquiry", which included complaints/ queries where consumers wanted to know if a complaint came within the purview of the Consumer Protection Act, procedure for filing a complaint before the Forum, complaints where complainants did not divulge names of opposite parties and the like.

This is followed by complaints under "deficiency in service" which includes complaints against car/bike authorized service centre, educational institutions, packers and movers, call- taxi services, travel agents, time-share companies/resorts and so on.

Telecom comes third on the list with maximum number of complaints on internet connectivity, call drops and billing issues. Despite TRAI's regulations to protect consumers' interests, it is unfortunate that consumers are still harassed. With regard to call drops, the Department of Telecommunications, stating that there was an urgent need to address the menace of call drops, had written to the service providers asking to submit a report on call drops in July 2015 and recently, the telecom operators have said that they were committed to work with the Government to tackle this problem and were keen to undertake the joint exercise with the Telecom Enforcement, Resource and Monitoring (TERM) cells. We'll only have to wait and see!



Figure 3: Visual Representation of the complaints received by CAG during the period of April '14 to March '15  $\,$ 

## Medical Negligence : CAG's intervention

One fine morning, while on his way to work, Vijay met with an accident near the Vijayanagar junction in Velachery. Vijay fell from his motorcycle and sustained injuries. He was rushed to a nearby corporate hospital, where he was admitted. Upon investigation, it was found that apart from a few scratches, he had fractured his right shoulder. The senior orthopaedic consultant, who examined him, confirmed this and suggested surgery to fix the fracture. Accordingly, surgery was performed and he was discharged on the third day. A sum of Rs.1,50,000/- was spent on the surgery and hospitalization. He was advised physio-therapy. However, Vijay developed severe pain in the area and when he consulted the senior orthopaedic consultant, he advised him to proceed with the physio-therapy and told him that he will be alright within a weeks' time.

Nevertheless, pain aggravated over the period and Vijay visited the hospital once again. The junior orthopaedic surgeon who was present then, heard him out and told him that he should not have undergone physio-therapy, should not have even moved his arm but given complete rest to the operated arm. Shocked to hear two different suggestions from two doctors belonging to the same discipline, Vijay got confused, not knowing whose advice to follow!

Finally, he decided to give complete rest to his arm. But even then, pain persisted causing great inconvenience to him and disrupting his routine work. Not trusting that hospital and the doctors any more, Vijay approached a couple of other hospitals and was investigated. All the other hospitals confirmed the fact that there was mal-alignment of the bones and that was the cause for the pain. This was confirmed in the reports as well. Thus, Vijay had to get admitted in one of the hospitals and undergo surgery once again to re-set the bones. Thus, apart from the physical and mental agony, he also incurred additional expenses to the tune of Rs.3,00,000/-towards the second surgery, which was merely due to the negligence of the previous consultant. Only after the second surgery, Vijay's health improved.

On discharge, Vijay approached the hospital and the consultant who performed the first surgery with all the reports and demanded for reimbursement of the expenses that he incurred towards the second surgery as he had to undergo this only because of negligence of the previous consultant. However, the consultant failed to respond to his appeal.

Distraught, Vijay sought CAG's assistance for resolving the issue. On looking into the merits of the case, CAG found that negligence was apparent on the face and therefore, CAG intervened in the matter and sent notice to the hospital and the consultant, pointing out their negligence and asking them to resolve the issue to the complainant's satisfaction. Following this, the doctor invited Vijay for a discussion. Subsequently, after various rounds of talks with the complainant, the consultant settled the amount due to Vijay and thus, the matter was resolved!

# Sanitation in a Transport Hub: A preliminary investigation of Madhavaram

Commercial transport drivers, especially longdistance truck drivers, are susceptible to several occupation-related problems, including uncertainties of work and the lack of steady incomes. They also face several problems with health caused by their lifestyles and exposure to pollution, poor driving conditions and inadequate infrastructure and services, which have significant implications on their health and well-being. Because of the lack of adequate sanitation facilities, drivers are known to reduce their fluid intake so they do not have to urinate too often. Doing so, they increase the risk of dehydration further causing lapses in concentration during driving time (Truckers Toilets UK). In India, the focus on the health and well-being of long distance truck drivers has focused on their sexual behaviours and prevalence of sexually transmitted diseases

and infections, and there is a conspicuous absence of adequate literature examining the availability of basic services such as water, sanitation, healthcare, shelter and recreation.

It is in this context that CAG undertook a study of infrastructure of sanitation, waste management, drinking water and health in a transport hub in Madhavaram, Chennai. We also sought to understand the roles and relationships of various stakeholders living and operating in the area, particularly, low income communities, government officials and truck companies and associations, and ways in which truck drivers interacted with them to access these services. The insights from our study could be used to identify infrastructure development projects, create new partnerships or leverage existing ones with the local government and communities, as well as collaborate with truck drivers and truck agencies who frequent the area, to fill gaps in these essential infrastructure and services.



FIGURE 4: STUDY AREA AND LOCATIONS OF THE FOCUS GROUP DISCUSSIONS

During the team's interaction with the community, we identified five major stakeholders: truck drivers, hawkers, informal waste pickers, and shop owners, mechanics and garage operators. The truck driver population is largely transient, with a combination of lorry drivers from nearby villages and out-ofstate drivers. Most hawkers and shop owners are local residents, while the waste pickers come from nearby neighbourhoods. We found that more than three quarters of the respondents accessed drinking water by buying water cans and the rest through the municipal water tankers. Bore water is used for other purposes though. Open defecation is widely

practised by the truck drivers and waste pickers who do not reside in the area. There is only one public toilet in the study area but it is not clean and too far for most of the respondents. The only SWM that occurs in the area is through the informal sector which includes waste pickers and scrap shops. According to the Conservancy Inspector at Ward 30, the local government collects over 9 metric tonnes of garbage every day. A little over half the waste collected comprises of paper and plastic. Over 70 percent of the stakeholders said they preferred to treat themselves than visit a hospital since the nearest government hospital is 3 km away. Nearly 80 percent of the respondents reported dysentery, malaria and dengue in the area over the past one-year, caused due to the lack of adequate sewage networks and uncovered drains in the area. Approximately 20 percent reported that they suffered from respiratory diseases, which, according to health officer in ward 30, was caused due to the heavy traffic in the area.

Drinking water, clean toilets and bathrooms were listed as the top priority by all four stakeholders, with security and roads following very closely. The trucking community also considered government health facilities with accident care units as an important service needed in the area. Any intervention that seeks to make changes in the area needs to be planned based on a more detailed engagement which should also include a deeper interaction with each of the stakeholder groups and community organising efforts.



FIGURE 5: CMDA TRUCK TERMINAL, MADHAVARAM

## **Mapping Thermal Power Plants**

CAG's Thermal Watch Initiative is creating a repository of information of coal-based thermal power plants. So far, we have mapped thermal power plants (TPP) in southern India - Tamil Nadu, Kerala, Karnataka, Telengana and Andhra Pradesh. The user-friendly map shows the spatial distribution

of existing and proposed power plants. For instance, zooming in to the map shows that several plants have been planned in Tamil Nadu, and that there are three main clusters in Tiruvallur, Cuddalore and Nagapattinam districts. In addition to the locations, the map allows users to see what stage of



FIGURE 6: INTERACTIVE MAP OF THERMAL POWER PLANTS SOURCE: http://www.thermalwatch.org.in

development in the EIA process the plants are in: which plants have received the Terms of Reference (ToR), those that are awaiting the ToR, and which have been granted Environmental Clearance (EC). Clicking on a location of a TPP on the map opens an information window with the name of the district and village, nature of the plant, status, capacity and the name of the promoter. It also provides a link to EIA documents related of the TPP that can be downloaded from the website. This information can be useful when looking at what spatial and other factors influence the choice of locations, such as power consumption centres, populations served and affected, and risks and vulnerabilities, in order to gain insights into regional planning and development.

# Cartoon Booklet for easy understanding of the EIA process



FIGURE 7: FRONT COVERS OF THE ENGLISH AND TAMIL VERSION OF THE CARTOON BOOKLET EXPLAINING THE EIA PROCESS

CAG has launched the Cartoon book "Do you know?" The cartoon book aims to demystify and educate communities and general public about the Environmental Impact Assessment (EIA) process, with specific reference to Thermal Power Plants (TPP). People can learn while they read the comics with their family! The cartoon booklet is available in English and Tamil, and can be downloaded from our website.

## **About CAG**

Citizen consumer and civic Action Group (CAG) is a non-profit, non-political and professional organization that works towards protecting citizens' rights in consumer and environmental issues and promoting good governance processes including transparency, accountability and participatory decision making. While our area of physical operation is the city of Chennai, our area of concern is global.



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