

IN THE SUPREME COURT OF INDIA

CIVIL ORIGINAL JURISDICTION

WRIT PETITION (CIVIL) NO. _____ OF 2013

(UNDER ARTICLE 32 OF THE CONSTITUTION OF INDIA)

In the matter of:

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| <p>PARIVARTAN KENDRA, THOUGH ITS FOUNDER SECRETARY VARSHA ASHOK JAWALGEKAR SHIVAJI PATH, GOLA ROAD WEST BAILLEY ROAD DANAPUR, PATNA 80153</p> | <p>Petitioner No. 1</p> |
| <p>VERSUS</p> | |
| <p>1. UNION OF INDIA, THROUGH ITS SECRETARY MINISTRY OF LAW AND JUSTICE SHASTRI BHAVAN, NEW DELHI, 110001</p> | <p>Respondent No. 1</p> |

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| 2. | <p>UNION OF INDIA, THROUGH THE SECRETARY, MINISTRY OF HEALTH & FAMILY WELFARE, GOVT. OF INDIA, NIRMAN BHAWAN, C-WING,NEW DELHI,110001</p> | Respondent No.2 |
| 3. | <p>LAW COMMISSION OF INDIA THROUGH ITS SECRETARY LAW COMMISSION OF INDIA, 7TH FLOOR, A-WING, SHASTRI BHAWAN NEW DELHI- 110 001</p> | Respondent No. 3 |
| 4. | <p>THE STATE OF BIHAR THROUGH THE CHIEF SECRETARY, GOVT. OF BIHAR, PATNA</p> | Respondent No. 4 |
| 5. | <p>STATE OF BIHAR, THROUGH PRINCIPAL SECRETARY (HEALTH & FW), DEPARTMENT OF HEALTH & FAMILY WELFARE, GOVERNMENT OF BIHAR, VIKAS BHAWAN, NEW SECRETARIAT, PATNA-800 015</p> | Respondent No. 5 |
| 6. | <p>UNION OF INDIA, THROUGH PRINCIPAL SECRETARY DEPARTMENT OF EDUCATION</p> | Respondent No. 6 |

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| | AND LITERACY SHASTRI BHAWAN, DR. RAJENDRA PRASAD RD NEW DELHI, DELHI 110001 | |
| 7. | VMMC & SAFDARJUNG HOSPITAL THROUGH THE MEDICAL SUPERINTENDENT DR.B.D.ATHANI 5 TH FLOOR, M.S.OFFICE, NEW OPD BLDG SAFDARJANG HOSPITAL, NEW DELHI-110 029 | Respondent No. 7 |

**WRIT PETITION UNDER ARTICLE 32 OF THE
CONSTITUTION OF INDIA SEEKING DIRECTIONS
AGAINST THE RESPONDENTS**

TO:

THE HON'BLE THE CHIEF JUSTICE AND HIS OTHER
COMPANION JUSTICES OF THE HON'BLE SUPREME
COURT OF INDIA

THE HUMBLE PETITION
OF THE PETITIONERS

MOST RESPECTFULLY SHOWETH THAT:

1. The present writ petition is being filed in the public interest under Article 32 of the Constitution of India. There is another case presently with the Supreme Court addressing acid attacks, *Laxmi vs. Union of India &Ors.*, (WP (CRL) 126/2006). While *Laxmi* prays for new laws regulating the sale of acid, this PIL only addresses the rehabilitation of the acid attack survivors. Over a 1000 attacks have occurred in India in the past year targeting mostly young women. Acid attackers have ranged from disapproving boyfriends' families, to jilted stalkers, to street stalkers to even family members.

1.A The Petitioner has not approached the concerned authorities for the same reliefs in this Hon'ble Court or any other Court.

2. The Petitioner, Parivartan Kendra, is a registered NGO (Registration No. 207/2007 under the Registered Society Act, dated 28.05.07 at Patna, Bihar). Registration certificate and authority letter enclosed with vakalatnama. Its mission is to empower people from marginalized communities using non-violent methods to advocate for their rights to justice, equality, and sustainable livelihoods. Parivartan Kendra

operates in the Vaishali and Patna districts of Bihar, working primarily with women and children from poor, Dalit and religious-minority communities. The main issues it works with are: sustainable livelihoods/food security, addressing caste and gender-based discrimination and injustice, women's empowerment/fostering leadership skills, right to education/child rights

3. While other countries, like Bangladesh, have taken strong legislative measures to ensure justice and rehabilitation for acid attack survivors, India lags behind. A true copy of Bangladesh's Acid Crime Prevention Act (2002) and Acid Control Act (2002) issued by the Government of Bangladesh
4. dated 17 March 2002 is herein marked and annexed as **ANNEXURE P-1.** In 2008 the Campaign and Struggle Against Acid Attacks on Women issued recommendations regarding the right to health for acid attack survivors. Unfortunately, the Union of India and governments have failed to implement these recommendations. A true copy of recommendations following observations recorded at the public hearing, issued by Campaign and Struggle Against Acid Attacks on Women at Senate Hall, Central College, Bangalore dated 24 July 2008 is herein marked and annexed as **ANNEXURE P-2.**

5. Therefore, the Petitioner has filed this public interest litigation to ensure justice for survivors and to humbly urge this Hon'ble Court to direct the respondents to mirror other countries in the region by taking meaningful steps to ensure that survivors are adequately compensated, treated, and rehabilitated.

6. Chanchal, a talented 18-year-old Dalit girl, wanted to be a computer engineer. She used to go to college regularly and supported her family working as a daily wageworker. Men from her village, Anil, Ghanshyam, Baadal, and Raja, harassed Chanchal on a daily basis. They had been sexually and verbally harassing her for many months prior to this incident. When she refused to give in to their demands and boldly opposed their sexual harassment, they brutally threw acid on her face and body, which also fell on Chanchal's younger sister's body. The men attacked Chanchal on 21 October 2012 at midnight by climbing on Chanchal's roof while she and her sister were asleep. After hearing their daughters' screams, Chanchal's parents rushed the girls to Patna Medical College and Hospital (PMCH). After the acid attack, PMCH doctors delayed proper treatment and failed to give her medicines, worsening her condition. Chanchal's parents had to purchase almost all medicines out of pocket

causing them to go under debt spending more than 5 lakhs on medicines. PMCH doctors and nurses mistreated Chanchal and her family telling her she has no right to be at the hospital given that she was Dalit. After pressure built on by social organizations and the media, the four perpetrators were arrested by the police a month after the attack. The police have still not taken official statements from Chanchal and her sister under section 164. Further, Chanchal still awaits her speedy trial promised to her, and she has yet to receive adequate medical treatment and compensation.

7. In *Laxmi v. Union of India*, the Hon'ble Court on 6 February 2013 directed the states to

I. Enact appropriate provision for effective regulation of sale of acid in the state/union territories,

II. Measure for the proper treatment, after care and rehabilitation of the survivors of acid attack and needs of acid attack survivors,

I-III. Compensation payable to acid survivors by the State/or creation of some separate fund for payment of compensation to the acid attack.

5. To comply with this Hon'ble Court's orders and the three subsequent orders on 16.4.2013, 09.07.2013 and 16.7.2013, the Union of India filed an affidavit along with the draft Model Rules entitled for the Poisons Possession and Sale Rules, 2013. These model rules include the form of acid that can be stored and sold, issue of licenses, procurement by individuals, educational and research institutions, hospitals, industries, government department, and departments of public sector undertaking.
7. The current order passed on 18 July 2013 addresses the compensation by giving acid by providing attack survivors Rs. 3 lakhs as the after care and rehabilitation cost.
8. The 3 lakh compensation is grossly inadequate, unreasonable unduly, and arbitrary. This amount does not take into consideration the acid attack survivor's struggles at all. Acid attacks need lifelong surgeries with each surgery costing around Rs. 3 lakhs. In most cases, the burns are third degree burns, which destroy the skin, the underlying tissues including muscles, bones, and tendons. With acid, the process of burning continues over a period of time. As the acid seeps further into the body, the extent of injury increases. The survivors also need money for pain and suffering,

psychological care, health care, education, employment, and housing as the society ostracizes acid attack survivors shunning them from all aspects of life. Acid attack survivors should receive free medical treatment, medicines, and psychological care commensurate with modern standards.

9. Shailesh Paswan, Chanchal's father, contacted the Petitioner to ask for help in achieving justice for Chanchal. After Varsha, Founder Secretary of Parivartan Kendra, met with Chanchal and her family at the PMCH, she was moved by Chanchal's grave situation. After all of her investigations and work in the case, the Petitioner felt compelled to file this petition to ensure that Chanchal and her sister receive proper medical care, plastic surgery, proper compensation, and rehabilitation. This petition is filed also to ensure that there is a special legislation and guidelines for rehabilitation and justice for acid attack survivors. Parivartan Kendra has made myriad representations to the State of Bihar including an open letter to the CM, petition on Change.org, publishing a video documenting Chanchal's struggles, publishing a video appeal from Chanchal, but all of those efforts have gone unnoticed, and Chanchal has still not received justice.

FACTS

10. On October 21, 2012, four young men of higher caste climbed on 18-year-old Chanchal Kumari Paswan's roof and brutally attacked her and her sister with acid while they were sleeping. Chanchal Kumari worked to support her family as a daily agricultural wageworker, and attended college at the Abdul Gaffar College, Danapur in hopes of becoming a computer engineer one day. The four young men that attacked Chanchal are Anil Rai, Ghanshyam Rai, Badal and Raja. All of these men had been harassing Chanchal for months. They would follow her on the streets, in the market, and in the auto rickshaw while she was going to computer classes or to work. They would make sexual advances towards her, lewd comments, and also pull her dupatta. Additionally, they terrorized her and her family members by taking rounds near her house on their motorcycles, tearing the curtains of the home by throwing bricks on the door, and breaking down the tiles of the home. Upon the family's objections, the boys would reply "What would Lower Cast Dusaadh will do?" Her mother and father were fear struck and terrorized. These men had also told Chanchal that if she did not give into their demands and agree to have sexual relations with them they would damage and destroy her face.
11. Around midnight on the 21 October 2012 while both Chanchal Paswan and her sister were sleeping, Anil Rai,

Ghanshyam Rai, Badal, and Raja climbed Chanchal's roof to attack her. Anil covered Chanchal's mouth so she could not scream and Ghanshyam and Raja held Chanchal's legs so she could not move. Anil Rai then poured the acid into a bowl and then poured it on Chanchal's face and body. As Anil was pouring the acid on Chanchal's body and face, the acid also fell on Chanchal's sisters' body and burnt her arm. After the attack, these men did not make any effort to flee as they wanted to stay and enjoy the moment. As the acid started burning the girls, the girls started screaming and crying waking up their parents, Sumena Devi and Shailash Paswan. Upon hearing the girls' screams, both the parents rushed to the rooftop. As the four boys saw the parents approaching, they then fled.

12. With the help of Chanchal's uncle, Chanchal and her sister were rushed to the emergency care at the Patna Medical College and Hospital (PMCH) and were admitted in emergency care at PMCH. Chanchal did not receive any medical attention until the next morning when the doctors arrived. 28% of her body is now burnt.
13. Even when the doctors arrived, they did not provide her proper treatment or medicines ensuring that Chanchal and her sister's conditions deteriorated significantly. To buy the

medicines, Shailesh Paswan, Chanchal's father, had to borrow up to Rs. 5 lakhs. Because they are Dalits, the staff at PMCH have continued to mistreat Chanchal and her family, struggling to repay. The hospital waited for more than a month to conduct Chanchal's grafting surgeries. Though Chanchal had three skin grafting surgeries conducted at the PMCH, they were all improperly conducted as testified by a doctor at Sarfardjung Hospital. Additionally, the PMCH staff discharged Chanchal within 13 days of her last surgery forcing Chanchal to leave the hospital without even fully recovering. The doctors told Chanchal to return for a surgery in March. When Chanchal returned on 2 March 2013, the doctors refused to provide surgery for Chanchal. Even after Parivartan Kendra spoke to the Superintendent of the PMCH and he promised to provide adequate care for Chanchal, the staff told Chanchal's family to go to Delhi or Mumbai where treatment could cost up to Rs. 10 lakhs. When Chanchal persisted, the hospital staff replied that given that they are Dalits, they have no right to seek treatment.

14. Prompt and careful medical attention is essential to adequately treat acid attack survivors. There are two stages in such treatment: one is the immediate first aid essential to save the life of the victim and the second is the long term surgical treatment to restore the charred and thus made non-

functional parts of the victims' body. In both types, the money needed to cover even ten percent is beyond reach for most Indians. Lakhs of Rupees are needed to heal the acid wounds and to make the fresh skin grow. Victims struggle to access medical aid and are thus condemned to a state of perpetual insecurity.

15. The Police only arrested the four perpetrators a month after the attack in November 2012 in response to [intense](#) pressure from social organizations and the media. All of the perpetrators were arrested and put in jail except the main perpetrator Anil Rai who was put in a juvenile facility. Families from Chanchal's village have reported that Anil Rai is [claiming](#) to be a minor to evade punishment. The F.I.R. recorded on 22 October 2013 is registered under Section 311 of the Prevention of Atrocities [Act](#) (Scheduled Caste/ Scheduled Tribes). Though Chanchal explicitly named all of the perpetrators in her dire state at the hospital on 22 October 2013, the statement written by the IO did not record the names of the perpetrators stating that Chanchal was not in the condition to make a recording. True copy of the copy of the F.I.R, dated 22 October 2012 is herein marked and annexed as **ANNEXURE P-3**.

16. [Chanchal](#)'s repeated encounters with the police have resulted in inaction. On 31 December 2012, Chanchal sent a case application to the IG Weaker detailing her story where she named her culprits. True copy of case application to the IG weaker section (translated) dated 31 December 2013 is herein and attached as **ANNEXURE P-4**. Despite the case application to the IG and the conversation with the IG: Arvind Pandey on 8 February 2013 (Annexure P-5) wherein he promises to take a statement from Chanchal, no action has been taken by the Bihar police to ensure justice for Chanchal.

17. Chanchal even published a video appeal pleading the government of Bihar for help, yet there has been no action taken. Varsha has also created a video documenting Chanchal's plight and inaction by the IG. In the video, Varsha speaks to the DG, Arvind Pandey and asks him to act, and he has promised to take a statement of Chanchal under section 164. He explains the delay in taking her statement as the police were under the impression that Chanchal could not speak properly before. He promises to take a statement from Chanchal under section 164 soon now that she can speak; but, Mr. Pandey has yet to take an official statement even after five months of the video. True copy of Chanchal's video appeal and transcript dated 5 March 2013, and True copy of Chanchal's Burn case video directed by Varsha Jawalgekar,

Director of Parivartan Kendra and transcript dated 8 February 2013 are herein and annexed as **ANNEXURE P-5**.

18. Prior to her attack, Chanchal made her living as a daily wageworker and she was a major as she was 18+, yet when giving her compensation the state of Bihar devalued her worth showing her as a non-earning minor and reducing the compensation by half. On 5 November 2012, Chanchal's family was given Rs. 2 lakh, 42 thousand for both the daughters from the Government of Bihar, and Shailesh has already spent more than Rs. 5 lakhs on the treatment of both of his daughters. Chanchal and her sister will need treatment for the rest of their lives.

19. The Petitioner became involved with Chanchal's case on 30 December 2012. Shailesh Paswan compiled and submitted a petition on 31 December 2012 to Parivartan Kendra. After Varsha Jawalgekar, Founder Secretary of Parivartan Kendra, received the petition, she started investigating the case, and starting working to advance Chanchal's case. As [Chanchal](#) struggled for justice, the Union of India filed a reply in Laxmivis Union of India on 6 February 2013. A true copy of the Affidavit issued by the Union of India dated 11 April 2013 is herein marked and annexed as **ANNEXURE P-6**.

20. All of the work done by Petitioner Parivartan Kendra thus far is attached as a case study. A True Copy of the Case Study compiled on 6 June 2013 is herein and annexed as **ANNEXURE P-7.** The Petitioner has also made an online petition on Change.org demanding complete rehabilitation and justice [for](#) Chanchal and her sister, so far it has over 70,567 signatures. Chanchal has not been given proper compensation due to her being a waged worker. Parivartan Kendra has sent a petition with over 65,000 signatures to the DM and CM on 20 April 2013. The District Magistrate has fast tracked the criminalization case, which has been lodged under the Scheduled Tribe/Schedule Caste Act. But it is moving slowly and will not result in any long term or sweeping change.
21. On 5 April 2013, Chanchal was transferred to the Safdarjung Hospital with the help of Varsha where she finally received proper treatment.
22. The government of Bihar has not taken any action on her trial against the perpetrators even after it was expedited by the District Magistrate, nor have they provided her with adequate compensation. To notify the CM of Bihar, Varsha helped Chanchal draft an open letter to the CM of Bihar, [Nitish Kumar](#) stating her grievances. True copy of the Open letter to

CM Nitish Kumar, "My Dreams broke after acid was poured on my face," published on Youth Ki Awaaz dated 10 June 2013 is herein and annexed as **ANNEXURE P-8**.

23. Chanchal and her family are appalled by the treatment they have received at the hands of the PMCH, the police, and the government of Bihar. The survivors seek justice, compensation, and to have their human dignity restored. Most importantly, these women seek assurance that these horrific events are not repeated elsewhere. True copy of the Photographs compiled on 17 July 2013 are herein and compiled as **ANNEXURE P-9**.

VICTIM COMPENSATION SCHEMES

24. The Hon'ble Court in Laxmi v. Union of India of India and Others (Writ Petition (Criminal) No. 129/2006) addressed rampant violence against women in acid attacks. Despite this Hon'ble Court's order, acid is still readily available to most of the population in India, acid attackers continue to live with impunity, and victims cannot afford basic care or services. True copy of the Order, issued by this Hon'ble Court, dated 18 July 2013 is herein marked and annexed as **ANNEXURE P-10**.

25. There has been heavy criticism against the order passed by this Hon'ble Court addressing acid attacks as it does not fully address the grievances of acid attack survivors. An article published by the Post discusses how acid attack survivors feel betrayed by the order passed by the Hon'ble Court. The acid attack survivors are unhappy that the order does not retroactively address acid attack survivors, acid is still available over-the-counter with a proof of identification, and the only compensation amount of Rs. 3 lakhs is given. Considering that acid is still easily available through other means, regulation of shops is lax, and an acid attack survivor needs surgeries throughout his/her lifetime with each surgery costing around Rs. 3 lakhs, the voices of acid attack survivors must be considered. A True Copy of the "[j]ust salt on our wounds'-acid attack survivors remain unhappy with the Supreme Court Rulings," by Danish Raza published in the First Post dated 20 July 2013 is herein and annexed as **ANNEXURE P-11.**

26. To this day, acid attack survivors have no legal guarantee to free medical care, rehabilitative services or adequate compensation under Survivor Compensation Schemes. On February 6, 2013 this Hon'ble Court passed an order for the Union of India and the states to implement compensation

payable to acid victims by the State/ or creation of some separate fund for payment of compensation to the acid attack victims. The Union of India filed an affidavit on 11 April 2013. The Union of India reported that 16 states have been notified of the Victim Compensation Schemes (VSC), there are 5 states which the Union of India are considering notifying the VCS, 7 states that have not initiated the VSC and there are 4 union states that have not initiated the VSC. Unfortunately, these schemes vary widely between states and provide pitiable amounts of Rs. 25,000 to Rs. 2 lakhs for medical care.

27. Maximum limit of compensation for Particular of Loss or Injury under Victim Compensation Scheme notified by the State Government.

| State | Injury caused by acid attack | Rehabilitation |
|-------------------|----------------------------------------------------------|----------------|
| Arunachal Pradesh | Rs. 1 lakh | Rs. 20,000 |
| Assam | Rs. 1,75,000 | n/a |
| Bihar | Rs. 25,000 | Not mentioned |
| Chattisgarh | Rs. 50,000 | Rs. 20,000 |
| Goa | Not mentioned; but includes loss of limb or part of body | Not mentioned |

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| | resulting above 40% and below 80% handicapped: Rs. 25,000 | |
| Gujarat | Permanent disfigurement of face: Rs. 1 lakh; assault on women disfiguring her face or any part of body by acid: Rs. 50,000 | n/a |
| Himanchal Pradesh | Rs. 50,000 | Not mentioend |
| Jharkhand | Not mentioned | Rs. 20,000 |
| Karnataka | Not mentioned | Rs. 20,000 |
| Manipur | Rs. 50,000 | Rs. 20,000 |
| Mizoram | Not mentioned | Not mentioned |
| Odisha | n/a | Not mentioned |
| Rajasthan | Rs. 2 lakh | Rs. 1 lakh |
| Sikkim | Rs. 30,000 | Rs. 30,000 |
| Tripura | Rs. 75,000 | not mentioned |
| West Bengal | Not mentioned | Rs. 10,000 |
| Union of Chandigarh | Disfigurement of face: min: Rs. 2 lakh; max: Rs. 3 lakh; other cases of injury: min/max: Rs. 50,000 | Min/Max: Rs. 20,000 |
| Union of | In case of disfigurement of | 20,000 |

| | | |
|---------------------------|----------------------------------------------------------------|---------------|
| Dadar& Nagar Haveli | face: Min: 2 lakh; max: 3 Lakh, other cases: 50,000-min/max | |
| Lakshadwe ep | Not mentioned | Not mentioned |

28. Haryana has divided its Victim Compensation Scheme according to ages.

Haryana ages: < 40 40-60 >60

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|------------------------------------------------------------------------------|----------------|------------|------------|
| Loss of any limb including loss due to acid attack | Rs. 2 lakhs | Rs. 1 lakh | Rs. 50,000 |
| Loss of any limb or part of body 50% including loss due to acid attack | Rs. 1 lakh | Rs. 50,000 | Rs. 25,000 |

29. Despite the fact that the states and union territories have included a rehabilitation for acid attack victims, the rehabilitation amount in addition to the amount allocated for the victims of acid attacks is less than 3 lakhs. Further, most states have not even provided a compensation blatantly ignoring the Supreme Court's order. Bihar has only provided Rs. 25,000, a pitiful amount, with no compensation for rehabilitation. Recently, the Supreme Court ordered on 18 July 2013 directing the states and union territories to make

Rs. 3 lakh minimum for compensation for acid victim attack victims. Rs. 3 lakh for acid victims is arbitrary, unreasonable, and unduly. Further it fails to cover even 10% of the compensation required for the lifelong surgeries and rehabilitation required by acid attack victims.

INSTANCES IN OTHER STATES

30. Instances of acid attacks across the country are rampant. Since buying acid is so simple, it is being used to settle the most minor disputes. For Ritu Saini, acid was used to settle a family property dispute. Ritu's aunt hired someone to throw acid at her niece on 26 May 2012. Once an outgoing, athlete, Ritu's acid attack has forced her to quit school and stay at home. Her face is 90% burnt and she has lost her left eye and left breast. Further, the acid affected her right eye as well causing her eye to water if she keeps it open for too long. Her family has only received Rs. 25,000 in compensation while her father has spent over 2.5 lakhs on her surgeries. Ritu is still unable to leave her house. A true Copy of My face was used to settle scores: Ritu Saini by Sat Singh, issued by the Hindustan Times dated 24 July 2013 is herein marked and annexed as **ANNEXURE P-12**.
31. Most recently on 13 May 2013, a young 23-year-old woman Preeti Rathi was killed by acid as she was taking the train to

her prestigious new job as a military nurse. She was on the way to the job site with her father when the acid was thrown at her. As a result of the attack, her eyes, kidneys were damaged and acid had entered her esophagus and windpipe resulting in her tragic death. A true copy of Till death, she kept asking why: acid attack victim PreetiRathi's mother" issued by the Hindustan Times, dated 25 July 2013 is herein marked and annexed as **ANNEXURE P-13.**

32. Additionally, just a week after this Hon'ble Court passed the order in Laxmi vs. Union of India, Neisha Sheikh, mother of two, was attacked in Ghaziabad by a stalker who had harassed her for four years. Neisha suffered 40% to 50% of burns on her body including her face, chest, and abdomen. A true copy of the article A man throws acid on a woman in Ghaziabad, issued by the Hindustan Times, dated 26 July 2013 is herein marked and annexed as **ANNEXURE P-14.**

33. In Kolkata, a family used acid to silence a girl forever. On 23 June 2012 18-year-old Sabina Khatun's throat was used to empty an acid bottle simply because the son of the family announced he wanted to marry Sabina, his girlfriend of three years. The family assaulted Sabina and then the father emptied a bottle of acid in her throat while holding her mouth to ensure that she swallowed all of the liquid. Sabina's perpetrators were arrested very briefly and then released on bail. Sabina's powerful perpetrators continue to threaten her family announcing blatantly that the police cannot do anything to them and that if she pursues legal action the family will put acid on her eyes and face. Sabina is forced to remain at home, fearful to leave her house afraid for both her life and her four other sisters' lives. As a result of the acid attacks, Sabina cannot eat anything but drink cold milk, Horlicks, and boiled rice. A true copy of They emptied an acid bottle in my throat, says survivor Sabina Khatun, issued by the Hindustan Times, dated 30 July 2013 is herein marked and annexed as **ANNEXURE P-15.**

32-34. These are just few of the cases that have occurred in mid-2013, there are many more cases occurring every day in various cities that are unprosecuted and/or undocumented.

2008 PUBLIC HEARING & RECOMMENDATIONS

33-35. In 2008 the Campaign and Struggle Against Acid Attacks on Women organized a public hearing and released recommendations pertaining to the acid attack survivors' right to health. The hearing resulted in the following recommendations. True copy of recommendations following observations recorded at the public hearing organized by Campaign and Struggle Against Acid Attacks on Women at Senate Hall, Central College, Bangalore dated 24 July 2008.

- a. India does not have a standard treatment or management guidelines for medical treatment of acid attacks. "This causes confusion in the medical professionals and unnecessary delay even in the first-aid to be given, due to which the damage/trauma increases and quite a few victims succumb to the injuries. The acid burns are treated in line with the

b. general fire burns and it has adverse effects e.g in the fire burns case, the drying of the skin is waited for to stop dehydration and loss of fluids. But in acid burns case the entire acid should be cleared, affected tissues needs to be scooped out etc.” Standard treatment and management guidelines (STM) should be developed by a panel consisting of experts/specialists in forensic medicine and toxicology, plastic surgery, general medicine and psychiatry.

c. Medical experts do not have adequate information to treat survivors. Moreover, district hospitals “are not equipped with technical know – how and skills and with necessary equipments.”With the passing of each hour and delay, the corrosive substance does irreversible damage to the human body, and the psychological trauma is so much more. Hence the earliest treatment and care is of utmost importance. Therefore, “the first aid and primary care protocols/guidelines (to neutralize the acid and stabilize the victim) should be displayed in all the health centers in the state.” Additionally, all public hospitals should have the facilities to treat acid attack survivors and private and charitable hospitals should also have an arrangement to provide survivors with free treatment.”At least 5 hospitals in the state

should have upgraded special units equipped with expertise, equipment and facilities to treat the acid burns cases. The principal secretary to health and principal secretary to women and child development should allocate budget for this in time bound manner.”

d. To ensure justice for acid attack survivors, states need to ensure coordination between medical and legal authorities. “The district civil surgeon should be the principally responsible person to take charge of the acid attack victim’s case which includes admission, guiding the appropriate health staff, to refer and to follow up. The district civil surgeon should be in coordination with the District Collector, Superintendent of Police and the Director of the relevant Santwana Kendra.”

e. Witness protection should be given to the victim and witnesses and to engage a special public prosecutor at the cost of the government.

BANGLADESH’S ACID ATTACK LAW

34.36. Other countries have passed laws to curtail the repetition of such horrific attacks. The Petitioner would like to highlight that this crime is mainly committed in four countries in the world, namely Bangladesh, Pakistan, Cambodia, and India. All

three other countries have engaged in paving the way to an effective remedy for these survivors before India.

37. Bangladesh passed a law in 2002, which is a much stronger law than the Indian law (See Annexure P-1). Bangladesh has passed two laws to curb acid attacks, the Acid Control Act 2002 and the Suppression of Offense by Acid Attack 2002. These laws have established the following to curb acid attacks:

- Acid Prevention Tribunals to deal with Acid attack cases.
- Completely banned acid sale.
- Established a National Acid Control Council consisting of the Home Ministry, Ministry of Charge of Women and Children and other leaders that meets once every three months to make policy recommendations on the sale of acid, policy recommendations for medical, legal, and rehabilitation for the acid survivors, provides awareness activities of the negative and devastating effects of the misuse of acid and conducts other activities to curb the acid attacks.

- Enforced that the investigation of the offense must be done within 30 days with possible extension of 30 days with special reason given, and if the investigation is not complete within that time period, then another police officer has to conduct the investigation and there has to be action taken against the initial officer.

- Holds officers responsible for negligent behaviour where direct action is to be taken against the negligent officer.

- Enforces that a trial of an offense must be completed within 90 days of the offense and if a judge retires or transfers midway then the second judge cannot ask to retry the trial.

- If the accused is not present, the trial can be conducted in absentia.

38. The Indian law pales in comparison to the Bangladeshi Law, as it does not effectively address the gravity of acid attacks nor does it adequately help the acid attack survivors. The Indian Law is lacking in many respects:

- It does not address speedy investigation procedures for the survivor,
- It does not address any methods to expedite the trials for acid survivors whose lives have essentially stopped since the attacks,
- It does not adequately compensate the survivors of acid attacks as most surgeries can cost up to Rs. 3 lakh per surgery and acid attack survivors require surgery throughout their lives in addition to psychological help,
- The law has not included inputs from survivors or advocacy groups.

VIOLATIONS

37.39. This Hon'ble Court has recognized that the right to life includes the right to be free from inhuman and degrading treatment. As pronounced in Francis Coralie Mullin Vs. Union Territory of Delhi & Ors [1981 SCR (2) 516]: "There is implicit in Article 21 the right to protection against torture or cruel, inhuman or degrading treatment which is enunciated in Article 5 of the Universal Declaration of Human Rights and

guaranteed by Article 7 of the International Covenant on Civil and Political Rights (ICCPR). . . .”

~~38.40.~~ International Human Rights conventions, committees, and tribunals routinely underscore the importance of the right to health, and the right to be free from inhuman, cruel, or degrading treatment.

i. International Covenant on Civil and Political Rights, ratified by the Union of India on 10 April 1979, entered into force in India on 10 July 1979:

I. Article 3. The States Parties to the present Covenant undertake to ensure the equal right of men and women to the enjoyment of all civil and political rights set forth in the present Covenant.

I.II. Article 12. 1. Everyone lawfully within the territory of a State shall, within that territory, have the right to liberty of movement.

41. As a signatory to the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), the Government of India is obligated to take measures to take appropriate measures where legislative and other measures,

including sanctions where appropriate prohibiting all discrimination against women.

I. Article 2: States Parties (...) agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and to this end, undertake :
(b) To adopt appropriate legislative and other measures, including sanctions where appropriate, prohibiting all discrimination against women.

II. Article 5: States Parties shall take all appropriate measures:
(a) To modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.

III. Article 16:1. States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of

equality of men and women:(a) The same right to enter into marriage;(b) The same right freely to choose a spouse and to enter into marriage only with their free and full consent;

I:IV. Article 24: States Parties undertake to adopt all necessary measures at the national level aimed at achieving the full realization of the rights recognized in the present Convention.

GROUNDS

Hence the Petitioner moves before this Hon'ble Court by way of this petition on, inter alia, following grounds:

- I. BECAUSE The right to life and the liberty of movement is protected by article 21 of the Constitution.
- II. BECAUSE This Hon'ble Court has also recognized that the right to life includes the right to be free from inhuman and degrading treatment.
- III. BECAUSE it is clear that the Union of India, the State of Bihar and other respondents have not taken adequate

steps to ensure justice for acid attack survivors with speedy investigations and trials, adequate medical care or just compensation.

- IV. BECAUSE acid attacks are a blatant discrimination on the grounds of sex prohibited by article 15 of the Constitution which provides that "*(1) The State shall not discriminate against any citizen on grounds only of religion, race, caste, sex, place of birth or any of them*".
- V. BECAUSE the publicity of such heinous acts and the failure of the Union and the States to provide adequate compensation under Survivor Compensation Schemes have caused the survivors to be isolated from all sectors of society because they are unable to leave their house because of their severe disfigurements.
- VI. BECAUSE the order passed on 18 July 2013 was not complied with, and, further, that the Rs. 3 Lakhs compensation proposal is arbitrary and does not adequately address the struggles of the acid attack survivors hence medical care should be free for acid attacks sufferers.

VII. BECAUSE the order passed on 18 July 2013 does not effectively address all of the grievances of acid attack survivors including their housing needs, employment needs, psychological welfare.

~~VII.~~VIII. BECAUSE Section 326A of the Criminal Amendment Law (Amendment) Ordinance 2013 does not effectively compensate the survivor as it makes the survivor depend on the perpetrator to receive any compensation

~~VIII.~~IX. BECAUSE the Criminal Amendment Law (Amendment) Ordinance 2013 does not effectively address speedy trial procedures for acid attack survivors.

~~IX.~~X. BECAUSE the Union of India has not developed standard treatment and management guidelines for acid attack survivors.

~~X.~~XI. BECAUSE public health facilities do not have adequate staff, know how, or equipment to treat acid attack survivors.

~~XI.~~XII. BECAUSE the Union of India has not developed coordination schema between medical and law enforcement officers to ensure adequate treatment and justice for acid attack survivors.

~~XII.~~XIII. BECAUSE acid attacks create breaches of equality insofar as acid attack survivors will again never be on an equal footing with other citizens as being able to gain education, finding employment, and leading a normal family life hence the failure to give the survivors adequate compensation violates Article 14 of the Constitution.

~~XIII.~~XIV. BECAUSE Article 51A of the Constitution provides that: "*it shall be the duty of every citizen of India : (e) (...) to renounce practices derogatory to the dignity of women,*" hence the Union should clearly declare acid throwing as derogatory to the dignity of women. By failing to do so, the State is guilty of aiding and abetting derogatory practices to the dignity of women.

XV. BECAUSE the Chief Minister of Bihar, Mr. Nitish Kumar, has not replied to the open letter of Chanchal in which she is seeking substantial help from him.

~~XIV.~~XVI. BECAUSE since Chanchal's attack on 21 October 2012, at least two other survivors were reported by media coverage: Preeti and Nisha were assaulted respectively on 13 May 2013, 26 July 2013 and on each of these dates, they were either made acid attack survivors or martyrs. Further, two more girls: Ritu and Sabina were acid attack survivors were attacked just prior to Chanchal on 26 May 2012 and 23 June 2012.

~~XV.~~XVII. BECAUSE it is of the duty of the Central State to protect its citizens as far as these horrendous crimes happen in every part of the Union's territory, and that, by signing CEDAW, The Union of India engaged itself to adopt a protective legislation of equality at the Centre level (Article 24 CEDAW)

~~39.~~42. The petitioner has not filed any other petition seeking same reliefs in this Hon'ble Court or any other High Court in the country.

~~40.~~43. The Petitioner has no other alternate equally efficacious remedy than to approach this Hon'ble Court.

PRAYER

In light of the facts and circumstances of this case, the Petitioner prays as under:

- a. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 7 to provide Chanchal Kumari Paswan and her minor sister with free medical care, medicines, plastic surgery, and psychological care commensurate with modern day standards for the burns and wounds for the duration of their lives.
- b. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 4 to reimburse Chanchal Kumari Paswan and her family Rs. 5 lakhs that her family has spent on her medicines thus far and for any additional expenses related to Chanchal Kumari Paswan's and her minor sister's treatment.
- c. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent 4 to give Chanchal Kumari Paswan and her family at least Rs. 10 lakhs for her pain and suffering that she has suffered at the hands of the PMCH hospital, Patna and the State of Bihar as described in paragraph A of the prayer.

d. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 4 to ensure that Case arising from Registered Maner P.S. Case No: 312/12 Date 22/10/12 proceeds on a daily basis so that it is completed within six months.

e. Issue a writ of Mandamus or any other appropriate writ order or direction to an order directing Respondent No. 2 to develop a standard treatment and management guidelines by a panel consisting of experts/specialists in forensic medicine and toxicology, plastic surgery, general medicine and psychiatry. The guidelines should include treatment/care at the Primary Health Center level, Community Health Center level, the district hospital level and the tertiary care hospitals level. It should also include training to all medical and public health staff.

f. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 2 to direct all private hospitals to provide free treatment for acid attack cases irrespective of the survivors' financial condition and to create an arrangement for the care and protection compensation to awarded.

- g. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 2 to have pictorial displays with the first aid and primary care protocols/guidelines to neutralize the acid and stabilize the survivor in all PHCS, sub-centers, health centers, and government hospitals in the states.
 - h. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 2 to issue a directive to all states health ministries to direct the district civil surgeon as the principal responsible person to take charge of the acid attack survivor's case which includes admission, guiding the appropriate health staff, to refer and to follow up. The district civil surgeon should be in coordination with the District Collector, Superintendent of Police and the Director of the relevant Santwana Kendra.
 - i. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 1 to direct all states and Union of India to increase the amount to Rs. 10 Lakhs minimum as compensation to survivors of acid attacks.
 - j. Issue a writ of Mandamus or any other appropriate writ order or direction to direct Respondent No. 1, 2, and 6 to develop a comprehensive rehabilitation scheme for acid attack survivors for housing, education, and employment.
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- k. Issue a writ of Mandamus or any other appropriate writ order or direction to Respondent No. 6, the Ministry of Education to reform educational programs from primary school. Every school, whether public or private should deliver a compulsory class to as the understanding of the gravity of the violence against women, which should be given to boys and girls at the youngest age.
 - l. For acid attacks to be specifically included in the Prevention of Atrocities Act (1989) in (Section 3(1)i to xv and 3(2)i to vii) defining atrocities or (Section 3(1)i to xv and 3(2)i to vii) or (Section 3(2)i to vii, 5) on punishments.

m. Issue any other order/direction that his Hon'ble Court may
deem fit.

AND FOR THIS ACT OF KINDNESS, THE PETITIONER AS IN
DUTY BOUND SHALL EVER BE GRATEFUL

FILED BY

(JyotiMendiratta)

Advocate for Petitioner

Drawn by:- JUBLI MOMALIA

Drawn on:- August 2013

Place:- New Delhi

Filed on: