



Contact

Sustainable Hydropower Website
C/- Hydro Tasmania
4 Elizabeth St
Hobart TAS 7000
AUSTRALIA

sustainable.hydropower@hydro.com.au

Public Health

Chamera, India

Construction of the Chamera Project led to huge investment in India, resulting in a range of benefits including modern health and educational facilities.

Overview

The Chamera Hydroelectric Project Stage-I is located on River Ravi in the State of Himachal Pradesh, India. Ravi is a perennial snow fed river with a power generation potential of 2365 MW, of which 1342 MW (including 540 MW of Chamera Stage-I) has been harnessed so far. Completion of Chamera Stage-II will increase this capacity by a further 300MW.

The Chamera Stage I Dam is a concrete arch gravity structure of height 141 m and length 295m. It has an 84 m high surge shaft and 157 m long vertical pressure shaft connecting to an underground Power House through 3 penstocks. The project has an installed capacity of 540 MW (3x180 MW turbines). The reservoir extends 18 km upstream along the River Ravi Basin and 11 km along the River Siul Basin. The surface area of the reservoir is approximately 9.5 sq. km.

Dam Name

Scheme operator

National Hydro Electric Power Corporation Ltd

Size of scheme (MW)

540

Country

India

Catchment area**River**

Ravi

Effective reservoir capacity

Run of River

Construction years

1985-94

Reservoir size

100 ha

External recognition

Nil

Details

Hospitals at Banikhet and Khairi, along with a dispensary at Sundla and first aid post at the dam site were established by NHPC to provide medical services to employees and the local community. Various medical camps were also established in the area to provide medicine and medical services free of cost and in close proximity to communities in the project area. In addition, safe potable water has also been made available at a number of villages.

The distribution of free medicines and improvements in the availability of medical services have greatly improved the general health of the population and have drastically reduced death due to disease epidemics. For example, epidemics in the year the project commenced (1985) cost 695 lives. By 1988 this had reduced to 450 deaths, and in 1993 no deaths resulted from disease epidemics.

Other aspects

Population Displacement

1554 families were affected by acquisition of land for the project, of which 433 became homeless and required resettlement, the remainder losing a portion of their land. A rehabilitation plan for displaced people was implemented, and included cash compensation and the provision of new amenities including medical services, schools and infrastructure.

Distribution and Sharing of Benefits

Many new development activities have taken place in the area due to construction of Chamera Dam with considerable socio-economic gain, as evidenced by increases in employment in new industries such as mining, aquaculture and tourism. The NHPC policy of funding educational centres and medical services has directly improved health, literacy and numeracy among the local residents. Many displaced residents were employed during the construction or operational phases of the project, reducing local unemployment.

Further information

Source: Hydropower Good Practices Workshop, Annex VIII - Examples for Good Practice Report, Villach, Austria, October 2005. International Energy Agency.

<http://www.nhpcindia.com/>

<http://www.irm.org/programs/india/pdf/FinancingDams.02.2005.t.pdf>