

Khaph Panchayats as Resistance Agents: Combating Emergency Excesses in Pipli Village, Haryana, India

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Abstract

The Indian Emergency (1975–1977) marked a dark chapter of administrative overreach, as exemplified by coercive sterilisation campaigns under the guise of family planning. This article examines the resistance to forced sterilisation in Pipli village, Haryana, focusing on the pivotal role of Khaph Panchayats—traditional community councils. Drawing on the Shah and Sharma Commission’s reports, archival records, and oral histories, this study chronicles the bureaucratic brutality, police violence, and community mobilisation that culminated in the tragic Pipli incident of December 1976. This study challenges the pejorative label of Khaph Panchayats as "Kangaroo courts," highlighting their capacity to unify diverse social groups against injustice when guided by principled leadership. This underscores the imperative of transparent and accountable governance to prevent administrative excess and restore public trust, offering lessons for contemporary policymaking.

Keywords: Indian Emergency, Khaph Panchayats, Coercive Sterilisation, Pipli Village, Administrative Overreach, Community Resistance

1. Introduction

When anchored in fairness, legality, and public welfare, public administration fosters societal prosperity. However, its deviation from these principles can precipitate oppression and violence, as vividly demonstrated during the Indian Emergency (1975–1977). On June 25, 1975, under Article 352 of the Constitution, the Emergency suspended civil liberties,

censored the press, and empowered the state to pursue aggressive policies, most notoriously the family planning program. Driven by Prime Minister Indira Gandhi's Administration and her son Sanjay Gandhi's influence, this program prioritised population control through Coercive sterilisations often target marginalised communities. In Haryana, the campaign's intensity led to widespread resistance, with Pipli village in Sonipat district emerging as a focal point of confrontation.

On December 2, 1976, a violent clash in Pipli between villagers and police resulted in the deaths of three villagers—Chanderpati, Jagmohan, and Rattan Singh (via injury)—and a constable, Sadhu Ram. This incident, rooted in forced sterilisations, exposed the horrors of administrative overreach and the resilience of community resistance led by Khap Panchayats. These traditional councils, often maligned as regressive, played a transformative role in mobilising over 100,000 people, challenging their stereotype as arbitrary “Kangaroo courts.” This article uses Pipli as a case study to analyse the interplay between bureaucratic coercion and grassroots resistance, drawing on commission reports, oral testimonies, and archival data. It argues that accountable governance is essential to prevent such atrocities and that community institutions like Khaps can serve as vital counterweights to state excesses when driven by inclusive leadership. This study underscores the need for principled and inclusive leadership in community institutions because it can effectively unite diverse social groups against injustice.

2. Methodology

This study adopted a qualitative case study approach, focusing on Pipli village during the emergency. Primary sources include the Shah Commission of Enquiry (1978) and Sharma Commission (1978) reports, which provide detailed accounts of sterilisation policies, administrative directives, and violent incidents. Oral histories, notably interviews conducted

with eyewitnesses like Nafe Singh Dahiya (aged 85, offer firsthand perspectives on the Pipli incident. These interviews, recorded telephonically, faced challenges such as fading memories and emotional distress, which necessitated cross-verification with archival records.

Secondary sources provide theoretical context, including Waldo (1981) on public administration and Pinto (1997) on bureaucratic neutrality. Sterilisation data from the Sharma Commission was synthesised to quantify the campaign's scale and impact (see Section 4).

The analysis integrates historical, sociological, and administrative perspectives to evaluate the role of Khap Panchayats and draw lessons for governance.

3. Administrative Framework of the Family Planning Program

The Emergency transformed this approach, introducing compulsion under the guise of national interest. On March 5, 1976, Union Health Minister Karan Singh proposed incentives and disincentives for central government employees, formalised by the Cabinet on March 24, 1976, as part of Sanjay Gandhi's five-point program. This program, which also included adult education and caste eradication, aimed to control population growth. Haryana, a small state, faced ambitious sterilisation targets: 74,300 for 1975–76 and 52,000 for 1976–77, which escalated to 200,000 in November 1976 following a state conference chaired by Chief Minister Bnarsi Das Gupta.

Between March and November 1976, the state government issued directives tying employee benefits to sterilisation compliance. Incentives included cash awards (e.g., ₹50 for Scheduled and Backwards Castes) and exemptions from penal rent for official accommodation.

Disincentives were severe: Employees with more than two children faced denial of promotions, transfers, loans, and even government jobs unless sterilised by 31 March 1977.

A new column in the Annual Confidential Reports linked performance to sterilisation targets, incentivising coercion. Under pressure from Deputy Commissioners (DCS), District officials delegated targets to departments like Panchayats, Revenue and Police, fostering a culture of fear and compliance.

From June 1975 to December 1976, Haryana performed 257,679 sterilisations, with 196,055 during the Emergency, outpacing larger states like Punjab. This scale was achieved through oral directives, bypassing formal protocols, as noted by the Shah Commission (1978). Such practices enabled arbitrary enforcement, with police and local officials dragging individuals from homes, fields, and public spaces for sterilisation, often ignoring eligibility criteria (couples aged 15–44 with two or more children).

4. The Pipli Incident: Coercion and Resistance

Pipli, a village of 1,968 residents across 321 households in Sonipat's Kharkhoda block, became a flashpoint for resistance in late 1976. The appointment of a new DC in November 1976 intensified sterilisation efforts, with the Block Development & Panchayat officer (BD&PO) leading a zealous campaign. The BD&PO targeted ineligible individuals, including bachelors, the elderly, and those with fewer than two children, resulting in severe consequences.

The sterilisation data from Pipli, as reported by the Sharma Commission (1978), revealed the extent of coercive practices: out of 186 sterilisations, 104 individuals were under 40 years old, 42 were aged 41–50, 27 were 51–60, 12 were 61–70, and 4 were over 70, indicating a broad age range targeted. Notably, seven unmarried individuals, 2 with one child and one with no children, were sterilised, alongside a case in which both husband and wife underwent the procedure, highlighting the disregard for eligibility criteria. Tragically, four deaths occurred in post-operation, underscoring the health risks and lack of medical oversight.

These deaths serve as a stark reminder of the human cost of administrative overreach and the urgent need for accountable governance.

A timeline of events illustrates the escalating tensions:

- **October 29, 1976:** The BD&PO coerced Hawa Singh, a bachelor, into sterilisation; he died of an infection on November 29.
- **November 30, 1976:** The BD&PO assaulted Sardara's wife and forcibly sterilised him despite his plea for delay because of his son's illness.
- **December 1, 1976:** The BD&PO's visit sparked a confrontation; villagers thrashed him after he used abusive language and threatened retaliation.
- **December 2, 1976:** A police contingent, including the SDM, DSP, and 30 constables, arrived at 7:00 AM, detaining villagers at a milk dairy. Women resisted, leading to a lathi charge and police firing, killing Chanderpati and Jagmohan, injuring Rattan Singh, and resulting in Constable Sadhu Ram's death by a mob.

Women played a pioneering role, defying patriarchal norms by confronting police with local weapons (gandasas, jellies, dandas). Their rallying cry— "we had not worn the bangles" symbolised their resolve. Khap Panchayats, led by the Dahiya Khap under Captain Jai Lal, mobilised over 100,000 people from neighbouring villages like Gopalpur. Supported by 29 Khaps (e.g., Hooda, Dalal, Malik), village panchayats, and leaders like Rizak Ram, the movement transcended caste and gender divisions. Despite a negotiated compromise facilitated by MLA Rizak Ram, the administration betrayed the agreement, arresting 21 villagers, including Nafe Singh Dahiya, and issuing threats to raze the village, compelling further sterilization.

5. The role of Khap Panchayats

Khap Panchayats, rooted in Haryana's Jat-dominated agrarian society, are clan-based councils traditionally tasked with resolving disputes and upholding social norms. They are also known as Often criticised as regressive for enforcing patriarchal customs, their role in Pipli reveals transformative potential. The Dahiya Khap, supported by leaders like Nafe Singh Dahiya, Nawal Singh, and Shadi Lal, orchestrated a unified response, rallying women, youth, Arya Samaj members, and leftists. Their person-to-person communication, devoid of modern technology, mobilised a massive gathering along the Paai distributary, demonstrating organisational prowess.

Khaps' success hinged on three factors:

1. **Community Support:** Widespread resentment against sterilisation fostered solidarity, transcending caste and gender barriers.
2. **Visionary Leadership:** Captain Jai Lal and Rizak Ram combined traditional authority with political acumen to bridge Khaps and constitutional panchayats.
3. **Commitment to Justice:** The Khaps prioritised public welfare, challenging the "Kangaroo court" stereotype by advocating for victims like Hawa Singh and Sardara.

Interviews with survivors, such as Nafe Singh Dahiya, highlighted Khaps's role in negotiating with authorities, although administrative duplicity undermined these efforts. The involvement of the 29 Khaps, including Hooda, Sangwan, and Phogat, underscores their regional influence. This case challenges scholarly critiques (e.g., Sangari, 1995) that portray Khaps as inherently oppressive, suggesting their efficacy depends on context and leadership.

6. Administrative Failures and Theoretical Insights

The Emergency exposed a "committed bureaucracy" that prioritised political loyalty over

Public welfare, as critiqued by Pinto (1997). Indira Gandhi's vision of a bureaucracy aligned

with the ruling party's ideology undermined neutrality, transforming officials into “willing tools of tyrants” (Shah Commission, 1978). The Sharma Commission (1978) highlighted the absence of written guidelines, with verbal orders from Chief Minister Bansi Lal enabling arbitrary detention and coercion. For instance, the DC of Bhiwani detained an honest officer under MISA on Lal’s oral directive, illustrating authoritarian overreach.

Balzac’s metaphor of bureaucracy as a "gigantic force driven by dwarfs" (Marco & Charles, 1993) captures the Emergency’s administrative dysfunction. Officials, driven by self-preservation, fabricated records and ignored public resentment, as seen in Pipli, Uttawar, and Nagina. Comparative cases, such as the Uttawar raid, in which 180 villagers were sterilised, reveal a pattern of state-sponsored violence. The bureaucracy’s failure to adapt to public resistance led to escalations, culminating in preventable tragedies.

Waldo’s (1981) framework of public administration as a moral enterprise

Emergency betrayed ethical governance. The Shah Commission noted that relying on oral directives eroded accountability, allowing officers to act non-uniformly. The Pipli incident illustrates how bureaucratic misalignment with public interest can destabilise communities, necessitating administrative transparency and oversight.

7. Lessons and Policy Implications

The Pipli incident provides enduring lessons for governance.

These are:

1. **Accountable Administration:** Transparent, rule-based systems are essential to prevent arbitrary enforcement and restore public trust.
2. **Community Empowerment:** Traditional institutions like Khaps can complement formal governance when inclusive and principled, suggesting a hybrid crisis response model.
3. **Bureaucratic Neutrality:** A neutral bureaucracy free from political pressure is

critical to upholding legality and public welfare.

Policy recommendations include the following:

- **Institutional Oversight:** Establish independent bodies to monitor family planning and public health campaigns and ensure compliance with ethical standards.
- **Community engagement: Traditional councils should be integrated** into rural governance frameworks, leveraging their social capital for equitable policy implementation.
- **Administrative Training:** Training bureaucrats in ethical decision-making and public accountability to prevent “committed bureaucracy” syndromes.

8. Conclusion

The Pipli incident of December 1976 embodied the catastrophic consequences of administrative overreach during the Indian Emergency. Coercive sterilisations, driven by a “committed bureaucracy,” provoked widespread resistance, with Khap Panchayats emerging as vital agents of community mobilisation. Their ability to unify diverse groups—women, youth, and castes—challenges their negative portrayal, highlighting the potential of traditional institutions in resisting state oppression. This study underscores the necessity of a judicious and transparent administrative system to safeguard citizens’ rights and rebuild public trust.

Future research should explore the evolving role of Khaps in modern governance and examine their adaptability to democratic frameworks. Comparative studies of community resistance during the Emergency, such as in Uttawar and Nagina, could further illuminate the dynamics of state-society relations. The lessons from Pipli remain relevant, urging policymakers to prioritise accountability and inclusivity to prevent the recurrence of such

atrocities.

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