

*Himalayan Rivers Development Component :*

1. Kosi-Mechi
2. Kosi-Ghagra
3. Gandak-Ganga
4. Karnali-Yamuna
5. Sarda-Yamuna
6. Yamuna-Sirsa branch of Western Yamuna canal (Rajasthan)
7. Ganga-Sirhind canal
8. Tajewala-Bhakra
9. HARIKE-Tailend of Rajasthan canal
10. Extension of Rajasthan canal to Sabarmati
11. Chunar-Sone Barrage
12. Sone Barrage-Kiul
13. Sone Dam-Southern Tributary
14. Brahmaputra - Ganga (Manas-Sankosh-Teesta-Ganga)
15. Farakka-Sunderbans
16. Farakka-Durgapur
17. Durgapur-Dwarkeshwar
18. Durgapur-Subernarekha
19. Subernarekha-Mahanadi

**Dengue Fever**

\*509. SHRI R. DEVADASS : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether grant and financial assistance for research on Dengue Fever has been provided to the Central Council for Research in Unani Medicines (C.C.R.U.M.);

(b) if so, the amount sanctioned in this regard;

(c) whether the medicines for Dengue Fever were distributed in the public through Unani dispensaries or other-wise; and

(d) if so, the details thereof ?

THE MINISTER OF TEXTILES (SHRI R.L. JALAPPA):  
(a) and (b) The Government of India permitted the Central Council of Research in Unani Medicine to utilise an amount of Rs. 8.00 lakhs to undertake medicare oriented research work on Dengue fever out of the budget provision of the

Council for the year 1996-97 and no separate grant or financial assistance was provided to the Council for the purpose.

(c) and (d) The Council distributed the medicines for Dengue Fever to the public through its research Units and 'Majedia Hospital' in Delhi.

**Three Tier System of Medical Services**

\*510. SHRIMATI LAKSHMI PANABAKA :  
SHRI T. SUBBARAMI REDDY :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the All India Institute of Medical Sciences have suggested rationalisation of medical services in the country and to adopt a three-tier system for providing medical facilities to the people at the village and district levels;

(b) if so, the details thereof;

(c) whether the Government have examined the suggestions made by the AIIMS; and

(d) if so, the steps being taken by the Government to implemented these suggestions ?

THE MINISTER OF TEXTILES (SHRI R.L. JALAPPA):  
(a) to (d) The three -tier system of rural health infrastructure in the village level has been adopted from the 5th Five Year Plan onwards. The system comprises of Sub-centres. Primary Health Centres and Community Health Centres established on the basis of population norms. The services provided by the infrastructure include preventive, promotive and curative health care to the people dwelling in the area. The All India Institute of Medical Sciences (AIIMS) has not made any specific suggestion in this regard.

**Infant Mortality**

\*511. SHRI ANANTHA VENKATARAMI REDDY : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the Union Government are aware of the large scale infant mortality in Andhra Pradesh and certain other States;

(b) if so, the action taken to check infant mortality in the States;

(c) the proposal received from those States to improve and augment the existing Family Welfare Programmes; and

(d) action being taken thereon ?

THE MINISTER OF TEXTILES (SHRI. R.L. JALAPPA) : (a) As per the information available through the sample Registration system of the Registrar General of India, the Infant Mortality Rate for Andhra Pradesh has consistently been lower than the National average. While the Infant Mortality Rate of the country for 1995 was 74 per 1000 live births, for Andhra Pradesh it was 66 per 1000 live births. A statement giving the Infant Mortality Rates for the States is attached.

(b) to (d) : The Child Survival and Safe Motherhood Programme launched in 1992 was implemented in all districts of the country in a phased manner. The Programme aimed at reducing infant mortality through immunization, control of diarrhoeal diseases, Care of acute respiratory infection cases, provision of essential newborn care and Prophylaxis against Vitamin A deficiency.

The family welfare programme is being continuously augmented depending on the availability of additional resources to the Department.

#### Statement

##### I. Infant Mortality Rates India and Major States, 1995 (Provisional)

India	74*
Andhra Pradesh	66
Assam	77
Bihar	73
Gujarat	62
Haryana	68
Himachal Pradesh	21
Karnataka	62
Kerala	16
Madhya Pradesh	99
Maharashtra	55
Orissa	103
Punjab	54
Rajasthan	85
Tamil Nadu	56
Uttar Pradesh	86
West Bengal	59

(\* Exclude Jammu & Kashmir and Mizoram)

##### II. Provisional Estimates of infant Mortality Rate (IMR) for the period 1993-95 for Smaller States/ Union Territories

Arunachal Pradesh	63
Goa	14
Manipur	27
Meghalaya	45
Nagaland	6
Sikkim	47
Tripura	45
A&N Islands	32
Chandigarh	42
Dadra & Nagar Haveli	78
Daman & Diu	36
Delhi	39
Lakshadweep	37
Pondicherry	25

(Source : Sample Registration System)

#### Ground Water Level

\*512. SHRI SURESH PRABHU : Will the Minister of WATER RESOURCES be pleased to state :

(a) whether ground water levels in various parts of the country have gone down to an alarming low level; and

(b) if so, the reasons therefor and the preventive and corrective steps proposed to be taken in this direction, State-wise ?

THE MINISTER OF WATER RESOURCES (SHRI JANESHWAR MISHRA) : (a) Long term observations of ground water levels made by the Central Ground Water Board have shown gradual decline in the level of ground water in some pockets of some States in the Country.

(b) The fall in ground water level is mainly due to exploitation of ground water in excess of annual recharge as well as variation in the amount and distribution of rainfall. The steps taken by the Union Government to prevent decline in the level of ground water include :

- (i) Circulation of a Model Bill to all the States/Union Territories to enable them to enact suitable legislation for regulation and control of ground water development.
- (ii) Circulation of a Manual on artificial recharge of