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Revised Action Plan to Control Population Growth

*85. SHRI ANAND RATNA MAURYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Government have formulated a revised action plan to control the population growth rate;
 - (b) if so, the details thereof;
- (c) whether a sub-committee of the National Development Council for family planning has been constituted; and
 - (d) if so, the details of its objectives?

[English]

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI M.L. FOTE-DAR): (a) to (d). A statement is laid on the Table of the House.

STATEMENT

(a) and (b). Yes, Sir, The Action Plan highlights the need for evolving a national consensus in support of the Family Welfare Programme and to obtain the willing participation of all sections of the society. Its key features include, (1) improving the quality and outreach of family welfare services, (2) differential strategy for special focus on 90 poor performing districts (Birth rate of 39 per thousand population and above as per 1981 Census), (3) developing a mechanism to make available funds to States-UTs on the basis of reduction of actual birth rate,(4) increasing the coverage of younger age couples through vigorous promotion of spacing methods, (5) introducing new contraceptives and improving the quality of contraceptives, (6) strengthening family welfare schemes in urban areas specially in slum pockets, (7) revitalising training activities of medical/ para-medical personnel with emphasis on

- motivational and counselling aspects. (8) sustaining the good work done under the Universal Immunisation Programme and strengthening of other interventions for Maternal and Child Health Care, (9) reorientation of information, education and communication efforts to focus on the quality of life issues and interpersonal communication (10) involving voluntary and non-governmental organisations in a big way to promote active community participation in the programme, (11) gearing up of the implementation machinery in the States/UTs and (12) evolving high leve inter-sectoral co-ordination mechanisms at the national. State and district levels.
- (c) and (d): Yes, Sir. A seven member committee of the National Development Council on Population has been constituted with the following terms of reference:
 - To review the social and demographic dimensions, existing and requisite infrastructure at the community level, and the needs of technology development, relevant to the formulations of National Population Policy;
 - (ii) To identify intervention strategies for population control, both at the macro and micro levels, on a holistic and intersectoral basis:
 - (ii) To suggest mechanism for securing commitment and support of leadership of all denominations, and at all levels, for the National Population Policy and the implementation of population control programmes;
 - (iv) To recommend ways and means of achieving participation of the people, particularly women and youth, and through people's institutions such as NGOs, voluntary organisations, professional organisations, of all categories of health care providers, trade and industry, labour, organised and coop-

erative sector and media etc.

- (v) To outline policies and programmes for raising the social status of women, bridging the gender gap in literacy and health care, and promotion of health and welfare of the mother and the child, as essential inputs into population welfare programmes.
- (vi) To review and recommend appropriate changes in system of financing family welfare programme;
- (vii) Taking into cognizance the above recommendations, to suggest appropriate formulations for a National Population Policy;
- (viii) To identify and recommend suitable mechanism(s) for a continuous review and monitoring of the implementation of National Population Policy and the intervention strategies, recommended therein, and
- (ix) To make any other recommendations that may be appropriate either for the formulation of National Population Policy or for the implementation of population control programmes.

[Translation]

SHRI ANAND RATNA MAURYA: Of all the serious problems being faced by our country, the main problem is of growing population and the Government is not able to take any strict measures to control it. May I know from the hon. Minister whether a remarkable section of population is increasing its number in the name of religion while refusing to accept the family planning? What are the strict measures, the Government is likely to take in order to bring the growing population under control?

[English]

SHRI M.L. FOTEDAR: I would request the hon. Member that let us not divide the population control programme or the family planning programme on the basis of caste, colour, creed, region or religion.

[Translation]

PROF. RASA SINGH RAWAT: Sir, the reality is to be borne in mind. (Interruptions)

[English]

MR. SPEAKER: Allow him to give the reply.

SHRI M.L. FOTEDAR: I must tell the hon. Member that I am aware about the sensitivity of the subject. I would request the hon. Member very humbly, very passignately, in the larger national interest not to divide the issue on the basis of religion or caste. It is a national issue and we want to involve all sections of the society irrespective of any caste or religion because it is a national programme. I must tell the hon. Member also that it is a programme which is to be taken forward voluntarily. You cannot have any coercive methods to implement the programme. Only persuasive methods have to be adopted. Public consciousness has to be created in the country so that the entire mass of India accept this programme as its programme.

[Translation]

SHRI ANAND RATNA MAURYA: My second supplementary is as to what is the percentage of increase in population keeping in view the comparative reports 1990-91 and 1991-92? May I know whether the percentage of population is increasing or decreasing? If it is on increase, what is the role of religion in it?

[English]

SHRI M.L. FOTEDAR: I do not want

to say what is in my mind. I can tell the hon. Member that it is not the question of one side alone but on this side of the House also. Let us not divide the programme on the basis of religion. I can tell the hon. Member that religion is not the basis for this.

SHRI K. RAMAMURTHEE TINDI-VANAM: May I know from the hon. Minister as to what was the need for the Government to go in for a revised action Plan? Is it a fact that the purpose of family planning schemes is being defeated by the racket amongst the doctors and officials in preparing false records and statistics? If so, the action taken in this regard?

SHRI M.L. FOTEDAR: Sir. hon. Member has asked as to what is the need for revised action plan. Population growth is a national issue. The way the population is growing in the country, is very alarming and it is going to be serious. Since this Government took over, we thought that we must evolve a plan which should be need-base and which should be the people's plan. After we took over, we consulted the State Governments and on the basis of the experience of the State Governments an action plan was evolved. That action plan was again put before the Health Ministers of all the States and Union Territories and everybody unanimously supported it and endorsed the action plan. Now there are certain distortions which have to be looked into. Hon. Member is correct that in the past in the sterilisation programme something wrong had been happening. We have to modify the incentives and dis-incentives available for this propose. We have formed a Committee to find out what should be the modified incentives and dis-incentives. We are examining all these aspects. As soon as the matter is finalised, I will come up before this House.

[Translation]

SHRI RAJVEER SINGH: Mr. Speaker, Sir, the increase in population has taken

the form of a terror in our country. I would like to know from the hon. Minister whether such a law would be enacted as would be applicable to all with regard to vasectomy; whether he is going to make such a law. If such a law would be enacted then there won't be any scope for escape. Just now, the hon. Minister said repeatedly that religion comes in the way of family planning, but it is not true. Religion does not come in the way. Family planning is adopted by the people of other religions too.

MR. SPEAKER: No, the hon. Minister did not say so.

SHRI RAJVEER SINGH: May I know whether the hon. Minister is going to enact any such law which would be applicable to all the citizens uniformly, Whether enactment of any law about the family planning is under the consideration of the Government.

SHRI M.L. FOTEDAR: Whatever law will be enacted in this country and passed by the Parliament would be applicable to every citizen of India, so there is no scope for any doubt. (Interruptions)

SHRI RAJVEER SINGH: Mr. Speaker, Sir, my question has not been replied to. I had asked whether any law about family planning would be made. I am not talking about all the laws, I am asking specifically about the family planning. (Interruptions)

[English]

SHRI SWARUP UPADHYAY: Sir, I would like to know whether the Government will introduce the system of paying incentive money, on annual or monthly basis, to those persons who adopt the family planning measures, to counter the religious superstition of both majority and minority communities so that we can estimate each system properly and give incentive money to those who adopt family planning measures. I want to know whether the Government will take the initiative or not.

SHRI M.L. FOTEDAR: I could not fully follow the question. Again, please do not bring religion into the family planning programme. Let us take a national initiative in this regard that everybody who is a citizen of India- whether male or female - accepts this programme as a national necessity.

Anti-TB Drugs

*86. SHRI GIRDHARI LAL BHAR-GAVA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Government of Rajasthan has requested the Union Government for increasing the financial assistance and supply of anti-TB drugs/equipment for controlling tuberculosis;
 - (b) if so, the details thereof; and
 - (c) the action taken thereon?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI M.L. FOTE-DAR): (a) to (c). A statement is laid on the Table of the House.

STATEMENT

- (a) Yes, Sir.
- (b) The Government of Rajasthan desired conversion of the National TB Control Programme int a 100 per cent Centrally Sponsored Scheme in view of the large requirements of the State for drugs.
- (c) In consultation with the Planning Commission, it has been decided to continue the National TB Control Programme as a Centrally Sponsored Scheme on 50: 50 basis. Govt. of Rajasthan is receiving appropriate assistance under this programme.

[Translation]

SHRI GIRDHARI LAL BHARGAVA: Mr. Speaker, Sir, the Government of Ra-

jasthan has sought financial assistance from the Union Government for controlling tuberculosis. I would like to know from the hon. Minister the amount of financial assistance provided to the State Government during the previous financial years and the amount of assistance the Central Government propose to provide to the State Government in future, for controlling tuberculosis.

SHRI M.L. FOTEDAR: Mr. Speaker. Sir, the hon, Member wants to know about Rajasthan. The Budget allocation during the past three years has been as under. During 1989-90, the allocation was for Rs.44 lakhs while the actual expenditure was Rs. 51.65 lakhs and it was given. During 1990-91 the allocation was Rs. 50 lakhs, while the actual expenditure of the Rajasthan Government was Rs. 42.01 lakhs and for this year, i.e. 1991-92, the Budget allocation is Rs. 53 lakhs and the anticipated actual expenditure is also Rs. 53 lakhs. Apart from this, the Union Government has provided massive material assistance. The Centre has also provided equipments and six diesel jeeps to the Rajasthan Government.

SHRI GIRDHARI LAL BHARGAVA: I would like to submit that the disease is wide-spread in the State. Keeping in mind, the large desert area in the State and the population, will the Government think of increasing the allocation?

SHRI M.L. FOTEDAR: The assistance being provided to the State Governments is on a 50: 50 basis, under which, while the Central Government provides the necessary anti-TB drugs and equipments, the State Governments have to make available infrastructural facilities. I would like to tell the hon. Member that the Centre shall review its allocation, if the State Government's expenditure exceeds its budget.

SHRI DAU DAYAL JOSHI: Is it true that cement factories are also responsible for causing tuberculosis? A large number of small and large cement units are com-