

	(Value : Rs. Crores)		%change in April-December 1985 over April- December, 1984.
	April-December		
	1984	1985	
Exports	8146.17	7655.57	-6.0
(Incl. Crude Oil)			
Exports (Excl. Crude Oil)	6951.73	7520.42	+8.2
Imports	11746.14	13866.57	+18.0

Source : DGCI & S, Calcutta.

(c) The figure of India's trade deficit for the full financial year 1985-86 is yet not available.

(d) With a view to reducing trade deficit vigorous promotional measures have been taken during the recent Past. These include increasing our exports, diversifying our productive base, modernising our productive apparatus, mobilisation and periodic revision of our industrial policies, etc. Efforts are also being made to step up our indigenous production of importables during the Seventh Five Year Plan period, particularly in the sphere of bulk imports.

[*Translation*]

Latest Proposal of Sri Lanka Government to Solve Ethnic Problem

***40. SHRI VILAS MUTTEMWAR :
SHRI VAKKOM PURUSHOTHAMAN:**

Will the Minister of EXTERNAL AFFAIRS be pleased to state :

(a) whether it is a fact that the killing of Tamils in Sri Lanka is still continuing unabated ;

(b) whether Government of India have received recently new package proposals from Government of Sri Lanka about this problem ; and

(c) if so, the details thereof and the reaction of the Government in the matter?

THE MINISTER OF EXTERNAL AFFAIRS AND MINISTER OF COMMERCE (SHRI P. SHIV SHANKER): (a) Yes, Sir, Fighting between the Security Forces and Tamil militants and violence against civilians are reported to be continuing.

(b) Yes, Sir.

(c) The package of proposals put forward by the Government of Sri Lanka envisages amendment of the Sri Lanka constitution for creation of elected Provincial Councils and devolution of legislative and executive power to them. Considerable powers in relation to Law and Order and Land Settlements will be among the powers devolved to the Provincial Councils. The Sri Lanka government has also agreed to consider suitable institutional arrangements for Provincial Councils to consult with each other and act in co-ordination on matters of mutual interest and concern.

After examining the Sri Lankan Proposals, Government felt that a stage had been reached where the package proposals in regard to the devolution of power could be conveyed to the Sri Lankan Tamils for their careful consideration. The Sri Lankan proposals were handed over to the TULF and other Tamil groups at the end of June, 1986.

[*English*]

National Workshop on Causes of Death

1. SHRI CHINTAMANI JENA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a National Workshop on statistics of causes of death has expressed that the mortality data being generated by the health agencies and the Registra

General of India was unreliable and unscientific;

(b) if so, the recommendations made at the Workshop; and

(c) the reaction of Government in regard thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) It was felt in the Workshop that data regarding mortality being generating at present by the Health Agencies and Registrar General, India, were not relatable to specific units of population or area and did not form a scientific time series.

(b) A copy of recommendations made by the Workshop is given in the statement given below.

(c) A report of the Workshop and its recommendations are being sent to the concerned Central and State Agencies for implementation by the Registrar General of India.

STATEMENT

Recommendations of the Workshop on Statistics of Cause of Death

Registrar General, India summed up the deliberations of the workshop in the various technical sessions. After this sum-up Sri K.N. Shrinivasan presented the set of recommendations arrived at in the workshop and these are given below:-

1. A department of unit for medical records with an adequate staff strength is essential for all teaching, specialized and district hospitals and the establishment of the same may be completed by all the states by the year 1980 in a phased manner. The minimum staff requirement may be on the pattern as recommended by the Workshop on Medical Records held at Lucknow under the aegis of the Director General of Health Services. It was clarified that the department or unit for medical records may be headed by an

officer not necessarily of the medical discipline. It is also noted that even at present, the Medical Records Officer is generally of a statistical background.

2. With regard to the curriculum for under-graduates, the same does not require any change, but emphasis should be given to objective types of questions regarding medical records including certification procedures. During the internship period, again, the medical graduates may be given sufficient orientation on this subject for periods ranging from 15 days to one month, ably supported by guidance from senior faculty members.

3. It was the consensus that while regular training and selection procedures for selecting MROs, MRTs etc. up to the extent required for setting up the medical record departments in all eligible institutions may continue by making utilisation of the institutions and procedures in this regard, there was also a need in the interim for some informal short term orientation or familiarization course for the persons actually manning the medical records departments or their substitutes as they exist in various Institutions. For this purpose it was suggested that one or two institutions in every State, such as teaching hospitals with good medical record departments may be nominated for this purpose and the persons actually doing the job in other institutions may be deputed to these selected institutions for a fortnight or a month in order to get better equipped for doing the job which they are handling.

4. Each State may identify the Coders at State and lower levels who require to be trained in the coding of cause of death and they may be got trained in a phased manner by utilizing the facilities available in the institutions imparting such training. In this connection it was also felt that the stipend paid at present was rather unattractive while the duration was too long. The concerned authorities may like to consider these aspects and also consider providing subsidized boarding and lodging to enable the States to make full use of the existing facilities.

5. It was the consensus among the participants that while the doctors already on the job were capable of certifying the cause of death as required, often the required will was not there and often the importance of the work was not fully understood. Therefore, it was felt that each State should organise short orientation courses may be of only a day or two for impressing upon the doctors of the concerned institutions the purpose of and the importance of certification and also review for them the correct procedures involved with practical examples.

6. The group felt that the para-medical staff at the sub-centre has also to fill up cause of death in the death registers and ultimately this may become a very use-full and universal data source. However, at present the para-medical staff did not know much about this part of their job and it was felt that it will be worthwhile to include the basics of recording cause of death in the job training or refresher courses etc. which are meant for these categories of staff. Similarly the nursing staff are also associated in the medical records and related work in the district and other hospitals, it was felt that it may be worthwhile to include the subject of medical records in the curriculum for training of nursing staff also.

7. It was felt that the data regarding mortality being generated at present by the Health Agencies as well as the RGI were not relatable to specific units of population or area and did not form a scientific time series. Therefore, a working group may be set up in consultation with the Ministry of Health to study related issues including the position regarding morbidity data, in detail and come up with specific recommendations.

8. It was felt that forwarding and monitoring performance needed to be prescribed in respect of the flow of Forms 8/8 A from the certifying authority to the local Registrar and from the local Registrar to the Chief Registrar.

9. The group felt that at present there is considerable delay in the processing and

forwarding of information based on medical certificates regarding cause of death at the levels of the certifying and registration authorities with the result that the publication of the data gets delayed. The group emphasized that all these delays should be eliminated enabling speedy publication of data.

10. Where necessary the Chief Registrars may take steps to translate the Physician's manual on Medical Certification of Cause of Death into regional languages. Similarly, the RGI may make available the Hindi translation.

11. The Group was informed that in some States problem arose from time to time due to a shortage of printed forms. It was emphasized that it was for the Chief Registrars to take timely necessary action in this regard.

12. For improving the functioning of the Survey of Cause of Death in the Rural Areas, monitoring and inspection part of its work needs to be regularised and strengthened.

13. Most of the participants favoured better remuneration of honorarium to the field agents and also to the Recorder of Primary Health Centre. This may help also in regularly holding Half Yearly Surveys. A proposal for giving awards and certificates of merit to field personnel with good performance was also made.

14. There was a consensus that the present sample size is inadequate and that it must be vastly improved to make the results of the survey more reliable and usable as and when possible.

15. It has to be examined as to whether it is possible to change the sample design of the Survey of Cause of Death (Rural) in order to make its sample a better representative of the rural population that it is at present, either as part of the SRS design or otherwise.

After the participants approved these recommendations Registrar General, India,

thanked the participants for their valuable contributions in the workshop. The workshop concluded with a vote of thanks by Professor T.R. Anand, National Institute of Health and Family Welfare.

Yoga Teachers in Central Schools

2. SHRI BASUDEB ACHARIA :

SHRI ANIL BASU :

DR. SUDHIR ROY :

Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state :

(a) whether it is a fact that services of 'Yoga Teachers' working in nearly 400 Central Schools throughout the country are being terminated ;

(b) if so, the number of teachers who will be affected ;

(c) the reasons for Government's decision to terminate the services of Yoga Teachers of Kendriya Vidyalayas ;

(d) whether Government are aware that many of these Yoga Teachers who have got more than 5 years' service would have crossed the age limit for recruitment to Government services ;

(e) whether Government are considering of providing alternate jobs to such Yoga teachers who are likely to lose their jobs ;

(f) whether any expert Committee was appointed to evaluate the scheme of Yoga teaching in Kendriya Vidyalayas ; and

(g) if so, details of its recommendations?

THE MINISTER OF STATE IN THE DEPARTMENTS OF EDUCATION AND CULTURE (SHRIMATI KRISHNA SAHI):
(a) No, Sir.

(b) to (e). Do not arise.

(f) A study team was set up to evaluate the Scheme of Yoga teaching in Kendriya Vidyalayas.

(g). The recommendations are given in the Statement given below. The Board of Governors of Kendriya Vidyalaya Sangathan will finally decide in the matter.

STATEMENT

SUMMARY OF RECOMMENDATIONS

1. We recommend that teaching of yoga in the Kendriya Vidyalayas should continue. There is ample justification for it.

2. Instruction in yoga should be organised in these Vidyalayas for all children from classes V to IX with provision for exemption to those who are handicapped, medically unfit or have any other difficulty.

3. For students of classes X to XII, teaching of yoga should be organised as a co-curricular activity during the periods earmarked for such activities. The interested students of classes X-XII and those of other classes desirous of learning more about yoga should be advised to join this programme.

4. A revised syllabus covering both theory and practice on the lines indicated in the report should be prepared with the help of selected yoga teachers in the Sangathan, a medical educator with research background in yoga and a few educationists. This should comprise of a core syllabus for classes V to IX and an advanced syllabus for others.

5. A hand book incorporating yoga curriculum, methodology of teaching and evaluating yoga, do's and don'ts associated with the subject and use of relevant aids and illustrations for effective teaching should be prepared and made available to the yoga teachers for their guidance.

6. No separate text book on yoga is called for, but useful and interesting lessons on relevant aspects of yoga should be got included in the text books on social studies, languages and sciences.

7. Minimum qualifications of yoga teachers to be appointed in future should be graduation with one year's training in yoga, child psychology, human anatomy and physiology and methods of communication and evaluation.