

PUBLIC ACCOUNTS COMMITTEE

(1973-74)

(FIFTH LOK SABHA)

HUNDRED & FIRST REPORT

[Action taken by Government on the recommendations of the Public Accounts Committee contained in their 75th Report (Fifth Lok Sabha) relating to Ministries of Industrial Development and Internal Trade (Department of Industrial Development), Health and Family Planning and Works & Housing (D.D.A.)]



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PUBLIC ACCOUNTS COMMITTEE

(1973-74)

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Shri M. S. Sundaresan—Deputy Secretary.

Shri T. R. Krishnamachari—Under Secretary.

***Elected on 29-11-73 vice Shri D. S. Afzalpurkar died.**

INTRODUCTION

I, the Chairman of the Public Accounts Committee, as authorised by the Committee, do present on their behalf this 101st Report on action taken by Government on the recommendations of the Committee contained in their 75th Report (Fifth Lok Sabha) relating to Ministries of Industrial Development and Internal Trade (Department of Industrial Development) Health and Family Planning and Works & Housing (D.D.A.).

2. On the 26th May, 1973 an 'Action Taken' Sub-Committee was appointed to scrutinise the replies received from Government in pursuance of the recommendations made by the Committee in their earlier Reports. The Sub-Committee was constituted with the following Members:

- | | |
|---|-----------|
| 1. Shri H. N. Mukerjee— <i>Convener</i> | |
| 2. Shri Sunder Lal | } Members |
| 3. Shri Bishwanarayan Shastri | |
| 4. Shri M. Anandam | |
| 5. Shri Nawal Kishore | |
| 6. Shri H. M. Patel | |

3. The Action Taken Sub-Committee of the Public Accounts Committee (1973-74) considered and adopted this Report at their sitting held on the 7th January, 1974. The Report was finally adopted by the Public Accounts Committee on the 31-1-74.

4. For facility of reference the main conclusions/recommendations of the Committee have been printed in thick type in the body of the Report. A statement showing the summary of the main recommendations/observations of the Committee is appended to the Report.

5. The Committee place on record their appreciation of the assistance rendered to them in this matter by the Comptroller and Auditor General of India.

NEW DELHI;
February 4th, 1974.

Magha 15th, 1895 (S)

JYOTIRMOY BOSU,
Chairman,
Public Accounts Committee.

CHAPTER I

REPORT

1.1. This Report of the Committee deals with action taken by Government on the recommendations contained in their 75th Report (Fifth Lok Sabha) on the Reports of the Comptroller and Auditor General of India (Civil) for the years 1969-70 and 1970-71 relating to the Ministries of Industrial Development and Internal Trade (Department of Industrial Development), Health and Family Planning and Works and Housing (Delhi Development Authority).

1.2. Action Taken Notes have been received in respect of all the 23 recommendations contained in the Report.

1.3. The Action Taken Notes on the recommendations of the Committee have been categorised under the following heads:—

(i) *Recommendations/observations that have been accepted by Government.*

S. No. 1, 3—7, 9, 10, 13—18, 21 & 23.

(ii) *Recommendations/observations which the Sub-Committee may not desire to pursue in the light of the replies of Government.*

S. Nos. 11, 12 & 19.

(iii) *Recommendations/observations replies to which have not been accepted by the Sub-Committee and which require reiteration.*

S. No. 2.

(iv) *Recommendations/observations in respect of which Government have furnished interim replies.*

S. Nos. 8, 20 & 22.

1.4. The Committee will now deal with the action taken on some of the recommendations.

Implementation of the Malaria Eradication Programme (Para 1.27—S. No. 2).

1.5. In paragraph 1.27 of the Report the Committee had made the following observation regarding the need for successful implementation of the programme:

"Since the starting of the programme in 1958 Government have invested Rs. 219 crores upto the end of 1971-72. The estimated total requirement of funds for the years 1972-73 to 1980-81 is stated to be Rs. 145 crores. In view of a substantial outlay of the order of about Rs. 364 crores Government have a vital stake in the successful implementation of the Programme."

1.6. The Ministry of Health & Family Planning in their reply dated the 24-10-1973 have stated as follows:

"Though the objective of eradication has not been achieved, it must be said that the malaria morbidity rate i.e. sickness from malaria has been reduced by more than 98 per cent since the inception of the Malaria Eradication Programme in 1958. A statement showing the proportional case rates is attached. As regards the cost benefits, a research scheme to obtain statistical data is under progress by the Indian Council of Medical Research."

1.7. The Committee had observed that in view of a substantial outlay of the order of about Rs. 364 crores, Government have a vital stake in the successful implementation of the Malaria Eradication Programme. The Government have stated that though the objective of eradication has not been achieved, the malaria morbidity rate has been reduced by more than 98 per cent since the inception of the Malaria Eradication Programme in 1958. The Committee however find that the proportional case rate has increased from 0.05 in 1965-66 to 0.24 in 1970-71... This indicates that there has been deterioration. In view of the successive setbacks suffered by the programme in the past, the Committee would urge Government to gear up the organisation, which has been provided with substantial funds, in order to ensure that the programme is successfully implemented well within the target.

The Committee hope that the statistical data of cost benefits under compilation by the Indian Council of Medical Research would be useful in evaluating the programme regularly.

Solution to the increasing phenomenon of resistance. (Para 1.30—S. No. 5).

1.8. In paragraph 1.30 of the Report the Committee had made the following observation regarding solution to the increasing phenomenon of resistance to insecticides by mosquitoes:

"Thirdly, a solution to the increasing phenomenon of resistance to the insecticides should be found soon by extend-

ing the research efforts. Finally, administrative inadequacy and inefficiency should be attended to promptly."

1.9. The Ministry of Health & Family Planning in their reply dated 24-10-1973 have stated as follows:—

"The instructions regarding solution to the increasing phenomenon of resistance to insecticide have been noted and Indian Council of Medical Research will be requested to help in finding a solution to the increasing phenomenon of resistance to insecticide by research efforts and administrative inadequacy and inefficiency will be attended to promptly."

1.10. The Committee have been intimated that the Indian Council of Medical Research will be requested to help in finding a solution to the increasing phenomenon of resistance to insecticides. They wonder why the Institution have not already been approached in the matter. They nevertheless trust that the matter would have by now been entrusted to them so as to find a solution early.

Stepping of the indigenous production of D.D.T.—(Para 1.33—S. No. 8).

1.11. In paragraph 1.33 of the Report the Committee had made the following observation regarding stepping up of the indigenous production of D.D.T.:

"Incidentally the Committee would like to emphasise the need for stepping up indigenous production of insecticide in order to attain self-sufficiency. The representative of Ministry of Petroleum and Chemicals informed the Committee that from the production point of view if sustained off-take of DDT could be ensured there could be no objection to go in for expansion of the Hindustan Insecticides Ltd. The Ministry of Health have already given the necessary indication in this regard. As it has been stated that it will take two years to expand production the Committee desire that the matter should be processed in consultation with the Planning Commission so as to come to a quick decision." In this connection the Committee would also like Government to take into account the warnings given by some scientists against the excessive use of DDT as it constitutes a hazard to human health."

1.12. The Ministry of Health & Family Planning in their reply

dated 24-10-1973 have furnished the following note as given by the Ministry of Petroleum and Chemicals:

"Hindustan Insecticides Limited, a Public Undertaking under the Ministry of Petroleum and Chemicals submitted in 1967, a proposal for the establishment of an additional DDT Plant for the manufacture of 5000 tonnes per annum of DDT Technical during the Fourth Five Year Plan and also submitted along with the proposal a Feasibility Report. After considering this proposal, a provision of Rs. 242 lakhs was made in the Fourth Five Year Plan for setting up of this plant. However, later on fears were expressed about the continued and unrestricted usage of DDT and in this connection the restrictive measures taken in some countries like USA, Great Britain and Japan etc. were also cited. Apart from this it was subsequently felt that the additional requirement of NMEP for DDT in future could be met by expanding the existing capacities of Hindustan Insecticides Limited for manufacture of DDT. In view of this, this scheme was deleted from the Fourth Five Year Plan at the time of midterm appraisal in 1971. In 1972, the Task Force on Pesticides set up by the Planning Commission after taking into account the requirements of Agriculture estimated the 1978-79 demand of DDT at 5000 tonnes. In addition to this the demand of NMEP in 1978-79 is estimated by Ministry of Health at 4000 tonnes. As against this, the present installed capacity is about 4200 tonnes per annum. It has, however, now become necessary to consider establishment of an additional plant of 5000 tonnes per annum for DDT manufacture during the Fifth Plan period. In this context, HIL have again submitted a proposal for the setting up of a unit for the manufacture of 5000 tonnes per annum of DDT at Resayani in Maharashtra State. HIL have since been asked to get a fresh Feasibility Report prepared and submit the same to Government for consideration.

Simultaneously the matter relating to environmental pollution aspect of DDT was placed before the National Committee on Environmental Pollution. This Committee has already met and considered this matter. The following views were expressed at the meeting:

- (a) The total usage of DDT in the country will not be increased by the proposed manufacture of DDT; over the last 15 years the annual usage of DDT has been on an average 10,000 tonnes and the proposed manufacture will only substitute imports;
- (b) Based on evidence available DDT has not caused serious problems of pollution in India and there is no proven evi-

dence of deaths/disabilities on account of even occupational hazards; and

- (c) The proposed capacity of 5000 tonnes/year is probably low compared to the needs of the country and export potential to South Eastern countries and the setting up of the plant should be expedited.

Final decision of the NCPEL on this proposal is, however, awaited."

1.13. The Committee note that the Hindustan Insecticides Limited have been asked to submit a fresh feasibility report for setting up a unit for the manufacture of 5000 tonnes of DDT to augment indigenous production. However, according to the National Committee on Environmental Pollution, the proposed additional capacity of 5000 tonnes per year is probably low compared to the needs of the country and export potential to South Eastern countries. The Committee desire that having regard to this view a final decision on the capacity of the new unit should be arrived at expeditiously.

Implementation of the Goitre control programme—(Para 2.28—(S. No. 13).

1.14. In paragraph 2.28 of the Report the Committee had made the following observation regarding the tardy implementation of Goitre control programme:

"Goitre, which is a communicable disease, is endemic in the entire sub-Himalayan belt from Jammu and Kashmir to Arunachal Pradesh extending about 2400 Kms. It has been estimated that about 9 to 10 million people are suffering from this disease and about 45 million are living in the endemic areas and are exposed to the risk. The survey of areas so far conducted shows a variable prevalence rate of about 10 per cent to 50 per cent and the average prevalence rate is about 28 per cent. The incidence of goitre was found to be mostly amongst the children who were suffering from deafness, dumbness and other deformities. The need to fortify salt with iodine to make up deficiency of iodine in the human system and to prevent epidemic goitre chiefly among the children was felt by Government as early as August, 1952. The Goitre Control Programme was launched during the Second Five Year Plan period by the Government of India in collaboration with the UNICEF. As against the total requirement of more than

3 lakh tonnes of iodised salt, the capacity for production so far created is only of the order of about 2 lakh tonnes. The quantities supplied to the affected areas however reached a maximum of 71,000 tonnes only in the year 1971. The Committee are distressed to note the tardy implementation of this vital programme during the past 15 years. They desire that Government should comprehensively review the programme with a view to indentifying the deficiencies and devising immediate measures to meet the requirements of iodised salt fully which is necessary to control and eradicate goitre."

1.15. The Ministry of Industrial Development in their reply dated the 30th October, 1973 have stated as follows:

"As the Goitre Control Programme is included in the Fourth Five Year Plan, Government is reviewing its implementation from time to time. The following deficiencies have already been identified:—

- (i) Production of iodised salt is not up to the full capacity;
- (ii) Supply of electricity to the iodisation plants is disrupted frequently;
- (iii) The nominees appointed by the State Governments of Himachal Pradesh, Uttar Pradesh, Punjab, Haryana, Bihar, etc. for lifting the iodised salt from the sources, are not placing the indents to the full according to the allotment made by the Salt Commissioner. At times, the nominees do not place the indents in time. In some cases, along with the indents, empty gunny bags are not supplied to the Salt Commissioner to enable him to despatch the iodised salt in those bags;
- (iv) In Calcutta, the nominees of the State Government have to supply raw salt also to the iodisation plants for iodisation purposes. They purchase raw salt from the local importers who import salt from West Coast and Tuticorin. It has been noticed that the nominees are not supplying salt regularly for iodisation purposes and this results in lower capacity of the available plants being utilised;
- (v) Sufficient wagons are not available in time to arrange for the movement of iodised salt by rail;
- (vi) Some of the States have not yet banned the entry of non-iodised salt in the goitre affected areas; and

- (vii) There are some day today problems in the movement of salt.

It is expected that some of the difficulties mentioned above will be overcome in the near future. Steps are being taken to arrange meetings of the high level Reviewing Committee with a view to devising immediate measures to meet the requirements of iodised salt as much as possible."

1.16. The Committee cannot but express their distress that a comprehensive review of the Goitre Control Programme which was suggested to be done "forthwith" has not yet been taken up. The review of the programme from time to time as claimed to have been done has not evidently been imaginative and realistic enough in view of the deficiencies brought out by the Committee especially in paragraph 2.36 of the 75th Report. It is, therefore, essential to have an effective and comprehensive review at this stage which, the Committee trust, would be done forthwith.

Survey of Goitre affected areas (Para 2.29—S. No. 14)

1.17. In paragraph 2.29 of the Report the Committee had made the following observation regarding survey of Goitre affected areas:

"The Committee are under the impression that a detailed survey to assess the prevalence of the disease and periodical re-surveys to assess the impact of the measures taken so far to control the disease have not been undertaken in all the affected areas. They would, therefore, like to know the arrangements made in this regard and the progress achieved."

1.18. The Ministry of Health & Family Planning in their reply dated 13-11-1973 have stated as follows:

"The Director General of Health Services has already arranged for the surveys and re-surveys in the following areas:—

State/District.

****Assam and Meghalaya**

1. *Darang
2. *Garo Hills
3. *Goalpara
4. *Kamrup

****Survey work is still continuing**

***Survey done by State Government**

5. *United Khasi and Jainti Hills
6. *United Mikir and M. C. Hills
7. *Mizo Hills
8. *Nowgaon
9. *Sibsagar
10. *Gachar

Bihar

1. Champaran
2. Darbhanga
3. Hazaribagh
4. Muzaffarpur
5. Palamau
6. Purnea
7. Ranchi
8. Saharsa
9. Santhal Pargana
10. Saran

Jammu and Kashmir

1. Ananthnag
2. Udhampur
3. Rest of Srinagar Province
4. Rest of Rammu Province

Nagaland

1. Kohima
2. Mokokchung
3. Tuensang

Punjab

1. Gurdaspur
2. Hoshiarpur
3. Rupar

Haryana

1. Ambala

Uttar Pradesh**Bijnore**

1. Bijnore
2. Dehradun
3. Nainital
4. Rampur
5. *Behraich, Basti, Gorakhpur
6. *Bareilly city
7. *Budaun
8. Deoria
9. *Tehri Garhwal
10. *Lakhimpur Kheri

West Bengal

1. Cooch Bihar
2. Jalpaiguri
3. Malda
4. West Dinajpur
5. Darjeeling

Himachal Pradesh

1. Bilaspur
2. Mahasu
3. Mandi
4. Sirmur
5. Kangra

Manipur**Entire Estate****Tripura****Entire State****Chandigarh****Entire Territory**

*Survey done by State Government.

LIST OF THE AREAS RE-SURVEYED SO FAR
State/District

Himachal Pradesh

Kangra

Uttar Pradesh

Bijnore

Dehradun

Punjab

Hoshiarpur

Gurdaspur"

1.19. The Ministry have not indicated whether all the Goitre affected areas have been surveyed. Further no arrangement seems to have been made for a periodical resurvey in all the area to assess the impact of the measures taken to control the disease. The Committee stress that a time bound programme should be laid down to complete the survey and to re-survey the areas which were already surveyed.

Banning the import of non-iodised salt in Goitre affected areas
(Para 2.31—S. No. 16).

1.20. In paragraph 2.31 of the Report the Committee made the following observation regarding banning the import of non-iodised salt in Goitre affected areas:

"The requirements of the eastern and north-eastern regions have been met only to the extent of 5.5 per cent during 1971-72. It is a matter of concern to the Committee that as against estimated annual requirement of 44.5 thousand tonnes for West Bengal, the supplies made during the three years ended 1971-72 were to the extent of only 1.35 thousand tonnes, whereas no supplies were made during this period to Tripura and North Bihar, whose requirements were estimated to be 9.3 thousand tonnes and 124 thousand tonnes respectively. The Ministry of Industrial Development have intimated that Government of Tripura have not issued necessary notification for banning the import of non-iodised salt to that State and that similarly Government of West Bengal and Bihar also have not as yet issued the necessary notifications for banning the entry of non-iodised salt in the affected districts. The Commit-

tee, however, note from the Performance Budget of the Department of Health for the year 1970-71 that the Government of Bihar have already issued necessary notification. The Committee would urge that the Government of India should impress upon the States which have not as yet issued the ban orders, the necessity to do so forthwith in the interest of health and well being of the people."

1.21. The Ministry of Industrial Development in their reply dated 30-10-1973 have stated as follows:

"The question of issue of notifications by the State Governments for banning the entry of non-iodised salt has been pursued with the State Health Authorities and the present position is as under:

Governments of Punjab, Haryana, Uttar Pradesh, Himachal Pradesh, Nagaland, West Bengal, Union Territories of Chandigarh and Manipur have already issued the necessary notifications. The Government of Jammu & Kashmir and the Government of Tripura have sent draft notifications for approval by Government of India."

1.22. The Committee would like to suggest that the question of issuing notifications by the remaining State Governments (such as Assam, Meghalaya and Bihar) banning the entry of non-iodised salt should be vigorously pursued.

Utilisation of Iodisation Plants (Para 2.32—S. No. 17).

1.23. In Paragraph 2.32 of the Report the Committee made the following observation regarding utilisation of Iodisation Plants:

"While the installed capacity of the iodisation plant in the western sector has been more or less utilised, the capacity of the plants installed, at Calcutta has been utilised only to the extent of 2.3 per cent, 1.6 per cent and 13 per cent during 1969-70, 1970-71 and 1971-72 respectively. Further, the two plants, which were received in the year 1968, are stated to be still lying in packed condition. The running and maintenance expenditure on the plants that are working at Calcutta have been of the order of Rs. 40,000 to 68,000 per annum. This unsatisfactory performance does not lend any hope about the expansion of the production of the iodised salt and installation of additional plants as envisaged in the Performance Budget

of the Department of Health for the year 1972-73. Unless drastic steps are taken to create conditions for the increased intake of iodised salt, the Committee are afraid that the gross under-utilisation of the capacity will continue with the attendant increase in the overhead expenses and that the condition of the two plants which have not been installed and commissioned for over 4 years now was bound to deteriorate."

1.24. The Ministry of Industrial Development in their reply dated 30th October, 1973 have stated as follows:

"The two plants received in 1968 which could not be installed at Calcutta, have since been shifted to Sambhar (Rajasthan) and the question of installation is under consideration. This was considered necessary to meet the requirements of the five additional districts of North Bihar which are to be fed from Sambhar. The plants already installed at Calcutta are being utilised to a greater extent now after the issue of necessary ban order in respect of the five districts of West Bengal.

Similarly, after the ban notification in respect of Tripura is issued, the movement of iodised salt to that State will increase. During the year 1972-73, it is found that the performance has improved to an extent of about 20 per cent."

1.25. The Committee desire that the two iodisation plants received in 1968 which have since been shifted from Calcutta to Sambhar should be installed during the current financial year (1973-74).

Subsidising the higher cost of iodised salt sold from the plants of Calcutta.—(Para 2.35—S. No. 20).

1.26. In paragraph 2.35 of the Report, the Committee had made the following suggestions regarding subsidising the higher cost of iodised salt from the plants of Calcutta:

"Another difficulty which the programme is stated to have been confronted with is the non-placement of indents regularly by the State Salt nominees on the iodisation plants. Although it has been stated in the Annual Report of the Department of Health for the year 1969-70 that the cost of iodisation is being met by the Government of India and that the iodised salt is made available to the public at the same rate at which ordinary common

salt is sold in endemic areas. It has been intimated by the Ministry of Industrial Development that the cost of iodised salt moved by the sea and rail is more than the cost of the salt moved by the all-rail route from the West Coast or Rajasthan to the eastern and north-eastern regions. Thus, even though iodisation is done free of charge, there is stated to be reluctance on the part of the dealers to take iodised salt from Calcutta. The Committee do not think that there has been effective co-ordination between the Department of Health and the Ministry of Industrial Development and that this aspect of higher cost of iodised salt sold from Calcutta has been considered. The Committee, therefore, wish that the feasibility of subsidising this element of cost also should be carefully considered taking into account the increase in intake that would result thereby which would in turn mean higher production and lower overhead expenses."

1.27. The Ministry of Industrial Development, in their reply dated 30th October, 1973, have been stated as follows:

"The feasibility of subsidising the element of higher cost of iodised salt sold from Calcutta is under active consideration of the Government."

1.28. The Committee would like to impress upon the Government the need to come to an early decision in regard to subsidising the element of higher cost of iodised salt sold from Calcutta.

Setting up of an Expert Committee to review the overall functioning of the Delhi Development Authority (Para 3.21— S. No. 22).

1.29. In paragraph 3.21 of the Report, the Committee had made the following observation regarding the need for setting up an Expert Committee to review the overall functioning of the Delhi Development Authority:

"The Committee note that till date a sum of Rs. 12.31 crores had been credited to the Revolving Fund which was created in June, 1961 for implementing the scheme of large scale acquisition, development and disposal of land in Delhi. As on 31st March, 1972, the Fund had a cash and bank balance of Rs. 48.46 lakhs, besides 20,308 acres of land which is valued at Rs. 38.40 crores at cost price. In addition to the Revolving Fund from which funds are made available, the DDA has taken an aggregate amount

of Rs. 11.42 crores as loans from various sources such as LIC etc. for executing housing and development schemes. It is seen that apart from the compilation of annual accounts which are also audited by the Comptroller and Auditor General of India no evaluation of the work done by the DDA since its inception has ever been done to find out how far it has achieved the aims for which it was set up. The Committee feel that it would be worthwhile to have the working of the DDA assessed by an expert Committee which could besides reviewing the overall functioning of the DDA also suggest further measures for the development of Delhi and its suburbs. In this connection, the Committee would particularly like a review of the policy in regard to fixation of price of land disposed of by the DDA."

1.30. The Ministry of works and Housing, in their reply dated 17th November, 1973, have stated as follows:—

"The recommendation of the Public Accounts Committee has been noted by the Government of India and action to set up an Expert Committee is being taken."

1.31. The Committee would like to suggest that an Expert Committee to review the working of the Delhi Development Authority should be set up without delay and it should report to Government within the minimum possible time.

CHAPTER II

RECOMMENDATIONS/OBSERVATIONS THAT HAVE BEEN ACCEPTED BY GOVERNMENT

Recommendation

The Committee are deeply disturbed over the successive setbacks suffered by the National Malaria Eradication Programme. The scheme which was started in 1958-59 initially expected to be completed by 1968-69 and rephased for completion by 1974-75 is now nowhere near completion. The scheme was reviewed by the Committee in 1969-70 and they were informed in January, 1971 that the programme was scheduled for completion by 1975-76. The Committee expressed a hope that there would be no further setback. The Committee are taken a back to learn after just a year that the programme has suffered yet another major setback. The Committee cannot too strongly emphasise that the organisation should be geared up fully to meet this serious situation so as to successfully implement the programme in the field not later than 1980-81.

[Serial No. 1 of Appendix IV Para 1.26 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

The following measures have been taken to gear up the successful implementation of the programme:—

- (1) Additional Laboratory Technician and other surveillance staff as also enhanced supervisory staff at the Headquarters and the Zonal level have been provided.
- (2) It is also contemplated to provide Entomological component at the Headquarters and Zonal level for field investigations.
- (3) Necessary action has already been initiated to make advance procurement of insecticides at enhanced rate for 1974-75.
- (4) The Central and State officials working in the National Malaria Eradication Programme have been put on intensive spray supervision duty.

- (5) The Indian Council of Medical Research and the National Institute of Communicable Diseases have been requested to extend help in solving the problems requiring research study encountered by the programme.

[Ministry of Health & Family Planning O.M. No. G.25015/1/73—C. & C. D. dated 24-10-1973].

Recommendation

Till 1963-64 the programme progressed well. To what extent it suffered badly subsequently is seen from the fact that the number of malaria cases reported which was 0.87 lakhs in 1963 trebled upto 2.79 lakhs in 1967 and further went upto 4.72 lakhs in 1970. Out of 393.25 malaria eradication units, still 98 are in attack phase and 66 in consolidation phase as per the phasing in 1972. In respect of 9 per cent of population eradication has not been achieved so far. Nearly 39 units throughout the country except in Mysore, Tamil Nadu and Kerala are stated to be in the persistent attack phase. The Committee trust that the Directorate of Malaria Eradication Programme will intensify the measures in these areas.

[Serial No. 3 of Appendix IV Para 1.28 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

The recommendations of the Committee have been noted for compliance.

[Ministry of Health & F.P. O.M. No. G. 25015|1|73—C. & C. D. dt. 24-10-1973]

Recommendation

The Committee would like to refer to some important aspects of the programme requiring urgent attention. First, the problem of border areas should be tackled in concert with the countries concerned—Nepal, Pakistan, Bangla Desh, Burma—and a comprehensive co-operative programme chalked out for implementation. Secondly, there should be a close co-ordination between the rural and urban eradication programmes as at present the latter is not within the purview of the NMEP and the local bodies are stated to be unable to carry out anti-larval operations.

[Serial No. 4 of Appendix IV Para 1.29 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

A co-ordination meeting between neighbouring countries viz. India,—Bangladesh, India—Burma, India—Nepal and India—Burma—Bangladesh had already taken place as indicated below:—

- | | |
|--------------------------------------|-------------------------------------|
| 1. India-Nepal at Kathmandu | 17th to 19th March, 1971. |
| 2. India-Bangladesh at Shillong | 4th and 5th May, 1972. |
| 3. India-Bangladesh at Dacca | 7th to 9th December, 1972. |
| 4. India-Burma-Bangladesh at Rangoon | 31st January to 3rd February, 1973. |

During discussion with the representatives at the border meetings, a strategy for uniform observation by the countries in improving the programme had been discussed and such border meetings will continue in future as well. Urban Malaria Programme has now been brought under the ambit of the National Malaria Eradication Programme and has been categorised as a Centrally Sponsored Scheme with 100 per cent Central assistance during the Fourth Five Year Plan. In Urban areas where malaria is a problem or threatened to be a problem will be taken up for the intensified anti-larval operations.

....

[Ministry of Health & F.P. O.M. No. G.25015/1/73—
C. & C. D. dt. 24-10-1973]

Recommendation

Thirdly, a solution to the increasing phenomenon of resistance to the insecticides should be found soon by extending the research efforts. Finally, administrative inadequacy and inefficiency should be attended to promptly.

[Sl. No. 5 of Appendix IV Para 1.30 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

The instructions regarding solution to the increasing phenomenon of resistance to insecticide have been noted and Indian Council of Medical Research will be requested to help in finding a solution to the increasing phenomenon of resistance to insecticide by research efforts and administrative inadequacy and inefficiency will be attended to promptly.

[Ministry of Health & Family Planning O.M. No. G.25015/1/73—
dt. 24-10-73].

Recommendation

The shortfall in availability of insecticides during 1969-70 was about a fourth of the requirement. This was due to import of DDT Tech., and the delay in its formulation indigenously. The Com-

mittee have dealt with this in some detail in the succeeding section of this Report.

[Serial No. 7 of Appendix IV Para 1.32 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

The Committee's observations that the Department should come to an independent assessment of the position before taking such decisions in future have been noted for guidance and compliance.

[Ministry of Health & Family Planning O.M. No. G.25015/1/73—C.&C.D., dt. 24-10-73].

Recommendation

Although the setback started in 1964-65 when there was problem of getting insecticides in time no effective steps seem to have been taken to rectify the position soon. The Committee find that even during the period 1968-69 to 1971-72 there was significant shortfall in the availability of insecticides and the actual consumption was considerably less than the availability. The consumption was only to the extent of 77 per cent, 62 per cent, 73 per cent and 72 per cent of the requirement during these years. It is no wonder that incidence of malaria increased by "leap and bounds". It need therefore hardly any emphasis that there should be neither any further gap between requirement and availability nor any shortfall in consumption.

[Serial No. 6 of Appendix IV Para 1.31 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

Efforts are being made to procure adequate quantities of insecticides in time for the National Malaria Eradication Programme. Advance orders are being placed for timely supply of insecticides by the suppliers.

[Ministry of Health & Family Planning O.M. No. G.25015/1/73—C.&C.D., dt. 24-10-73].

Recommendation

The Committee note that the high power Central Administrative working Committee on National Malaria Eradication Programme was constituted on 22nd April, 1958 with the Health Secretary as its Chairman, Financial Adviser, Director General, Health Services, Deputy Director General (Development) and Director, National

Institute of Communicable Diseases as members and Director, N.M.E.P. as the member-Secretary. This Committee was expected to lay down policies and give decision on points that may crop up from time to time in order to facilitate implementation of the programme. However, it is disappointing to learn that the Committee had only 6 meetings in all since 1958. The fifth meeting was in 1959 and the sixth and the last one was in 1968. The Committee feel strongly that this high powered Committee should have been active enough to find timely solutions to the problems that beset this programme. They hope that at least in future this Committee will assume an effective role in decision-making and co-ordination.

[Serial No. 9 of Appendix IV Para 1.34 of the 75th Report of P.A.C. 1972-73—Fifth Lok Sabha].

Action taken

The observations of the Committee have been noted for compliance.

[Ministry of Health & Family Planning O.M. No. G.25015/1/73—
C. & C. D. dt. 24-10-73].

Recommendation

The Committee regret to find that without actually verifying the capacity for the indigenous formulation, 3755 tonnes of DDT Tech. were imported against the requirements of insecticides for the National Malaria Eradication Programme for the years 1969-70 and 1970-71. The delay in formulation resulted in short supply of insecticides during these years and consequent prolongation of the malaria eradication programme. Although D.G.T.D. had indicated a capacity for formulation of 1400 tonnes in the organised sector units, no orders were placed in the first instance on any of such units. A capacity of 1400 tonnes with the Maharashtra Small Scale Industries Corporation was assumed on the basis of the assurance given by the Development Commissioner, Small Scale Industries, which proved to be unreliable. The Committee have been informed that the Ministry have since decided that no more D. D. T. Tech. should be imported. However, in view of the seriousness of the consequences that ensued, the Committee hope that the Department would come to an independent assessment of the position before taking such decisions in future.

[Serial No. 10 of Appendix IV Para 1.51 of the 75th Report of the P.A.C. 1972-73—Fifth Lok Sabha]

Action Taken

The observations of the Committee have been noted for guidance and compliance.

[Ministry of Health and Family Planning O.M. No. G. 25015/1/73—
C. & C. D. dt. 24-10-73].

Recommendation

Goitre, which is a communicable disease, is endemic in the entire sub-Himalayan belt from Jammu and Kashmir to Arunachal Pradesh extending about 2400 Kms. It has been estimated that about 9 to 10 million people are suffering from this disease and about 45 million are living in the endemic areas and are exposed to the risk. The survey of areas so far conducted shows a variable prevalence rate of about 10 per cent to 50 per cent and the average prevalence rate is about 28 per cent. The incidence of goitre was found to be mostly amongst the children who were suffering from deafness, dumbness and other deformities. The need to fortify salt with iodine to make up deficiency of iodine in the human system and to prevent epidemic goitre chiefly among the children was felt by Government as early as August, 1952. The Goitre Control Programme was launched during the Second Five Year Plan period by the Government of India in collaboration with the UNICEF. As against the total requirement of more than 3 lakh tonnes of iodised salt the capacity for production so far created is only of the order of about 2 lakh tonnes. The quantities supplied to the affected areas however reached a maximum of 71,000 tonnes only in the year 1971. The Committee are distressed to note the tardy implementation of this vital programme during the past 15 years. They desire that Government should comprehensively review the programme with a view to identifying the deficiencies and devising immediate measures to meet the requirements of iodised salt fully which is necessary to control and eradicate goitre.

[S. No. 13 (para 2.28) of Appendix IV to 75th Report (Fifth Lok Sabha)]

Action Taken

As the Goitre Control Programme is included in the Fourth Five Year Plan, Government is reviewing its implementation from time to time. The following deficiencies have already been identified:—

- (i) Production of iodised salt is not up to the full capacity;

- (ii) Supply of electricity to the iodisation plants is disrupted frequently;
- (iii) The nominees appointed by the State Governments of Himachal Pradesh, Uttar Pradesh, Punjab, Haryana, Bihar, etc. for lifting the iodised salt from the sources, are not placing the indents to the full according to the allotment made by the Salt Commissioner. At times, the nominees do not place the indents in time. In some cases, along with the indents, empty gunny bags are not supplied to the Salt Commissioner to enable him to despatch the iodised salt in those bags;
- (iv) In Calcutta, the nominees of the State Government have to supply raw salt also to the iodisation plants for iodisation purposes. They purchase raw salt from the local importers who import salt from West Coast and Tuticorin. It has been noticed that the nominees are not supplying salt regularly for iodisation purposes and this results in lower capacity of the available plants being utilised;
- (v) Sufficient wagons are not available in time to arrange for the movement of iodised salt by rail;
- (vi) Some of the States have not yet banned the entry of non-iodised salt in the goitre affected areas; and
- (vii) There are some day-to-day problems in the movement of salt.

It is expected that some of the difficulties mentioned above will be overcome in the near future. Steps are being taken to arrange meetings of the high level Reviewing Committee with a view to devising immediate measures to meet the requirements of iodised salt as much as possible.

[Ministry of Industrial Development O.M. No. 825015(13)—B&A/73
dated 30-11-73].

Recommendation

The Committee are under the impression that a detailed survey to assess the prevalence of the disease and periodical re-surveys to assess the impact of the measures taken so far to control the disease have not been undertaken in all the affected areas. They would,

therefore, like to know the arrangements made in this regard and the progress achieved.

[S. No. 14 (para 2.29) of Appendix IV to 75th Report (5th Lok Sabha)]

Action Taken

The Director General of Health Services has already arranged for the surveys and re-surveys in the following areas:—

State/District

****Assam and Meghalaya**

1. *Darang
2. *Garo Hills
3. *Goalpara
4. *Kamrup
5. *United Khasi and Jainti Hills
6. *United Mikir and M. G. Hills
7. *Mizo Hills
8. *Nowgoan
9. *Sibsagar
10. *Cachar

Bihar

1. Champaran
2. Darbhanga
3. Hazaribagh
4. Muzaffarpur
5. Palamau
6. Purnea
7. Ranchi
8. Saharsa
9. Santhal Pargana
10. Saran

****Survey work is still continuing**

***Survey done by State Government.**

Jammu and Kashmir

1. Ananthnag
2. Udhampur
3. Rest of Srinagar Province
4. Rest of Jammu Province

Nagaland

1. Kohima
2. Mokokchung
3. Tuensang

Punjab

1. Gurdaspur
2. Hoshiarpur
3. Rupar

Haryana

1. Ambala

Uttar Pradesh

1. Bijnore
2. Dehradun
3. Nainital
4. Rampur
5. *Behriach, Basti, Gorakhpur
6. *Bareilly city
7. *Budaun
8. Deoria
9. *Tehri Garhwal
10. *Lakhimpur Kheri

West Bengal

1. Cooch Bihar
2. Jalpaiguri
3. Malda
4. West Dinajpur
5. Darjeeling

*Survey done by State Government.

Himachal Pradesh

1. Bilaspur
2. Mahasu
3. Mandi
4. Sirmur
5. Kangra

Manipur

Entire State

Tripura

Entire State

Chandigarh

Entire Territory

LIST OF THE AREAS RE-SURVEYED SO FAR

State/District

Himachal Pradesh

Kangra

Uttar Pradesh

Bijnore

Dehradun

Punjab

Hoshiarpur

Gurdaspur

[O.M. No. G. 25015/1/73—MC dated 12th Nov. 73].

[Ministry of Health and Family Planning O.M. No. G.25015/1/73—MC dated 12-11-1973].

Recommendation

Out of the total requirement of over 3 lakh tonnes iodised salt, a quantity of 1.90 lakh tonnes is the estimated requirement for the eastern and the north-eastern regions. The Committee note that the

requirements of the other affected regions are at present met only to the extent of about 50 per cent. While the reasons for the inadequate supply to the eastern and north-eastern regions have been intimated to the Committee, they do not get any idea as to why the production and consumption of the iodised salt could not be stepped up to the required level in other regions. They accordingly wish that Government should examine this aspect in detail and intimate the action taken to make available iodised salt to the extent of 100 per cent in affected areas, to the Committee within six months.

[S. No. 15 (para 2.30) of Appendix IV to 75th Report (Fifth Lok Sabha)].

Action taken

In 1972, a total quantity of about 73,000 tonnes of iodised salt was supplied from Sambhar Lake (Rajasthan) and Kharaghoda (Gujarat) against the annual quota of 93,500 tonnes. Thus, the supply in 1972 was of the order of about 80 per cent. The Government is taking steps to increase the supply. This, however, depends mainly on the supply of wagons by the Railways and the indents placed by the parties concerned. The matter is being taken up with the State Governments requesting them to direct their nominees to place the indents in time as well as supply the bags on demand so that supplies can be ensured regularly and to the maximum extent. Hindustan Salts Limited/Sambhar Salts Limited are taking steps to supply iodised salt in advance in addition to the regular monthly quota provided the wagons to that extent are available. The Railway Board have already upgraded the Category for movement of iodised salt from 'C' to 'B'. The supply of iodised salt from manufacturing sources to the consuming areas will, thus, improve considerably.

[Ministry of Industrial Development O.M. No. G.25015(B)-B&A/73 .. dated 30-11-73].

Recommendation

The requirements of the eastern and north-eastern regions have been met only to the extent of 5.5 per cent during 1971-72. It is a matter of concern to the Committee that as against estimated annual requirement of 44.5 thousand tonnes for West Bengal, the supplies made during the three years ended 1971-72 were to the extent of only 1.35 thousand tonnes, whereas no supplies were made during this period to Tripura and North Bihar, whose requirements were estimated to be 9.3 thousand tonnes and 124 thousand tonnes respectively.

The Ministry of Industrial Development have intimated that Government of Tripura have not issued necessary notification for banning the import of non-iodised salt to that State and that similarly Government of West Bengal and Bihar also have not as yet issued the necessary notifications for banning the entry of non-iodised salt in the affected districts. The Committee, however, note from the Performance Budget of the Department of Health for the year 1970-71 that the Government of Bihar have already issued necessary notification. The Committee would urge that the Government of India should impress upon the States which have not as yet issued the ban orders, the necessity to do so forthwith in the interest of health and well-being of the people.

[S. No. 16 (Para 2.31) of Appendix IV to 75th Report (Fifth Lok-Sabha)]

Action Taken

The question of issue of notifications by the State Governments for banning the entry of non-iodised salt has been pursued with the State Health Authorities and the present position is as under:—

Governments of Punjab, Haryana, Uttar Pradesh, Himachal Pradesh, Nagaland, West Bengal, Union Territories of Chandigarh and Manipur have already issued the necessary notifications. The Government of Jammu and Kashmir and the Government of Tripura have sent draft notifications for approval by Government of India.

[Ministry of Industrial Development O.M. No. G.25015(B)—B&A/73 dated. 30-11-73]

Recommendation

While the installed capacity of the iodisation plant in the western sector has been more or less utilised the capacity of the plants installed, at Calcutta has been utilised only to the extent of 2.3 per cent 1.6 per cent and 13 per cent during 1969-70, 1970-71 and 1971-72 respectively. Further, the two plants, which were received in the year 1968, are stated to be still lying in packed condition. The running and maintenance expenditure on the plants that are working at Calcutta have been of the order of Rs. 40,000 to 68,000 per annum. This unsatisfactory performance does not lend any hope about the expansion of the production of the iodised salt and installation of additional plants as envisaged in the Performance Budget of the Department of Health for the year 1972-73. Unless drastic steps are taken to create conditions for the increased intake of iodised salt, the Committee are afraid that the gross under-utilisation of the capacity will continue with the attendant increase in the overhead expenses and that the

condition of the two plants which have not been installed and commissioned for over 4 years now was bound to deteriorate.

[S. No. 17 (Para 2.32) of Appendix IV to 75th Report (Fifth Lok Sabha)]

Action Taken

The two plants received in 1968 which could not be installed at Calcutta, have since been shifted to Sambhar (Rajasthan) and the question of installation is under consideration. This was considered necessary to meet the requirements of the five additional districts of North Bihar which are to be fed from Sambhar. The plants already installed at Calcutta are being utilised to a greater extent now after the issue of necessary ban order in respect of the five districts of West Bengal.

Similarly, after the ban notification in respect of Tripura is issued, the movement of iodised salt to that State will increase. During the year 1972-73, it is found that the performance has improved to an extent of about 20 per cent.

[Ministry of Industrial Development O.M. No. G.25015 (B)—B&A/73 dated 30-11-73]

Recommendation

The Committee find that a sum of Rs. 40 lakhs has been provided in the Fourth Plan for the purpose of implementation of the Goitre Control Programme. Against this Plan outlay, the amount provided for in the Annual Budgets of the Department of Health for the first four years of the Plan totalled upto only Rs. 14.79 lakhs and there is also significant shortfall in spending even the amount allotted. The Committee hope that the shortfall would be made up during the current year as well as during 1973-74.

[S. No. 18 Appendix IV para No. of Report 2. L33].

Action Taken

Against an outlay of Rs. 32 lakhs for the Goitre Control Programme included in the Fourth Five Year Plan, the expenditure upto the end of 1972-73 was about 15.11 lakhs.

For the year 1973-74, the position regarding the sanctioned Budget

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grant, the cut imposed due to economy, and the Reduce Allocation is as follows:

Item	Budget grant 1973-74	Cut imposed	Reduced Allocation
	Rs.	Rs.	Rs
1. Sambhar Salt Ltd. Sambhar Lake .	2,90,000		
2. Hindustan Salt Company, Kharagoda	1,25,000		
	4,15,000	65,000	3,50,000
3. Calcutta Iodisation Plant .	1,10,000	20,000	90,000
TOTAL .	5,25,000	85,000	4,40,000

Despite the economy cut, M/s Sambhar Salt Ltd. have asked for a provision of Rs. 2.90 lakhs in the revised estimates for 1973-74 due to increased expenditure on account of Installation of two more Plants, replacement of Water Pipe Line to I. D. plant and electrification of laboratory. The Salt Commissioner to the Government of India, Jaipur, has also asked for a provision of Rs. 3.32 lakhs which is inclusive of Rs. 1.44 lakhs on account of the release of foreign exchange for the import of potassium iodate required for manufacture of the iodised salt. The information relating to the revised estimates for 1973-74 in respect of the Plant at Kharagoda is still awaited. Apart from the expenditure on the Plants, there is also a proposal for the purchase of one vehicle for the Survey Team in the Goitre Control Programme. The existing vehicle is very old and requires replacement. The approximate expenditure for the purchase of a new vehicle will be Rs. 40,000.

In view of the position stated above, the estimated expenditure on the Goitre Control Programme during 1973-74, as envisaged at present, will be as follows:

	Rs.
1. Sambhar Salt Ltd.	2,90,000
2. Hindustan Salt Company Kharagoda.	1,25,000
3. Calcutta Iodisation Plant and import of potassium iodate.	3,32,000
4. Purchase of vehicle for the survey Team.	40,000
TOTAL .	7,87,000

Sanction of expenditure will however depend upon availability of funds.

It is proposed to make an outlay of Rs. 53.00 lakhs for the Programme under the Fifth Five Year Plan.

[Ministry of Health and Family Planning O.M.No.G.250/15/1/73-MC dated 12th Nov, 1973]

Recommendation

From the foregoing analysis the Committee could not resist an impression that Goitre Control Programme has not been implemented with the requisite vigour and imagination. The implementation machinery is evidently weak and there appears to have been no effective coordination between the concerned Ministries of Government of India on the one hand and between the Government of India and the concerned States on the other. This is hardly the way to achieve the aim of an important Plan programme affecting the health of people such as this. The Committee, therefore, expect that a comprehensive review of the programme as suggested by them would be made forthwith and the results thereof as well as the concrete steps taken or proposed to be taken to put matters right intimated to them within six months. A break through in this could serve as an important case study to help effective implementation of allied Plan programmes.

[S. No. 21 (Para 2.36) of Appendix IV to 75th Report (Fifth Lok Sabha)].

Action Taken

The coordination in regard to the implementation of the Goitre Control Programme is affected by a Committee which has representatives from the following organisations:—

1. Railway Board.
2. Ministry of Shipping and Transport.
3. Salt Commissioner.
4. Ministry of Industrial Development.
5. National Research Development Corporation.
6. Ministry of Health and Family Planning.
7. National Institute of Nutrition, Hyderabad.
8. Directorate General of Health Services.
9. W.H.O.
10. UNICEF.
11. Health Directorates of various States and Union Territories

12. State Civil Supply Authorities.
13. A.I.I.M.S.
14. C.S.I.R.
15. C. S. & M. C. R. I.

Meetings of the said Committee are held from time to time in order to have close cooperation amongst various authorities. However, more effective steps are being taken to remove the obstacles coming in the way of quick implementation of the Goitre Control Programme.

[Ministry of Industrial Development O.M. No. 25015 (B)—B & A/73 dated 30-10-73].

Recommendation

The Committee were informed during evidence that on verification it had been found that no further amount was recoverable from any of the 10 societies referred to in the Audit Paragraph. The Committee feel that if this verification had been done well in time at least when the draft audit paragraph was sent by Audit, the inclusion of the Audit paragraph in the Audit Report could have been avoided with considerable saving of time and labour at all ends.

[S. No. 23 (Para 3.22) of the Seventy-Fifth Report of the Public Accounts Committee (1972-73) (Fifth Lok Sabha)].

Action taken

The conclusions arrived at by the Committee have been noted and the observations made by the Committee have been brought to the notice of the Delhi Administration and the Delhi Development Authority for guidance in future.

[Ministry of Works & Housing O.M. No. K.—11015/1/73—UDI (Part) dated 17-11-73].

CHAPTER III

RECOMMENDATIONS|OBSERVATIONS WHICH THE COMMITTEE DO NOT DESIRE TO PURSUE IN VIEW OF THE REPLIES OF GOVERNMENT

Recommendation

In the first instance orders for formulating 1000 tonnes were placed in June, 1969—900 tonnes on the Maharashtra Small Scale Industries Corporation and 100 tonnes of ESSO. Although formulation was to be completed by July, 1969, only 641 tonnes were formulated upto July, 1971. The balance was got formulated by other firms at an extra cost of Rs. 2.08 lakhs. This extra cost could not be recovered from the defaulting concerns as the agreements had not been signed by an officer duly authorised to do so. The lapse on the part of the officer concerned in not realising his limitations which put Government to a considerable loss should be suitably dealt with.

[Serial No. 11 of Appendix IV Para 1.52 of the 75th Report of the P.A.C. 1972-73—(Fifth Lok Sabha)].

Action Taken

The officers concerned in the Directorate of National Malaria Eradication Programme and the Directorate General of Health Services who had executed the agreements for formulation of D.D.T. Technical have since retired from Service.

[Ministry of Health & Family Planning O.M. No. G. 25015|1|73—C&CD. dt. 24-10-73].

Recommendation

Although 3000 tonnes of DDT Tech. were imported by May, 1969 and 755 tonnes in July, 1970, major quantity was issued for formulation only during February, 1971 to September, 1971. The delay in doing so requires to be gone into. Incidentally, the Committee find that the Hindustan Insecticides Ltd. which quoted a rate of about Rs. 2300 per tonne for formulation initially in 1968, subsequently quoted Rs. 1699 only. In view of the high rate quoted initially, no

orders could be placed on them. The Committee feel that Government should have decided in detail in advance about the public sector or private sector undertakings which were to formulate them, the rate to be paid and the time to be taken by them for formulation and supply. It should have been possible for Government to have the formulation done on urgent basis from Hindustan Insecticides Ltd., a Government undertaking.

[Serial No. 12 of Appendix IV Para 1.53 of the 75th Report of P.-A.C. 1972-73—(Fifth Lok Sabha)].

Action Taken

M/s. ESSO and Maharashtra Small Scale Industries Development Corporation Ltd. had quoted the lowest rates and according to the capacity of formulation recommended by the D.G.T.D. and Development Commissioner, Small Scale Industries, orders for formulation were placed on these firms for formulating 100 and 900 M. tons D.D.T. Technical respectively during June, 1969. They were committed to return the formulated material by July, 1969 but they could not. Had they returned the formulated material by the stipulated time, the rest of the D.D.T. Technical also would have been entrusted to them and in three months time, the entire quantity would have been formulated.

The assurances given in respect of the formulating capacity of the formulators were belied and the firms failed to return the formulated material timely and on the contrary came up with frequent requests for extension of delivery period on one pretext or the other. In order to complete the formulation of the D.D.T. Technical, the cooperation of other formulators (including both private and public sectors) was sought.

[Ministry of Health & Family Planning O.M. No. G. 25015/1/73-C&CD dt. 24-10-73].

Recommendation

The Committee have been given to understand that the demand for the iodised salt can be enhanced only if the State Governments impose a ban on the entry of non-iodised salt into the goitre affected areas. In this connection they find that Section 3 of the Essential Commodities Act, 1955 empowers Government of India to prohibit supply

and distribution of and trade and commerce in any commodity. They also note that under Section 5 of the Act the power in this regard could be delegated to be exercisable also by State Governments. When even after 15 years of starting this programme of goitre control, a number of State Governments have not as yet banned the entry of non-iodised salt in the affected areas, the Committee are not able to appreciate why the Government of India did not act on their own under Section 3 of the Essential Commodities Act. They expect Government to examine this aspect forthwith in order to take effective action. Further, any laxity in the enforcement of the orders under the Act should be promptly taken up with the State Governments concerned as such a laxity is stated to have come in the way of effective implementation of the programme.

[S. No. 19 (Para 2.34) of Appendix IV to 75th Report Fifth Lok Sabha.]

Action Taken

The Committee would appreciate that there has been some improvement in the issue of notifications by the State Governments. As regards the suggestion made by the Committee regarding issue of the notifications by the Government of India of its own under Section 3 of the Essential Commodities Act, 1955, it may be mentioned that the Government of India may not be in a position to do so as it does not have any machinery to enforce the ban order.

[Ministry of Industrial Development O.M. No. G 25015(B)—B&A/73
dt. 30-11-73].

CHAPTER IV

RECOMMENDATIONS|OBSERVATIONS REPLIES TO WHICH HAVE NOT BEEN ACCEPTED BY THE COMMITTEE AND WHICH REQUIRE REITERATION

Recommendation

Since the starting of the programme in 1958 Government have invested Rs. 219 crores upto the end of 1971-72. The estimated total requirement of funds for the year 1972-73 to 1980-81 is stated to be Rs. 145 crores. In view of a substantial outlay of the order of about Rs. 364 crores Government have a vital stake in the successful implementation of the Programme.

[Serial No. 2 of Appendix IV Para 1.27 of the 75th Report of P.A.C.
1972-73—Fifth Lok Sabha]

Action Taken

Though the objective of eradication has not been achieved, it must be said that the malaria morbidity rate i.e. sickness from malaria has been reduced by more than 98 per cent since the inception of the Maralia Eradication Programme in 1958. A statement showing the proportional case rates is attached at Annexure I. As regards the cost benefits, a research scheme to obtain statistical data is under progress by the Indian Council of Medical Research.

[Ministry of Health of Family Planning O.M. No. G. 25015|1|73—
C & CD, dt. 24-10-73]

ANNEXURE I

Yearwise proportional case rates and Blood Smeears examined and positives

Year	Proportional case rates
1953-54	10.8
1954-55	8.2
1955-56	6.2
1956-57	5.3

1957-58	4.4
1958-59	4.0
1959-60	2.4
1960-61	1.3
1961-62	0.7
1962-63	0.4
1963-64	0.23
1964-65	0.1
1965-66	0.05
1966-67	0.08
1967-68	0.07
1968-69	0.16
1969-70	0.07
1970-71	0.24
1971-72	
1972-73	

CHAPTER V

RECOMMENDATIONS|OBSERVATIONS IN RESPECT OF WHICH GOVERNMENT HAVE FURNISHED INTERIM REPLIES.

Recommendation

Incidentally the Committee would like to emphasise the need for stepping up indigenous production of insecticide in order to attain self-sufficiency. The representative of Ministry of Petroleum and Chemicals informed the Committee that from the production point of view if sustained off-take of DDT could be ensured there could be no objection to go in for expansion of the Hindustan Insecticides Ltd. The Ministry of Health have already given the necessary indication in this regard. As it has been stated that it will take two years to expand production the Committee desire that the matter should be processed in consultation with the Planning Commission so as to come to a quick decision. In this connection the Committee would also like Government to take into account the warnings given by some scientists against the excessive use of DDT as it constitutes a hazard to human health.

[Serial No. 8 of Appendix IV Para 1.33 of the 75th Report of P.A.C.
1972-73—Fifth Lok Sabha]

Action Taken

A short note giving the requisite information, as furnished by the Ministry of Petroleum and Chemicals, is attached at Annexure II.

[Ministry of Health and Family Planning O.M. No. G. 25015|
1|73—C. & C. D. dt. 24-10-73].

ANNEXURE II

8,000 tonnes DDT Plant

Hindustan Insecticides Limited, a Public Sector Undertaking under the Ministry of Petroleum and Chemicals submitted in 1967, a proposal for the establishment of an additional DDT Plant for the manufacture of 5,000 tonnes per annum of DDT Technical during the Fourth Five Year Plan and also submitted along with the proposal

a Feasibility Report. After considering this proposal, a provision of Rs. 242 lakhs was made in the Fourth Five Year Plan for setting up of this plant. However, later on fears were expressed about the continued and unrestricted usage of DDT and in this connection the restrictive measures taken in some countries like USA, Great Britain and Japan etc. were also cited. Apart from this it was subsequently felt that the additional requirement of NMEP for DDT in future could be met by expanding the existing capacities of Hindustan Insecticides Limited for manufacture of DDT. In view of this, this scheme was deleted from the Fourth Five Year Plan at the time of midterm appraisal in 1971. In 1972, the Task Force on Pesticides set up by the Planning Commission after taking into account the requirements of Agriculture estimated the 1978-79 demand of DDT at 5,000 tonnes. In addition to this the demand of NMEP in 1978-79 is estimated by Ministry of Health at 4,000 tonnes. As against this, the present installed capacity is about 4,200 tonnes per annum. It has, however, now become necessary to consider establishment of an additional plant of 5,000 tonnes per annum for DDT manufacture during the Fifth Plan period. In this context, HIL have again submitted a proposal for the setting up of a unit for the manufacture of 5,000 tonnes per annum of DDT at Resayani in Maharashtra State. HIL have since been asked to get a fresh Feasibility Report prepared and submit the same to Government for consideration.

Simultaneously the matter relating to environmental pollution aspect of DDT was placed before the National Committee on Environmental Pollution. This Committee has already met and considered this matter. The following views were expressed at the meeting :

- (a) The total usage of DDT in the country will not be increased by the proposed manufacture of DDT; over the last 15 years the annual usage of DDT has been on an average 10,000 tonnes and the proposed manufacture will only substitute imports ;
- (b) Based on evidence available, DDT has not caused serious problems of pollution in India and there is no proven evidence of deaths|disabilities on account of even occupational hazards; and
- (c) The proposed capacity of 5,000 tonnes/year is probably low compared to the needs of the country and export potential to South Eastern countries and the setting up of the plant should be expedited.

Final decision of the NCPEL on this proposal is, however, awaited.

Recommendation

Another difficulty which the programme is stated to have been confronted with is the non-placement of indents regularly by the State Salt nominees on the iodisation plants. Although it has been stated in the Annual Report of the Department of Health for the year 1969-70 that the cost of iodisation is being met by the Government of India and that the iodised salt is made available to the public at the same rate at which ordinary common salt is sold in endemic areas. It has been intimated by the Ministry of Industrial Development that the cost of iodised salt moved by sea and rail is more than the cost of the salt moved by the all-rail route from the West Coast or Rajasthan to the eastern and north-eastern regions. Thus, even though iodisation is done free of charge, there is stated to be reluctance on the part of the dealers to take iodised salt from Calcutta. The Committee do not think that there has been effective co-ordination between the Department of Health and the Ministry of Industrial Development and that this aspect of higher cost of iodised salt sold from Calcutta has been considered. The Committee, therefore, wish that the feasibility of subsidising this element of cost also should be carefully considered taking into account the increase in intake that would result thereby which would in turn mean higher production and lower overhead expenses.

[S. No. 20 (Para 2.35) of Appendix IV to 75th Report (Fifth Lok Sabha)]

Action Taken

The feasibility of subsidising the element of higher cost of iodised salt sold from Calcutta is under active consideration of the Government.

[Ministry of Industrial Development, O.M. No. G 25015(13)—BOA/
73 dt. 30-11-73]

Recommendation

The Committee note that till date a sum of Rs. 12.31 crores had been credited to the Revolving Fund which was created in June, 1961 for implementing the scheme of large scale acquisition, development and disposal of land in Delhi. As on 31st March, 1972, the Fund had a cash and bank balance of Rs. 48.46 lakhs, besides 20,308 acres of land which is valued at Rs. 38.40 crores at cost price. In addition to the Revolving Fund from which funds are made available, the DDA has taken an aggregate amount of Rs. 11.42 crores as loans from various sources such as LIC etc. for executing housing and

development schemes. It is seen that apart from the compilation of annual accounts which are also audited by the Comptroller and Auditor General of India no evaluation of the work done by the DDA since its inception has ever been done to find out how far it has achieved the aims for which it was set up. The Committee feel that it would be worthwhile to have the working of the DDA assessed by an expert Committee which could besides reviewing the overall functioning of the DDA also suggest further measures for the development of Delhi and its suburbs. In this connection the Committee would particularly like a review of the policy in regard to fixation of price of land disposed of by the DDA.

[S. No. 22 (Para 3.21) of the Seventy-Fifth Report of the Public Accounts Committee (1972-73) (Fifth Lok Sabha)]

Action Taken

The recommendation of the Public Accounts Committee has been noted by the Government of India and action to set up an Expert Committee is being taken.

[Ministry of Works & Housing, O.M. No. K—11015/1/73—UDI (Part)
dt. 17-4-73]

NEW DELHI;
February 4th, 1974.
Magha 15th, 1895 (S).

JYOTIRMOY BOSU,
Chairman,
Public Accounts Committee.

APPENDIX X

Summary of Main Conclusions/Recommendations

S. No.	Para No. Ministry/Dept. of Report	Conclusions/Recommendations
3	1 1-7 Health and Family Planning	

The Committee had observed that in view of a substantial outlay of the order of about Rs. 364 crores, Government have a vital stake in the successful implementation of the Malaria Eradication Programme. The Government have stated that though the objective of eradication has not been achieved, the malaria morbidity rate has been reduced by more than 98 per cent since the inception of the Malaria Eradication Programme in 1958. The Committee however find that the proportional case rate has increased from 0.05 in 1965-66 to 0.24 in 1970-71. This indicates that there has been deterioration. In view of the successive set-backs suffered by the programme in the past, the Committee would urge Government to gear up the organisation, which has been provided with substantial funds, in order to ensure that the programme is successfully implemented well within the target date.

The Committee hope that the statistical data of cost benefits under compilation by the Indian Council of Medical Research would be useful in evaluating the programme regularly.

The Committee have been intimated that the Indian Council of Medical Research will be requested to help in finding a solution to the increasing phenomenon of resistance to insecticides. They wonder why the Institution have not already been approached in the matter. They nevertheless trust that the matter would have by now been entrusted to them so as to find a solution early.

The Committee note that the Hindustan Insecticides Limited have been asked to submit a fresh feasibility report for setting up a unit for the manufacture of 5,000 tonnes of DDT to augment indigenous production. However, according to the National Committee on Environmental Pollution, the proposed additional capacity of 5,000 tonnes per year is probably low compared to the needs of the country and export potential to South Eastern countries. The Committee desire that having regard to this view a final decision on the capacity of the new unit should be arrived at expeditiously.

The Committee cannot but express their distress that a comprehensive review of the Goitre Control Programme which was suggested to be done "forthwith" has not yet been taken up. The review of the programme from time to time as claimed to have been done has not evidently been imaginative and realistic enough in view of the deficiencies brought out by the Committee especially in paragraph 2.36 of the 75th Report. It is, therefore, essential to have an effective and comprehensive review at this stage which, the Committee trust, would be done forthwith.

Health and Family Planning

The Ministry have not indicated whether all the Goitre affected areas have been surveyed. Further no arrangement seems to have been made for a periodical resurvey in all the areas to assess the impact of the measures taken to control the disease. The Committee stress that a time bound programme should be laid down to complete the survey and to resurvey the areas which were already surveyed.

Industrial Development

The Committee would like to suggest that the question of issuing notifications by the remaining State Governments (such as Assam, Meghalaya and Bihar) banning the entry of non-iodised salt should be vigorously pursued.

do.

The Committee desire that the two iodisation plants received in 1968 which have since been shifted from Calcutta to Sambhar should be installed during the current financial year (1973-74).

do.

The Committee would like to impress upon the Government the need to come to an early decision in regard to subsidising the element of higher cost of iodised salt sold from Calcutta.

Works and Housing

The Committee would like to suggest that an Expert Committee to review the working of the Delhi Development Authority should be set up without delay and it should report to Government within the minimum possible time.