

Mawel Area of Pune District" and Rs. 8,00,000 for grant-in-aid to K.E.M. Hospital, Pune for implementation of the Project "Comprehensive Project in Health, Family Welfare and Community Development" for the year 1990-91. The District of Pune is partially covered in Tribal Sub-Plan Areas of Maharashtra.

(b) Grants are given to Organisations/ Institutions which are registered under the societies Registration Act, 1860 or other statutes and which are Voluntary in Characters and Non-profit making and also fulfil the criteria, as laid down in the General Financial Rules.

(c) No, Sir.

(d) Question does not arise.

Reduction of Ration to Jhuggi Dwellers

10058. SHRI KUSUMA KRISHNA MURTHY:
SHRI YASHWANTRAO PATIL:

Will the Minister of FOOD AND CIVIL SUPPLEIS be pleased to state:

(a) whether the ration items to jhuggi dwellers in the Capital has been reduced by 50 per cent in respect of sugar and other food items as compared to the old ration card holders; and

(b) if so, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FOOD AND CIVIL SUPPLIES (SHRI RAM PUJAN PATEL): (a) No, Sir.

(b) Does not arise.

SC/ST Faculty Members in A.I.I.M.S.

10059. SHRI JORAWAR RAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the present percentage of S.C. and S.T. faculty members in the All India Institute of Medical Sciences, New Delhi;

(b) whether it is strictly in accordance to roster provision;

(c) if not, the reasons therefor; and

(d) the steps Government propose to take in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD): (a) to (d). The All India Institute of Medical Sciences have reported that the present percentage of SC/ST faculty members in the Institute is 4.30%. At percent the roster is maintained at the entry level of Asstt. Prof. for direct recruitment only which is not strictly in accordance with the roster provision. As per decision of the Governing Body of the Institute, the posts at entry level (Asstt. Professors) are reserved without mentioning their speciality and for which SC and ST candidates are available and found suitable, are treated as reserved for SC and ST candidates in order to ensure the required representation of SC and ST. If no SC and ST candidates are available, the posts are filled from general candidates and reservation is carried forward to the next year advertisement. However, no reservation is being made for senior faculty positions at the Institute either for direct recruitment or for promotion. A proposal for exemption of the faculty posts of the AIIMS from the purview of the reservation orders of the Government for SC and ST candidates is, however, under process.

Centrally Sponsored Health Schemes

10060. SHRI SRIKANTHA DATTA NARASIMHA RAJA WADIYAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of Centrally sponsored health schemes;

(b) whether Government propose to evaluate the schemes;

(c) if so, the steps taken by Government in this direction;

(d) the guidelines issued to different State Governments in implementing the National Health Scheme and particularly the disease control programme;

(e) the diseases that are needed to be controlled on priority; and

(f) the States which are prone to these diseases?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD):

(a) 14 in 1989-90. Details are given in the Statement below;

(b) and (c). Some of these schemes have been evaluated at different times.

(d) Detailed guidelines have been issued from time to time to the States on implementation of these schemes, including the Schemes for the Control of Malaria, Kala Azar, Japanese Encephalitis, Filariasis, Tuberculosis, Leprosy, Blindness and Guinea-worm Infestation.

(e) All the diseases included in the Centrally Sponsored Schemes for Control of Communicable Diseases need to be controlled on priority basis.

(f) Malaria, Tuberculosis, and Blindness are prevalent in all the States with marginal variations. Kala Azar has been prevalent in some area of Bihar and West Bengal. Japanese Encephalitis cases have occurred more in Andhra Pradesh, Assam, Karnataka, Tamil

Nadu, Uttar Pradesh and West Bengal. More filaria cases have occurred in Andhra Pradesh, Karnataka, Kerala, Orissa and Tamil Nadu.

The majority of the Leprosy patients are from Tamil Nadu, Pondicherry, Orissa, West Bengal, Bihar, U.P., Madhya Pradesh, Andhra Pradesh and Maharashtra while guinea-worm affected states are Andhra Pradesh, Gujarat, Karnataka, Madhya Pradesh, Maharashtra and Rajasthan.

STATEMENT

There were 14 Centrally Sponsored Schemes during 1989-90 as stated below:—

- (1) Re-orientation of Medical Education
- (2) National School Health Services
- (3) Training of Multi-purpose Workers
- (4) Training of Specialists and Paramedical Workers
- (5) Training of Community Health Officers
- (6) Strengthening of Laboratory Facilities at PHCs and Rural Dispensaries
- (7) National Malaria Eradication Programme
- (8) National Filariasis Control Programme
- (9) National Leprosy Control Programme, including Grant to Voluntary Organisation under Leprosy S.E.T. Scheme (includes notional increase worth Rs. 105 lakhs Foreign Aid)
- (10) National T.B. Control Programme.

(Includes notional increase worth Rs. 250 lakhs SIDA Assistance)

- (11) National Programme for Control of Blindness. (Includes notional increase worth Rs. 145 lakhs DA-NIDA Assistance)
- (12) Guinea-worm Eradication Programme
- (13) Assistance for up-grading I.S.M . Post-graduate Department
- (14) Assistance for development of I.S.M. Pharmacies including Herbal Farms, Drug testing Laboratories etc.

Reduction in Price of Hank Yarn

10061. SHRI SUDHIR GIRI: Will the Minister of TEXTILES be pleased to state:

(a) whether an agreement has been arrived at between Union Government and the spinning mills regarding the reduction of hank yarn prices; and

(b) if so, the details of the agreement?

THE MINISTER OF TEXTILES AND MINISTER OF FOOD PROCESSING INDUSTRIES (SHRI SHARAD YADAV): (a) and (b). In a meeting taken by Minister of Textiles with representatives of leading association and federations of the spinning industry to discuss the supply of hank yarn to handloom weavers at reasonable and stable prices, it was agreed to reduce prices of hank yarn, prevailing during the second half of of March, 1990, by 5% and to maintain the reduced level of prices up to the end of September, 1990. The hank Yarn Price Monitoring Committee will make a review in July, 1990 regarding the level of prices to prevail from October, 1990 onwards.

[*Translation*]

Financial Aid for Catscanner in Udaipur Hospital

10062. SHRI GULAB CHAND KATARIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to provide financial aid to Rajasthan Government for enabling the State to make available Catscanner machine in Udaipur hospital for skull X-ray for newro-surgery;

(b) whether Udaipur Division is a tribal dominated area,

(c) if so, whether this machine is urgently needed for cheap and proper treatment; and

(d) if so, the time by which the machine will be made available there?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD):

(a) No, Sir.

(b) Yes, Sir.

(c) and (d). The Catscanner is mainly used for diagnosis purposes and is not used for treatment. Central Government has no proposal to instal the Catscanner in Udaipur Hospital. However, one such machine is proposed to be installed in S.M.S Medical College, Jaipur under Indo-Japanese aid programme.

[*English*]

Sterilisation in Maharashtra

10063. SHRI S.B. THORAT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: