

was an educationist of wide repute. I am told that when he was still a student, he had on one occasion done a memorable work during Hindu-Muslim riots in order to establish peace.

His loss is a real calamity not only for the nation but for all those common people both in Maharashtra and in Madhya Pradesh, where he had also worked, for whom he had toiled so hard all his life. On behalf of my group, I would request you to convey our sincere condolences to the bereaved family.

श्री जगन्नाथ राव जोशी : अध्यक्ष महोदय, डाक्टर साहब के साथ पिछली लोक सभा से मेरा अच्छा परिचय था। पिछले चुक्रवार की शाम को चार बजे उनके साथ मेरी बात हुई थी और उस समय इसकी कल्पना भी मैं नहीं कर सकता था। जब मैं ने उनकी मृत्यु का समाचार सुना तो मुझे बड़ा धक्का सा लगा। वे स्वभाव के बड़े शांत और मिलभाषी थे। यहाँ सदन में बहुत सी कार्यवाही में वे उतना हिस्सा नहीं लेते थे किन्तु जो क्षेत्र उन्होंने चुना था उसमें बड़ी लगन के साथ वे सदा काम करते रहे। ऐसे व्यक्ति को नियति ने हमसे छीन लिया यह बड़ा दुःखदाई है। उनके निधन पर जो भावनायें यहाँ पर व्यक्त की गई हैं उनसे मैं स्वयं को तथा अपने दल को सम्बद्ध करते हुए भगवान से प्रार्थना करता हूँ कि वह दिवंगत आत्मा को सद्गति प्रदान करे तथा शोकसंतप्त परिवार तक आप हमारी संवेदनार्थें पहुंचा दे।

SHRI MOHANRAJ KALINGARAYAR (Pollachi) : On behalf of the D.M.K. party, I would like to express our deepest sympathy for the sad and sudden demise of Dr. A. G. Sonar. I join in conveying our deep-felt condolences to the bereaved family.

SHRI K. S. CHAVDA (Patan) : On behalf of my group and myself, I associate myself with the sentiments expressed by the Prime Minister and others on the sad demise of our friend. I would request you

to convey our condolences to the bereaved family.

SHRI H. M. PATEL (Dhandhuka) : May I on behalf of my party request you to convey our sympathies to the bereaved family? On behalf of my party, I fully associate myself with the sentiments expressed by the Prime Minister and others.

SHRI SAMAR GUHA (Contai) : Sir, it is a tragedy enacted by destiny that one of the freedom fighter and a very active patriotic worker who had yet many years to complete the service to the cause of the nation has been suddenly taken away from our midst.

I fully associate myself with the sentiments expressed by yourself, the Prime Minister and other friends in the House. On behalf of my party, I would request you to convey our condolences to the bereaved family.

MR. SPFAKER : The House may stand in silence for a short while to express its sorrow.

Members then stood in silence for a short while.

ORAL ANSWERS TO QUESTIONS

बल चिकित्सा केन्द्र तथा
बेरोजगार डाक्टर
+

*281. डा० लक्ष्मीनारायण पांडेय :

श्री राम रत्न शर्मा :

क्या स्वास्थ्य और परिवार नियोजन मंत्री यह बताने की कृपा करेंगे कि :

(क) देश में बेरोजगार डाक्टरों की संख्या कितनी है;

(ख) देश में कुल कितने डाक्टरों तथा स्थायी व बल चिकित्सा केन्द्रों की आवश्यकता है; और

(ग) इस सम्बन्ध में सरकार की नीति या योजना क्या है ?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI A. K. KISKU): (a) We have no statistical data showing the number of unemployed Doctors in the country. However, there is overall shortage of doctors in the country particularly in rural areas.

(b) About 5400 Primary Health Centres are required to cover the entire population of the country. About 10,800 doctors are required to man these Health Centres.

(c) The policy is to ensure that there is at least one Primary Health Centre in each Community Development Block by the end of the Fourth Five Year Plan and that each Health Centre has two doctors.

डा० लक्ष्मीनारायण पांडेय : अध्यक्ष महोदय, मेरा प्रश्न था कि बेरोजगार डाक्टरों की संख्या क्या है। माननीय मंत्री जी ने उत्तर दिया कि शार्टेज है, लेकिन यह नहीं बताया कि आखिर बेरोजगार कितने हैं। मैं जानना चाहता हूँ कि क्या राजस्थान, मंसूर, पश्चिमी बंगाल से निकलने वाले डाक्टरों की संख्या इतनी अधिक है कि उन्हें कोई रोजगार नहीं मिलता है और बेरोजगार हैं क्या सरकार के पास इस बात की जानकारी है ज़रूर नहीं ?

SHRI A. K. KISKU : In the year 1971 we had collected some information on this particular point from all the States. Almost all the States had reported that there was shortage of doctors except Rajasthan and Orissa. In Rajasthan there was a surplus of about 400 doctors and in Orissa about 650. But apart from these two States, we do not have details that other States have surplus doctors. We have also consulted the Central Bureau of Health Intelligence and the Directorate General of Employment and Training, and from the live registers they are maintaining from 1963 to 1971 we find that there have been some placements for example, in 1963 there were 1005 in the live register of which 392 got placement; in 1969 there were 1597 of which 392 got placement; in 1970 there were 2497 of which 384 got placement. For 1971 we do not have any information yet. How-

ever, since registration is voluntary for the unemployed doctors, it is not possible to get the exact figure as to how many doctors are unemployed.

डा० लक्ष्मीनारायण पांडेय : मंत्री जी ने बताया कि लगभग 10,800 डॉक्टर्स प्राइमरी हेल्थ सेंटरों के लिये चाहियें, और एक तरफ वह बताते हैं कि हमारे यहां शार्टेज है, तो मैं मंत्री महोदय से जानना चाहता हूँ कि जब राजस्थान और उड़ीसा में स्वयं उन्होंने स्वीकार किया है कि डॉक्टर्स अधिक हैं और जहां तक मेरी जानकारी है मंसूर और पश्चिमी बंगाल में काफी डॉक्टर्स निकल रहे हैं जिनको ऐसबाब नहीं किया जा रहा है, तो प्राइमरी हेल्थ सेंटरों में डॉक्टरों के नहीं जाने का क्या कारण है ? क्या यह भी कारण है कि उनके लिये उस प्रकार की सुविधा उपलब्ध नहीं करा पा रहे हैं जिस प्रकार की सुविधा उन्हें चाहियें, इस कारण प्राइमरी हेल्थ सेंटरों डॉक्टरों के अभाव में खाली पड़े हैं। सरकार इस बारे में क्या कर रही है ?

SHRI A. K. KISKU : About Mysore and West Bengal, I do not have any specific information right now.

About the second point that the hon. Member has raised, we find that the doctors prefer to remain in the urban areas. There are difficulties for them to go into the rural areas. However, Government is trying to give incentives in various forms like accommodation, electrical facilities, water supply and so on plus some rural service allowance so that they may be encouraged to go into the rural areas and we find that this incentive that is being given is creating encouragement for them and we find that from the data available to us there are more and more doctors going to the rural areas. We hope that as soon as we are able to create the infra-structure for the doctors to go there, this problem of doctors in rural areas will be solved.

डा० लक्ष्मीनारायण पांडेय : मंत्री महोदय ने बताया पश्चिमी बंगाल की उनकी जानकारी नहीं है। यह सरकार की एम्प्लॉयमेंट रिकॉर्ड

मानक वृत्तिका 1969-70 की है उसके पेज 46 पर लिखा है कि परिषदी बंगाल और मैसूर में कितने करपास हैं। वृत्त धारण है कि बंगी जी को इसकी कोई जानकारी नहीं है।

MR. SPEAKER : Shri R. R. Sharma—
absent.

SHRI B. V. NAIK : I would like to know from the hon. Minister whether the category of those doctors in the urban areas who do not have clients, that is, who do not have adequate practice, as we call them, is classified as unemployed or employed.

THE MINISTER OF WORKS AND HOUSING AND HEALTH AND FAMILY PLANNING (SHRI UMA SHANKAR DIKSHIT) : We do not have any such record about the number of patients the individual doctors get or the number of doctors who have no practice. I have got one figure—I do not know whether he wanted it. On the live register, upto the end of 1971, there were 3953 medical graduates entered as unemployed. But there are others who might not have entered their names or those who might have been subsequently employed. Therefore, it is not a very accurate figure.

SHRI S. M. BANERJEE : Now that the Central Government Health Service Scheme is going to be extended to other cities like Kanpur, Jabalpur, etc, I would like to know in this particular scheme, when it is extended, how many doctors are likely to be recruited.

SHRI A. K. KISKU : This question does not really come out of the question that we have. But, if the member wants the information, we will be very glad to give.

SHRI S. M. BANERJEE : It is not irrelevant, Sir. Health Centres are under this Scheme.

DR. MAHIPATRAY MEHTA : Is it a fact that due to there being more medical graduates in Rajasthan and on account of that the Rajasthan Government is thinking of reducing the number of seats in medical

colleges? If so, would the Central Government ask the Rajasthan Government to take students to their medical colleges from the neighbouring States where there is shortage of medical seats?

SHRI UMA SHANKAR DIKSHIT : They have this time admitted 400 students. Earlier also this was the number that used to be admitted in their colleges. In the last two years they admitted 600 students but they find that the doctors who have already come out and passed these examinations are not given employment and most of these doctors do not want to go out of Rajasthan also. During a recent visit to Rajasthan when I had been there for a function, some doctors demonstrated and then I asked the Director-General of Health to go there. Within a week he went there. He invited all doctors who were ready to accept employment in any part of the country. I believe 500 candidates applied and 52—I don't remember the exact figure—about 50, were given letters of appointment on the spot but only about half a dozen joined duty. The problem is that they want to remain in their own State. So, one of the ways we are now trying is to give incentives in the present phase. The State Governments are also giving their own incentives.

We have also decided that in respect of 400 backward stations, the doctors posted for work in these stations, will get Rs. 150 each as special allowance. We are also giving other types of incentives. Still there is the question of availability of schools, availability of approach roads and other requirements which they want. I would like to say that unless the doctors are willing to go to rural areas and serve as a matter of public service, this type of situation, I am afraid, may not be corrected for quite some time to come.

DR. MAHIPATRAY MEHTA : My question has not been answered.

MR. SPEAKER : We have already spent twenty minutes there are other questions.

श्री विपुल मिश्र : जब गांव का मासला आता है तो आप वहां भ्रम कर जाते हैं। यह बहुत महत्वपूर्ण स्थान है। गांवों में रहने वालों से सम्पर्क रखना है।