

posed to be built in Calcutta and, if so, how far progress has been made in respect of that?

Mr. Speaker: The question is not about the aerodromes that are to be built; it is about the modernisation only.

Shri Hem Barua: Arising out of the hon. Defence Minister's reply that the aerodromes are modernised not on the State basis but on the basis of needs of strategy, if I understood him aright, is it not a fact that the aerodromes in Assam need to be modernised, and may I know how far any progress has been made so far as the air-fields in Assam are concerned?

Shri Y. B. Chavan: I think that would form a separate question.

श्री सरजू पाण्डेय : उत्तर प्रदेश के गाजीपुर जिले में द्वितीय महायुद्ध में जो हवाई अड्डे मौजूद थे क्या उन के पुन-निर्माण की कोई योजना सरकार के विचाराधीन है ?

Mr. Speaker: Next question.

Shri Sarjoo Pandey: It is a very important question.

Mr. Speaker: It is very important so far he is concerned, but not so for the whole House.

Shri Hem Barua: You will agree mine was more important.

Mr. Speaker: Yes and that is why I allowed that. Next question.

Occupational Health Hazards in Coal Mines

*456. **Shri P. R. Chakraverti:** Will the Minister of Labour and Employment be pleased to state:

(a) whether Government have suggested to medical research and social organisations to investigate into certain aspects of occupational health hazards particularly in coal mines;

(b) the result of survey carried out in 1961 by the Chief Adviser of Factories and the Chief Inspector of Mines in regard to the incidence of pneumoconiosis and tuberculosis among underground workers;

(c) whether the Central Mining Research Institute is conducting investigation in that line; and

(d) if so, what are their findings?

The Deputy Minister in the Ministry of Labour and Employment (Shri R. K. Malviya): (a) An enquiry has been made whether it will be possible for them to undertake investigation on certain aspects of the problem of pneumoconiosis in coal mines.

(b) The sample survey carried out in 1959-60 revealed an incidence of 18.8 per cent of pneumoconiosis and 6.6 per cent of tuberculosis amongst coal-miners who had worked underground for 10 or more years.

(c) The Central Mining Research Station is carrying out investigations into the extent of dust exposure in coal mines and methods of dust control.

(d) The investigations are still in progress.

Shri P. R. Chakraverti: May I know what steps Government has taken to ensure immunity to the workers against these devitalising diseases?

Shri R. K. Malviya: Investigation is going on and when it is completed and the recommendations are made, they will be implemented.

The Minister of Planning and Labour and Employment (Shri Nanda): It has been discovered that there is a relationship between the proportion of dust in the atmosphere and the incidence of these diseases. Steps are being taken to frame the rules in such a way that this dust ratio should be controlled better.

Shri R. S. Pandey: Apart from the diseases due to dust in the atmosphere, there are many who suffer from suffo-

cation and ultimately they suffer from T.B. May I know what measures Government are proposing to take for them and whether nutritious food will be provided for them?

Shri R. K. Malaviya: We have a programme for prevention and treatment of T.B. through the Coalmines Labour Welfare Fund. We have got a large number of beds reserved in the sanatoria all over the country. We have also built hospitals attached to the central hospitals in Dhanbad and Asansol with 100 beds each for this purpose.

श्री विश्वाम प्रसाद : क्या माननीय मंत्री जी बताने की कृपा करेंगे कि जो माइन्स में काम करने वाले हैं उन के रहने सहने का, घर का और दवादारु का इन्तिजाम नहीं है जिस की वजह से टी० बी० की ज्यादा प्रगति होती जा रही है ? यदि हां, तो इस के लिए सरकार क्या कर रही है ?

श्री र० कि० मालवीय : जहाँ तक दवादारु का सवाल है, उस का बहुत अच्छा इन्तिजाम कोल माइन्स वेलफेयर फंड की तरफ से है। सेण्ट्रल अस्पताल है, रीजनल अस्पताल हैं, और कोल माइन्स के अस्पताल हैं जिन को हम सर्विसी भी देते हैं। जहाँ तक टी० बी० का ताल्लुक है, हम डोमिसिलरी ट्रीटमेंट के लिए हर एक वरकर को जो टी० बी० का मरीज होता है अलग से पैसा देते हैं। जो अस्पताल में रहता है उस की फैमिली को भी अलग से पैसा देते हैं।

श्री यशपाल सिंह : क्या यह सही है कि कोयला खानों में काम करते करते मजदूर जब बीमार हो जाता है और अस्पताल में भरती हो जाता है तो उस की पूरी तनखाह काट ली जाती है ?

श्री र० कि० मालवीय : एक कायदा बना हुआ है जिस के अनुसार उस को मैडीकल लीव मिलती है। यह सही है कि कुछ दिनों

के बाद बतन नहीं मिलता अगर प्रत्येक वरकर को जो बीमार होता है पूरा खर्चा अस्पताल का दिया जाता है जोकि एक टी० बी० के मरीज के लिए सवा सौ या डेढ़ सौ रु० मासिक होता है। इस के अलावा उस की फैमिली को अलग से पैसा देते हैं फंड में से, चाहे एम्पलायर बे या न बे यह पैसा उस को कोल माइन्स फंड में से दिया जाता है।

Shri Narendra Singh Mahida: May I know whether these workers are covered by any insurance scheme?

Shri R. K. Malviya: No, Sir; they are governed by the provident fund scheme.

Shri A. N. Vidyalkar: May I know whether the Government keeps statistics with regard to the cure and rate of death amongst these workers due to T.B. or other occupational diseases?

Shri R. K. Malviya: Yes, Sir.

श्री शिव नारायण : मैं यह जानना चाहता हूँ कि फैमिली के मेन्टेनेन्स के लिए कितनी रकम सरकार देती है ?

Shri R. K. Malviya: Generally Rs. 50 P.M. for domiciliary treatment.

Wage Board for Iron Ore Mines

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*457. { **Shri Bibhuti Mishra:**
Shri P. C. Borooah:
Shri Indrajit Gupta:

Will the Minister of Labour and Employment be pleased to state:

(a) whether it is a fact that a Wage Board for Iron Ore Mines is to be appointed; and

(b) if so, when it will be appointed and what will be its terms of reference?

The Deputy Minister in the Ministry of Labour and Employment (Shri R. K. Malviya): (a) Yes.