

**Shri C. K. Bhattacharyya:** With the removal of slums from the city itself, the suburban areas of Calcutta are being fast urbanised. May I know whether the plan or the efforts being made by the CMPO include provision for the requirements of ordinary human life, namely, shops, bazars, roads, public conveniences and water supply for these areas where the adjoining slums are being removed and the people resettled?

**Shri Asoka Mehta:** In the programmes of development for these metropolitan cities like Calcutta and Bombay, provision has been made for various facilities that have been indicated.

**Shri C. K. Bhattacharyya:** What about water supply?

**Shri Asoka Mehta:** Water supply is also given very high priority. But apart from water supply, there are other facilities which require a great outlay. For instance, as far as Bombay is concerned, the total outlay invested by the Municipal Corporation is something like Rs. 700 crores. Now, one has to think of getting these resources and mobilising them, partly from the State and partly from other sources, and see how they can best be phased over a period of time. In all this, water supply will get the highest priority.

#### Opening of more Hospitals in the country

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- \*1101. **Shri Subodh Hansda:**  
**Shri S. C. Samanta:**  
**Shri M. L. Dwivedi:**  
**Shri Bhagwat Jha Azad:**  
**Shri P. C. Borooah:**  
**Shri Hukam Chand Kachhavaia:**  
**Shri Bade:**  
**Shri Yashpal Singh:**  
**Shri Bibhuti Mishra:**

Will the Minister of Health and Family Planning be pleased to state:

(a) whether it is a fact that suggestion for opening more hospitals at

district level instead of opening of big medical colleges in cities has been made at the 11th Annual Conference of the Indian Section of the International College of Surgeons held in Delhi in the last week of December, 1965; and

(b) if so, the reaction of Government thereto?

**The Deputy Minister in the Ministry of Health and Family Planning (Shri B. S. Murthy):** (a) Yes, Sir.

(b) Improvement of District Hospitals and opening of new medical colleges are complementary and not contradictory of one another. It is necessary to open new medical colleges to meet the shortage of doctors in the country. All possible steps are being taken to augment and improve hospital facilities at the district level also.

**Shri Subodh Hansda:** May I know whether the Government is aware that the existing district hospitals are not well equipped, particularly in West Bengal, especially in the matter of modern surgical instruments; if so, may I know whether Government will provide more funds to equip all the existing district hospitals?

**The Minister of Health and Family Planning (Dr. Sushila Nayar):** No, Sir, there is no such proposal from the Central Government. The hospitals are the responsibility of the State Governments, and we shall certainly bring it to the attention of the State Government that they need to improve these facilities as the hon. Member has stated.

**Shri Subodh Hansda:** I would like to know whether the International College of Surgeons have experienced any difficulty due to the disadvantage in locating all these colleges in the main cities and not locating these colleges in the rural areas, to remove which they have made some suggestions?

**Dr. Sushila Nayar:** They have made no suggestions for locating medical colleges in the rural areas. I am sorry, the President of the Association has talked of everything except his own subject, as to how to improve the surgical facilities in the various hospitals. He has stated that we should give three times the salaries to the doctors in the rural areas.

**Shri D. C. Sharma:** Sir, I rise to a point of order. Is it proper to discuss a person in these terms when he is not present here to defend himself?

**Mr. Speaker:** That is a public statement that he has made. We can discuss that statement.

**Dr. Sushila Nayar:** Further, he has suggested that instead of opening new medical colleges we should divert that money for various other purposes. Now, Sir, some doctors may be interested in not increasing the number of doctors in India because if the doctors are increased naturally it will affect the few that are there. But, as the House is well aware, there is a shortage of doctors, whatever this gentleman might have stated, and we have to train more doctors to make up for the shortage.

**Shri S. C. Samanta:** May I know the policy followed by the Central Government as regards opening of colleges and hospitals in different parts of States, and what advice has been given to them?

**Dr. Sushila Nayar:** As the House is aware, the Health Survey and Planning Committee has gone into this whole question very thoroughly. They have recommended that there should be one medical college for every 50 lakhs of people. We are trying to follow that advice and we are trying to persuade the State Governments to disperse the medical colleges rather than concentrate them in any particular place.

**श्री सुकम चन्द कछवाय :** क्या इस सम्मेलन में इस बात पर भी विचार किया

गया कि इस समय सभी स्तरों पर जिला स्तर पर, तहसील स्तर पर अस्पतालों की बहुत कमी है और अस्पतालों और पलंगों में पर्याप्त मात्रा में वृद्धि होनी चाहिए ? इस समय कितने पलंग सारे देश के अन्दर हैं और क्या इस बात का विचार किया गया है कि जो मरीज अपने घर पर रह कर इलाज करवाते हैं और जब वह घर पर ठीक नहीं होते हैं और समुचित इलाज के लिए अस्पताल जाने को इच्छुक होते हैं और भरती होना चाहते हैं तो उनको वहाँ अस्पताल में जगह और पलंग आदि मिल सके जोकि अभी नहीं मिलते हैं ।

**डा० सुशीला नायर :** हमें मालूम है कि देश में अस्पतालों के पलंगों की कमी है और हमने कोशिश की थी कि कम से कम एक हजार की आबादी पर एक पलंग इस देश में मिल जाय। तीसरी योजना में हम उस पर पहुंच नहीं पाये। आठे पलंग के हिसाब से भी कुछ कम ही है। अगली योजना में भी कोशिश है कि कुछ पलंगों को बढ़ाया जाय लेकिन तो भी पर्याप्त मात्रा में पलंग नहीं बढ़ सकेंगे ।

**श्री यशपाल सिंह :** माननीय मंत्री ने यह जब कहा कि अगली पंचवर्षीय योजना में उनको बढ़ाया जायगा तो क्या यह सरकार की अयोग्यता का प्रमाण नहीं है कि बीमार बढ़ते जा रहे हैं ? अस्पताल ही न खोलने पड़े, कोई बीमार ही न पड़े इसके लिए सरकार ने क्या प्रीवेंटिव एक्शन लिया है और स्वास्थ्य को क्या महत्ता दी गयी है यह मैं सरकार से जानना चाहता हूँ। जब हमारे आरोग्य मंत्री जिनके कि हाथ में स्वास्थ्य है उनको अभी तक क्विंट रैंक नहीं दिया गया है तो फिर कैसे काम चलेगा क्योंकि लोग बीमार होते रहेंगे और हम अस्पताल खोलते रहेंगे और इस तरह से घरों और करोड़ों पर क्या खर्च होता रहेगा?

डा० सुशीला नायर : श्रीमन्, बीमारियों की रोकथाम के लिए सरकार ने क्या काम किया है वह तो सबको विदित है। जहां करीब 25 लाख लोग मरते थे हर साल मलेरिया के सीधे या उसके इनडाइरेक्ट रिजल्ट से वहां एक भी आज़ मरता नहीं है। चेचक में भी बहुत कमी हो गयी है और दूसरे रोगों में बहुत कमी हो गयी है। कोशिश तो पूरी हो रही है रोगों की रोकथाम करने की लेकिन उसके साथ ही साथ हमारी आबादी भी बढ़ती है और लोग बीमार भी पड़ते हैं।

श्री विभूति मिश्र : अभी मंत्री जी ने जवाब दिया कि 50 लाख की आबादी पर एक मैडिकल कालिज खोला जायगा तो बिहार की आबादी चूंकि पांच करोड़ है तो वहां 10 मैडिकल कालिज चाहिए। लेकिन मैं तो यह पूछना चाहता हूं कि जो और मैडिकल कालिज और अस्पताल बनाये जाने हैं उनके अलावा पहले से जो अस्पताल आदि बने हुए हैं, कम से कम देहात में, अग्र्यक्ष महोदय, आप चल कर उनकी हालत देख लीजिये और शहर में भी मेरी समझ में वही हालत होगी कि उन अस्पतालों के पास दवाएं नहीं हैं, रोगी बगैर दवा के वापिस चले जाते हैं और दवा तो दवा उनको पानी भी नहीं मिलता है तो हमारे मंत्री जी तो गांधीवादी हैं, गांधी जी के साथ रही है, संविधान के अन्दर यह निर्देश है और अग्र्यक्ष महोदय, यहां आप के ऊपर "धर्मचक्र प्रवर्तनाय" का चक्र चलता है, अस्पताल चाहे नये खुलें या न खुलें लेकिन कम से कम जो अस्पताल अभी कायम हैं उनमें दवादारू का इन्डोस्ट तो होना ही चाहिए ?

डा० सुशीला नायर : यह बात सही है कि बिहार में आबादी के हिसाब से जितने मैडिकल कालिज होने चाहिए उतने नहीं हैं। हम आशा रखते हैं कि सरकार बिहार की अग्रणी योजना में इस तरह तबज्जह

देगी। इसी प्रकार से यह बात भी सही है कि बहुत से अस्पतालों में जो साधन सुविधा होनी चाहिए खास कर छोटी छोटी जगहों में वह मौजूद नहीं है। उसकी तरफ हम सतत ध्यान दे रहे हैं और राज्य सरकारों का भी निरंतर ध्यान दिला रहे हैं कि उसको सुधारा जाय।

**Shri Dinen Bhattacharya:** May I know whether it is a fact that in West Bengal at the present moment for want of lymph, there is a great apprehension that there will be a break-out of small pox in epidemic form and, if so, what action the Government proposes to take immediately?

**Dr. Sushila Nayar:** It is true that in some of the big cities including Calcutta Corporation area and some other municipal areas, cases of small pox have continued in spite of the campaign for universal vaccination. We have drawn the attention of the State Governments to have an intensive effort put in in these areas where deficiency has been noticed and we are giving all the help in that direction.

**Shri Dinen Bhattacharya:** I asked specifically in regard to the supply of lymph to the West Bengal Government, whether the West Bengal Government is not supplied with lymph, which is an antidote against small-pox.

**Dr. Sushila Nayar:** That is not correct; there is no shortage of lymph. We are supplying all the necessary quantity of lymph, freeze dried vaccine for this purpose.

**Shrimati Vimala Deshmukh:** Does the Government propose to open at least one medical college in the Vidharba region where there is no medical college at present?

**Dr. Sushila Nayar:** This is a suggestion for action which we will bring to the notice of the concerned State Government.

**Shri S. M. Banerjee:** I want to know whether it is a fact that the State Government of Uttar Pradesh has requested for financial aid from the Centre for opening three more medical colleges in U.P. to create more beds etc. I would like to know the reaction of Government and the financial aid likely to be given.

**Dr. Sushila Nayar:** I wish the State Government of U.P. would include more than three medical colleges in their State Plan. Whatever is included in their State Plan, they will get full assistance from the Government of India.

**Shri D. C. Sharma:** There is an all-India body which sees to it that the doctors who practice either privately or as Government servants are properly qualified. May I know if there is any all-India body which sees to it that the hospitals in India are properly staffed, properly equipped and properly looked after?

**Dr. Sushila Nayar:** So far as the qualifications of doctors are concerned, there is the Medical Council of India, which is the custodian of the standards of medical education.....

**Shri D. C. Sharma:** I have spoken of that; I want to know about hospitals.

**Dr. Sushila Nayar:** .....as well as the qualifications of those who practise medicine. So far as the standards of hospitals are concerned, it is the responsibility of the State Government under the Constitution.

**श्री तुलशीबास जाधव :** देहात में जो दवाखाने हैं, उनमें डाक्टरों की कमी है, क्योंकि वहां पर उनको तन्खाह कम मिलती है और इसलिए वे नौकरो छोड़ कर खानगी प्रैक्टिस करने चले जाते हैं। क्या सरकार ने ऐसी किसी योजना पर विचार किया है कि उन डाक्टरों को ठीक तन्खाह दी जाये, जिससे वे उन डिस्पेंसरीय में रह कर काम करें ?

**डा० सुशीला नायर :** यह बात सही है कि देहात में डाक्टर लोग जाना पसन्द नहीं करते हैं। तन्खाहें भी कम हैं और मकान बगैरह न होने से कुछ प्रसुविधा भी वहां रहती है। सभी राज्य सरकारों ने सैट्रल कोसिल में बैठ कर इस बात पर प्रस्ताव पास किये हैं कि वहां पर तन्खाहें ज्यादा भ्रच्छी होनी चाहिए और मकान बगैरह बगैरह बनाने के लिए केन्द्रीय सरकार ने कुछ सहायता देना तय किया है।

**Shri Narendra Singh Mahida:** May I know whether the Central Government encourages the opening of Ayurvedic hospitals; if so, how many hospitals are being run by the Central Government?

**Dr. Sushila Nayar:** The Central Government has nothing to do with the opening of any type of hospitals, Ayurvedic or allopathic; it is the responsibility of the State Governments.

**Shri Shinkre:** What about the hospitals in Delhi? Are they not run by the Centre? What sort of answer is this? (*Interruption*).

**Shri Narendra Singh Mahida rose—**

**Shri Shinkre:** There are so many hospitals, owned, controlled and managed by the Centre in Delhi and she says that the Centre has nothing to do with this.

**Dr. Sushila Nayar:** If a question is asked about Delhi specifically, I will be able to answer it.

**Shri Sham Lal Saraf:** The hon. Minister is aware that even today a number of posts of professors in different subjects are vacant in some of the colleges. So, what steps are being taken to provide quality teaching and up-to-date equipment in the medical colleges already opened before she launches upon new schemes of opening medical colleges?

**Dr. Sushila Nayar:** The Government of India is doing everything

possible to enhance and increase post-graduate training facilities and for that purpose, besides the All India Institute of Medical Sciences, we have started a second institute at Pondicherry. We propose to open some more as soon as the Finance Ministry clears the proposal.

**श्री भोकार लाल बेरवा :** जिन इलाकों में टीके लगाए गए हैं, वहां भी चेचक की महामारी का जोर ज्यादा है। राजस्थान में कोटा, बीकानेर, उदयपुर में 559 बच्चे इन तीन महीनों में मर चुके हैं। मैं यह जानना चाहता हूँ कि क्या वहां पर चेचक के टीके नहीं लगाए गए हैं, अगर नहीं लगाए गए हैं, तो क्यों नहीं लगाए गए हैं और अगर लगाए गए हैं, तो किन किन एरियाज में लगाए गए हैं।

**डा० सुशीला नायर :** राजस्थान में भी चेचक के टीके लगाने का अभियान तो जारी है। अगर किसी खास जगह पर कमी रह गई है और माननीय सदस्य उसके बारे में मुझे जानकारी देंगे, तो मैं स्टेट गवर्नमेंट से उसके बारे में बातचीत करूंगी।

#### Power Generation at Hirakud

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- \*1102. **Shri Bhagwat Jha Azad:**  
**Shri M. L. Dwivedi:**  
**Shri S. C. Samanta:**  
**Shri Subodh Hansda:**  
**Shri P. C. Borooah:**  
**Shri D. N. Tiwary:**

Will the Minister of Irrigation and Power be pleased to state:

(a) whether the shortfall in power generation at Hirakud is likely to continue still further;

(b) if so, the reasons therefor;

(c) whether the State Government have asked for any technical or other assistance to obviate the continuing shortage and resultant loss to them; and

(d) if so, the reaction of Government thereto?

**The Minister of State in the Ministry of Irrigation and Power (Shri K. L. Rao):** (a) to (d). A statement is laid on the Table of the House.

#### Statement

(a) and (b). Two factors have been responsible for reduced power generation at Hirakud. One is the poor post-monsoon inflows into the Hirakud reservoir (since October, 1965), as compared to the normal years. The other factor is the need, in the context of the present food shortage, to accord priority to releases of water for second crop irrigation.

The short-fall in power generation will continue till the onset of the next monsoon.

(c) and (d). The State Government had approached the Central Water and Power Commission for arranging bulk Supply of power from DVC to mitigate the power shortage. The Central Water and Power Commission have arranged for supply of 7.5 MW. from the DVC to Orissa which is being drawn by them since 6th February, 1966.

**Shri Bhagwat Jha Azad:** Could we know as to what was the percentage of shortfall in this particular case in this year?

**Dr. K. L. Rao:** This year there is a shortfall of 25 per cent in Hirakud generation.

**Shri Bhagwat Jha Azad:** May I know whether, in view of this huge expenditure on this, we have ultimately to depend upon monsoons to have the full power generation or has this technical Minister any other media by which when the monsoons fail, the electricity should not fail?

**Dr. K. L. Rao:** This is one of the biggest reservoirs that we have in the country, and also Orissa is very fortunate in having coal deposits and in the course of next year we will