SHRI P.C. CHIDAMBARAM: Sir, I introduce the Bill.

MR. DEPUTY SPEAKER: The House is now adjourned for lunch to meet again at 14.45 hrs.

The Lok Sabha then adjourned for Lunch till Forty Five Minutes past Fourteen of the clock

The Lok Sabha re-assembled after Lunch at fory-eight minutes past Fourteen of the Clock.

[MR. DEPUTY SPEAKER in the Chair]

[English]

MR. DEPUTY SPEAKER: The House shall now take up Matters under Rule 377. Shri Sharat Chandra Pattanyak.

MATTERS UNDER RULE 377

(i) Need to formulate special schemes to provide drinking water and irrigation facilities in Bolangir district, Orissa.

[English]

SHRI SARAT **CHANDRA** PATTANAYAK (Bolangir): Sir, the people of Bolangir Parlimentary Constituency in Orissa depend on the river Mahanadi and village ponds for drinking-water and irrigation facilities. Due to erratic rainfall, the streams dry up and people as well as animals are left on nature's mercy for survival. Though the ground water level in this region is inaccessible due to lack of any initiatives, the area is the worst sufferer in respect of drnkingwater and irrigation facilities. Therefore, Accelerated Rural Water Supply Scheme (ARWSS) should be initiated phase-wise in the blocks of Bolangir district and Urban Water Supply and Management Scheme should be implemented in Bolangir, Titlagarh, Sonepur and Kantabanii areas.

(ii) Need to enlist 'Voddar' community as Scheduled Caste/ Scheduled Tribe.

SHRI ANANTHA VENKATA REDDY (Anantpur): Mr. Deputy Speaker, Sir, Vodde, Voddera, Vaddila are the different names of Voddar Community whose main occupation, from time immemorial, had been digging wells, excavating canals, digging earth, cutting stones and construction works ranging from houses to dams. Poverty had been alling this community, educationally, culturally and financially. This community is very poor and its position is not better than the present Scheduled Castes people.

It is learnt that Central Government intends to introduce the Scheduled Castes and the Scheduled Tribes (Amendment) Bill to have a real look into the fate of various communities and in fitting cases, to include them in the SC or the ST List.

These communities have already been listed as the Sechuled Castes in six States, that is, Karnataka, Kerala, Madhya Pradesh, West Bengal, Bihar and Gujarat. The same status may be extended to them in Andhra Pradesh also.

I, therefore, request the Central Government to include the above said communities in the List of the Scheduled Castes or the Scheduled Tribes.

> (iii) Need to take steps for checking infant mortality rate in the country, particularly, in Orissa.

SHRI GOPI NATH GAJAPATHI (Berhampur): Mr. Deputy Speaker, Sir, I wish to bring in the following matter of urgent public importance, under Rule 377.

It is a matter of great concern that the infant mortality rate has been increasing in the country. It is the highest in Orissa—one infant dies every three minutes. According to an estimate infant mortality rate in Orissa was 177 per thousand in urban areas and 126 in rural areas.

^{*} introduced with the recommendation of the President.

There are many reasons for the increasing rate of infant mortality, such as teenage marriages, frequent child births, infrequent ante-natal checks and anaemia. Besides 70 per cent of the child birth takes place in a very unhygenic conditions, particularly in rural areas. Asphyxia in babies has been a major killer leading to life-long morbidity.

While the infant mortality rate has registered a fall in the past three decades in most of the developing countries including India, it is unfortunate that Orissa has lagged behind other States. Unless immediate steps are taken by the Paediatricians to check the infrant mortality rate, the objective of the "Child Survival and Safe Motherhood Programme" cannot be achieved, they should be engaged in the rural areas to work relentlessly for the eradication and control of childhood diseases.

As such, I urge upon the Central Government to pay special attention for checking the Infant mortality rate particularly in Orissa.

> (iv) Need to set up a power sub-Station at Padrauna in Deoria district, U.P.

[Translation]

SHRI RAM NAGINA MISHRA (Padrauna): Mr. Deputy Speaker, Sir, I would like to draw the attention of the Central government towards Uttaranchal of Deoria District of Uttar Pradesh. Narayani river flows into Uttar Pradesh via Nepaland Bihar. This area is affected badly by floods every year. There is acute scarcity of roads. The area has faced terror of the Jungle party for long. Every now and then there are incidents of dacolty, murder and kidnapping. The villages of Uttar Pradesh located on Nepal and Bihar border are facing acute shortage of electricity. The villagers are undergoing great hardship due to power shortage. The absence of electricity and roads, the jungle Party has got an easy access to the villages and as a result of it, incidents of kidnappings and dacoities have

become a common thing. It is impossible to provide electricity to the inhabitants of the villages without assistance from the Centre. There is not a single power sub-station in the north of Kushi city for a distance of upto hundred kms.

Prior to this, our hon. Energy Minister got an electricity sub-station set up at Salempur, Sikanderpur, Rajapaked. Keeping in view the conditions prevailing in Padrauna, I urge upon the Central Government to set up a big power sub-station at Padrauna also. All the same, arrangements to provide grants may be made to provide electricity connections to the villages situated on Bihar and Nepal border.

(v) Need to drop the proposal for establishing a Medical and Health Education Commission.

[English]

DR. GUNVANT RAMBHAU SARODE(Jalgaon): Mr. Deputy Speaker, Sir, I wish to raise the following matter under Rule 377:

There is a growing concern in the field of medical education in the country while there is growing unemployment and underemployment among doctors. The Government of India has been repeatedly assuring that no more medical colleges would be opened in the country. But in many states especially in Maharashtra and Kamataka, a number of medical colleges charging high capitation fees have been opened with the approval of the State Government. The I.M.C. (Amendment) Bill, 1988 is awaiting consideration of the Parliament for giving more powers to Indian Medical Council. It is learnt that the Government of India is planning to establish a medical and health education commission to deal with functioning of medical institutions which would seriously erode the power and function of Indian Medical Council. The Indian Medical Association has strongly opposed the above move.

The matter may be looked into.