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Title : Statement regarding reported cases across the world and in India of Novel Coronavirus (COVID-19) and steps taken by Government of India.

THE MINISTER OF HEALTH AND FAMILY WELFARE, MINISTER OF SCIENCE AND TECHNOLOGY AND MINISTER OF EARTH SCIENCES (DR. HARSH VARDHAN): Mr. Chairman, Sir, in continuation of the statement made by me in Rajya Sabha on 7th February and Lok Sabha on 10th February, I would further like to update the hon. Members on the present situation related to the outbreak of novel Corona Virus Disease and the actions taken by the Government of India.

As mentioned earlier, Coronaviruses are large group of viruses that cause illness in humans and animals. Rarely, animal corona viruses can also evolve and infect people and then spread between people as has been seen with Severe Acute Respiratory Syndrome (SARS) in 2003 and Middle East Respiratory Syndrome (MERS) in 2014.

Since reporting of an outbreak of Novel Coronavirus on 31st December, 2019 in China, a large number of cases have been reported across all provinces of China and other parts of the world including India. WHO has named the novel coronavirus disease as COVID-19.

As on 4th March, a total of 80,270 confirmed cases and 2,981 deaths have been reported in China. Though the daily confirmed cases and deaths have shown a downward trend in China, still new cases are

being reported from Hubei province and Wuhan city, the epicentre of the outbreak. A total of 12,857 confirmed cases and 220 deaths have been reported outside China from 78 countries (including Hong Kong, Macao and Taiwan). Among these, 30 countries have reported local transmission.

World Health Organization (WHO) has declared this outbreak as a “Public Health Emergency of International Concern” (PHEIC) on 30th January, 2020 and raised the level of global risk to “very high” on 28th February, 2020. Though WHO has not declared COVID-19 to be pandemic, it has asked the countries to remain prepared. It is worth highlighting that India initiated required preparedness and action at field level since 17th January itself, much before the advice from WHO.

Once a person is exposed to the infection, the disease may develop anytime between 1-14 days. The main symptoms of novel corona virus disease are fever, cough, and difficulty in breathing. All suspected or probable cases of COVID-19 must be treated in isolation with barrier nursing and universal precautions to prevent further spread of disease.

In our country, as on 4th March, a total of 29 positive cases have been reported so far. Of these, 3 cases were reported in Kerala earlier, who have since recovered and have been discharged already. Since last 3 days, new travel related cases have tested positive. These include one in Delhi (having travel history of Italy) and Telangana (having travel history from Dubai and contact history from person in Singapore). Both are clinically stable. Six more cases have tested positive in Agra, Uttar Pradesh having contact history with the case in Delhi. Required action

as per Cluster Management plan has been initiated. Further, an Italian Tourist and his wife have tested positive in Rajasthan. 14 other accompanying tourists in this group and their Indian bus driver tested positive on their return to Delhi. All of them are reported stable. A recent positive case has also been reported in Delhi yesterday (having travel history from Italy) and is stable.

The ever-increasing magnitude of this outbreak globally calls for a concerted effort by not only the Health Department but all sectors of the Government. The hon. Prime Minister is personally monitoring the preparedness and response on a regular basis. The Government of India has initiated a series of actions to prevent entry of the disease and to contain it. I am daily reviewing the situation. A Group of Ministers consisting of Minister of External Affairs, Minister of Civil Aviation, Minister of State for Home Affairs, Minister of State for Shipping, and Minister of State for Health and Family Welfare chaired by me, has been constituted to monitor the situation. The Group of Ministers has met four times since its inception on 3rd February, 2020. The Cabinet Secretary is taking regular reviews with all related Ministries of Health, Defence, External Affairs, Civil Aviation, Home, Textile, Pharma, Commerce and other officials including with State Chief Secretaries. My own Ministry is constantly reviewing the evolving scenario. Video Conferences are being held with States every other day.

The Government of India has also taken several measures to control the risk of novel Coronavirus infection spreading to India. Our first Travel Advisory was issued on 17th January, 2020, and as situation is evolving, the Travel Advisories are accordingly getting revised. Presently, it prescribes:

. All Regular Visas/e-Visas (including Visa on Arrival for Japan and South Korea) granted to nationals of Italy, Iran, South Korea, Japan and issued on or before 3rd March, 2020, and who have not yet entered India, stand suspended with immediate effect;

. Regular Visas/e-Visas granted to nationals of People Republic of China, issued on or before 5th February, 2020 were suspended earlier. It shall remain in force.

. Regular Visas/e-Visas granted to all foreign nationals, who have travelled to People's Republic of China, Iran, Italy, South Korea and Japan on or after 1st February, 2020, and who have not yet entered India, stand suspended with immediate effect.

. Diplomats, officials of UN and other International Bodies, OCI cardholders and Aircrew from above countries are exempted from such restriction on entry. However, their screening at point of entry is compulsory.

. Passengers of all international flights now entering into India from any port are required to furnish duly filled self-declaration form (including personal particulars i.e., phone No. and address in India) and travel history, to Health officials and Immigration officials at all the ports.

. Indian citizens are advised to refrain from travel to China, Iran, Republic of Korea, Italy and Japan and are also advised to avoid non-essential travel to other COVID-19 affected countries.

. Screening of passengers was initiated in the country since 18th January, 2020. Initially airports at Delhi, Mumbai, Chennai, Kolkata,

Bengaluru, Hyderabad and Kochi were covered and subsequently, it was expanded in a total of 21 airports. As per the evolving situation, initially Universal Screening was taken up for all passengers coming *via* direct flights from China, South Korea, Japan, Iran, Italy, Hong Kong, Vietnam, Malaysia, Indonesia, Nepal, Thailand and Singapore. Since yesterday, directions have also been issued for Universal Screening for all international passengers coming in the country. Signages have been displayed at prominent places in airports and ports. In-flight announcements are being made and self-declaration forms are being filled up by all passengers. As on 4th March, a total of 6,241 flights have been screened covering a total of 6,11,167 passengers. Teams of Specialist doctors were sent to all the airports to ensure effective screening and arrangements for isolation in the attached hospitals.

Screening of passengers has also been initiated in 12 major seaports and 65 minor ports in the country to identify passengers & crew coming from China and to isolate them in case they are found symptomatic. As on 4th March, 16,076 persons have been screened at the ports.

Government has initiated screening in all integrated check posts with bordering countries in collaboration with States of UP, Uttarakhand, West Bengal, Sikkim and Bihar and Seema Shastra Bal (SSB) and Land Port Authorities. Gram Sabhas have been conducted in villages adjoining the borders to create awareness amongst people about the disease and precautions to be taken in collaboration with Panchayati Raj Ministry. Eight Central Teams visited the bordering villages in States of UP, Uttarakhand, West Bengal, Sikkim and Bihar to review the activities at the border crossing, the conduct of Gram Sabhas and risk communication to the community. A total number of 3,823 Gram Sabhas

have been conducted and 11, 20,529 people have been screened at the border check posts till now.

In view of the continuing lock down of the Hubei Province in China, the Government of India decided to evacuate the Indian students and other professionals working in Wuhan and neighbouring cities in the Hubei Province. In a coordinated operation with Ministry of Civil Aviation, Air India, Ministry of Health and Family Welfare, two Special Air India flights were operated between Delhi and Wuhan on 31st January and 1st February 2020 that brought back a total of 654 passengers that included 647 Indian citizens (including two Indian Embassy officials who were on the ground in Wuhan to coordinate the evacuation operation) and 7 Maldivian nationals. These evacuees were kept in Army Quarantine Centre at Manesar and ITBP Camp at Chhawla. All these evacuees were tested after 14 days and on being found negative, discharged on 18th February 2020.

Further, Indian Air Force, on 26th February 2020 had evacuated a total of 112 people from Wuhan, which included 76 Indians and nationals from Myanmar, Bangladesh, Maldives, China, South Africa, USA and Madagascar. The evacuees reached Delhi on 27th February morning and are kept at ITBP camp for quarantine for a period of 14 days as per protocol. I am happy to inform that they have all tested negative so far and are stable. This flight also had carried Personal Protective Equipments, disposables and medical equipments which was given as a good-will gesture to China from Indian Government.

The Indian Embassy and Consulates are also in regular contact with the Indian Community in other parts of China and is keeping a constant

track of their well-being.

Another evacuation was successfully carried out by Air India, by bringing back 124 people on 27th February morning including 5 foreign nationals who were aboard the COVID-19 infected Cruise Ship Diamond Princess from Port of Yokohama, Japan. They are kept in Army Facility at Manesar for 14 days quarantine presently. I am happy to highlight that even these evacuees have tested negative and are stable.

Regular surveillance has been initiated across the country for all cases having travel history from all major COVID-19 affected countries and for people having contact with such persons and having fever, cough or breathlessness. Through Integrated Disease Surveillance network all such persons are tracked and as on 4th March, a total of 28,529 persons were brought under community surveillance and are being regularly monitored throughout the country.

The State Surveillance Officers, District Surveillance Officers and rapid response teams of health professionals under the leadership of State Health Secretaries are monitoring all such people on a daily basis. Sufficient isolation beds have been made available in the tertiary facilities across the country to manage any outbreak.

Ministry has also issued guidelines to support States on surveillance and contact tracing, surveillance at Points of Entry, laboratory samples collection, packaging and transport, clinical management protocol and infection prevention and control in healthcare facilities. To ensure availability of critical items like Personal Protective Equipment (PPE) & N95 masks, the export of the same was also

restricted. A buffer stock of personal protective equipment & N95 masks is maintained by the States as well as by the Union Government.

National Institute of Virology, Pune is the nodal laboratory. As part of ICMR's preparedness for emerging/re-emerging infectious disease, NIV, Pune has established capacity for molecular diagnosis of COVID-19. Next generation sequencing is also established. Testing of clinical samples has also been initiated in 15 more laboratories. Another 19 laboratories are being prepared to test samples to ensure adequate geographical spread across the country. The network is being further expanded.

Risk communication material has been prepared and is widely disseminated even in regional languages through the States. Required awareness in community is ensured through technical briefings by experts in radio and television. Daily Press briefing is being held by the Ministry of Health and information is being shared through social media. A 24X7 Control Room is operational with call centre number as 011-23978046. So far, more than 9200 calls have been attended including 667 international calls.

The Government of India is in regular touch with the World Health Organisation Headquarters, regional office and country office to get updates on the evolving scenario.

Our focus is on adherence to core capacities for disease preparedness and response which include surveillance, laboratory diagnosis, hospital preparedness, logistics management, capacity building of healthcare staff and risk communication to the community. The scale and extent of our interventions have increased in alignment

with the evolving situation of COVID-19 across the world and India in particular.

With the increasing global spread of the disease, we are confronted with new challenges. The contact tracing of positive cases requires tracing of hundreds of contacts in multiple locations and monitoring their health. Similarly, the cases in Agra being transmitted to family members by the confirmed case has necessitated putting up a containment plan to contain the cluster of cases in Agra.

Another major area of concern is Indian pilgrims and students stranded in Tehran and Quam, Iran, epicentres of the Iran COVID-19 outbreak. The Government of India is following up with Iran authorities for their well-being and to tie up evacuation as per the need.

In addition to manage travel related cases, additional challenge is to contain clusters due to local transmission that requires highly resource intensive containment operations. We have provided the Containment Action Plan to all the States. A national level training workshop has been planned for all the States and hospitals from other Ministries on COVID-19 management on 6th of March, 2020 which will then be taken up to the district level. Senior officers of the Ministry have been deputed to States and UTs to review their preparedness and provide required guidance in the containment efforts.

We have designated the District Collector as the nodal officer at the field level for containment operations. States have been guided in terms of identifying containment zone, buffer zone and preparation of micro plan to ensure effective active and passive surveillance and contact tracing through inter-disciplinary teams in the areas where cases are located.

I want to inform this House that the Government is taking all necessary measures to prevent the spread of the COVID-19 in India. I seek the cooperation of all the Members of the House in creating awareness about the disease and informing the countrymen about the various preventive steps that they need to take. Thank you.

माननीय सभापति (श्री राजेन्द्र अग्रवाल): माननीय मंत्री जी ने काफी विस्तृत वक्तव्य दिया है।

...(व्यवधान)

श्री अधीर रंजन चौधरी (बहरामपुर): आप मना करेंगे तो हम नहीं बोलेंगे। ...
(व्यवधान)

माननीय सभापति: अधीर जी, आप मेरी बात तो पूरी होने दीजिए। मैंने मना कहाँ किया है?

...(व्यवधान)

माननीय सभापति: अखिलेश जी, बालू साहब, आप बैठ जाइए।

...(व्यवधान)

HON. CHAIRPERSON: Please sit down. I will just allow you to speak.

....(Interruptions)

माननीय सभापति: अधीर जी, आप सुनिए तो सही। आप मुझसे बेहतर नियमों को जानते हैं।

...(व्यवधान)

माननीय सभापति: माननीय मंत्री जी के वक्तव्य के पश्चात् सामान्यतः चर्चा की अनुमति नहीं होती है, परंतु विशेष महत्व का मसला है, इसलिए मैं कुछ माननीय सदस्यों को सुझाव के रूप में अपनी बात कहने की अनुमति दे रहा हूं। आप अपनी बात संक्षेप में रखिए। एक मिनट या मैक्सिमम दो मिनट में अपनी बात रखिए।

...(व्यवधान)

HON. CHAIRPERSON: No reply or response will be given by the hon. Minister. You can only give suggestions and seek queries whatever you want.

....(Interruptions)

माननीय सभापति: अधीर रंजन जी।

श्री अधीर रंजन चौधरी (बहरामपुर): माननीय सभापति जी, हम चर्चा में भाग ले सकते हैं, इसीलिए मैं भाग ले रहा हूं। सदन में यह प्रेक्टिस नहीं है, मैं जानता हूं, राज्य सभा में है, लोक सभा में नहीं है।

माननीय सभापति: आप बोलिए। आप अपने सुझाव दीजिए।

...(व्यवधान)

श्री अधीर रंजन चौधरी (बहरामपुर): माननीय सभापति जी, बात यह है कि SARS-CoV और MERS-CoV से परिचित हैं, यह नया कोविड-19 आ गया है। यह हमारे लिए नई समस्या पैदा कर रहा है। यह जेनेटिक बाए नेचर है। इससे हिंदुस्तान के लोग परिचित नहीं हैं इसलिए जहां कोरोना वायरस की बात उठती है, हड़कंप मच जाता है। आपको सबसे पहले यह देखना चाहिए कि कोरोना वायरस को लेकर किसी भी हालत में अफवाह न फैलाई जाए। अफवाह के कारण बड़ी हानि होने की संभावना होती है।

आप प्रिवेंटिव मीजर्स की बात कहते हैं, हमें सबसे बड़ा प्रिवेंटिव मीजर लेना चाहिए, अब मास्क बाजार से गायब होने लगे हैं। आपको पेरासीटामोल दवा

का बड़ा जमावड़ा करना होगा। सबसे बड़ी बात है कि रेस्पिरेटरी हाइजीन की लोगों को जानकारी नहीं है। टीवी में कहते हैं कि सेनीटाइजर यूज़ करो, हर वक्त हाथ धोने के लिए साबुन और पानी यूज़ करो। हिंदुस्तान के लोग इसके आदी नहीं हैं। सेनीटाइजर कितने लोगों के पास है, मुझे इसकी जानकारी नहीं है, खासकर मेरे पास तो नहीं रहता है। साबुन, पानी और सेनीटाइजर हर गांव में मुहैया कराने के लिए आपको कुछ तो कार्रवाई करनी पड़ेगी।

आप बाहर से आने वाले लोगों के लिए एयरपोर्ट पर स्क्रीनिंग करते हैं, लेकिन हिंदुस्तान के बॉर्डर तो लोग लैंड से भी क्रॉस करते हैं। आप गांव-गांव में नियोजित करते हैं, डिप्लाय करते हैं, अच्छा है, लेकिन पंचायत में इस तरह की सुविधा मुहैया कराने के लिए क्या कर रहे हैं? साथ-साथ मैं सलाह दूंगा कि आप वायरोलॉजी टेस्ट की बात कर रहे हैं, इसकी सुविधा हर डिस्ट्रिक्ट में होनी चाहिए। आप एक हैल्पलाइन भी तैयार कीजिए।

हमारे लिए कोरोना वायरस एक एलियन डिजीज़ आ गई है। यह दुनिया में 60 देशों में फैल रही है। सबसे पहली बात यह है कि हिंदुस्तान 130 करोड़ वाली आबादी वाला देश है। यहां दूरदराज़ गांवों में लोगों को कैसे पता चलेगा? सबसे बड़ी बात है कि बच्चों की सुपरविजन बहुत जरूरी है। हमारी तो उम्र हो गई है, हम तो जानकारी ले लेते हैं, लेकिन बच्चों के सिम्पटम्स को समझने के लिए आपकी तरफ से मैसिव और इन्टेन्सिव कैम्पेनिंग होनी चाहिए। ...(व्यवधान) वल्लरेबल एरिया आइडेंटिफाई करना चाहिए। वल्लरेबल एरिया में मैसिव और इन्टेन्सिव कैम्पेनिंग होनी चाहिए, खास कर बच्चों पर ज्यादा ध्यान देने की जरूरत है।

दवाई, मास्क, सेनीटाइजर और रेस्पिरेटरी हाइजीन के विषय पर पूरा कैम्पेन होना चाहिए, जागरूकता होनी चाहिए। हमारे नेता राहुल गांधी जी सरकार को पहले ही सतर्क कर चुके थे कि इस तरह के हालात पैदा होंगे।

HON. CHAIRPERSON : Kanimozhi ji, please try to be brief.

Conclude within a minute.

... (*Interruptions*)

SHRIMATI KANIMOZHI KARUNANIDHI (THOOTHUKKUDI):

Sir, the Minister, in his Statement, has clearly told us that they have been warned of this in the month of January and that they have taken a lot of steps in this regard. I congratulate him for that. He has also mentioned that there is only one Virology Institute in the whole country, which is in Pune. I think it is not sufficient because it is a global epidemic. It is an international threat. We should have this Institute at least in different zones of the country. I think they had adequate time to establish that and they should have done that.

I would like to say one more thing. Hospital management is within the cities. Quarantining of patients is done within the city hospitals. As you are aware, this is the most transmissible disease compared to MERS and SARS. This is much more transmissible. So, taking the patients inside the city and quarantining them inside the hospitals is not a right move. I think you should have the required medical facilities closer to the airports where they can be screened and other aspects of hospital management can be carried out.

I think thermal screening is not available in most of the airports. It is not there at all. I have gone myself to the airport to receive people who came from abroad. Thermal screening was not done there. I think that has to be done. The swab test is also not being conducted. Rather than having thermal screening, they are asking the people who are coming back from foreign countries to reveal where all they have travelled on their own. I think that will not be sufficient.

I also think that masks are not available. There is a panic among the people all over the country that masks and medication are not

available in adequate quantity. Thank you.

PROF. SOUGATA RAY (DUM DUM): It is good that the House, after a four-day hiatus, has gathered in peace to discuss a serious matter affecting the health of the people. COVID-19 or the Coronavirus Disease is a new one. Earlier, we had the problem of Ebola virus. This Coronavirus originated from Wuhan in China and has now spread to Iran, Italy, South Korea, etc.

माननीय सभापति : सौगत बाबू आप सुझाव दीजिए। हिस्ट्री में क्यों जा रहे हैं।

प्रो. सौगत राय : आप तो पहले इतना इम्पेशनट नहीं थे। मैं आपको बहुत दिनों से जानता हूँ।

माननीय सभापति: मैं अभी भी नहीं हूँ।

प्रो. सौगत राय : आप धीरज क्यों खो रहे हैं। अच्छा हो रहा है। हाउस शांति से चर्चा चल रहा है। कृपया आप इसमें टिप्पणी मत कीजिए। मैं शॉर्ट में खत्म कर दूंगा।

Viruses are something which are very small. They cannot be seen with naked eye. ...(Interruptions) Viruses cannot be seen under microscope. They can be diagnosed only under electron microscopes. So, there is no cure to any viral disease. You can do only symptomatic treatment. One can only try to contain the disease by avoiding physical contact. Do not shake hands. Keep a three-foot distance. Cover your eyes, mouth and nostrils. So, these are things which have to be communicated to the people.

I suggest to the Minister that in every TV channel and radio, there should be a 15-second clip to advise the people not to panic. There is a

great panic throughout the country. But so far only 29 people out of 130 crore of population have been positively diagnosed. So, compared to other countries, in our country the situation is still under control. The Government of India has taken certain steps, especially with regard to airports and land ports. But as Shri Adhir Ranjan Chowdhury had mentioned, ours is a long and porous border and Wuhan in China is rather close to us.

माननीय सभापति : मैं माननीय सदस्यगण से यह अनुरोध कर रहा हूँ कि यह चर्चा नहीं हो रही है। ऑनरेबल मिनिस्टर ने स्टेटमेंट दिया है, उस पर आपको सुझाव देना है। Please be pointed and be brief. That is all.

...(व्यवधान)

प्रो. सौगत राय : सर, मेरा सुझाव समाप्त हो गया है। कोरोना वायरस से फीवर होता है, कफ होता है और कफ से ड्रॉपलैट्स निकलती हैं। So, you have to advise the people not to shake hands, keep a three-feet distance, not to step on the droplets etc.

श्री अरविंद सावंत (मुम्बई दक्षिण): माननीय चैयरमेन सर, माननीय मंत्री जी ने विस्तृत रूप में स्टेटमेंट दिया है, उसके लिए मैं उनका अभिनन्दन करता हूँ। उन्होंने बहुत डिटेल में बताया है। इसमें समाधान की बात यह है कि अभी तक इससे सिर्फ 28 लोग ही पीड़ित हैं। इसलिए डर नहीं लग रहा है फिर भी यह डर दोनों तरफ से पैदा हुआ है। मैं एक रिक्वेस्ट करने के लिए खड़ा हुआ हूँ। खासकर उनके लिए जो भारतीय दूसरे देशों में फंसे हुए हैं, उनके परिवार यहां पर पेनिक हैं। उनकी वहां पर क्या स्थिति है, यह समझ में नहीं आ रहा है। ईरान में लगभग एक हजार से भी ज्यादा लोग फंसे हुए हैं तो सरकार उनको अपने देश में लाने के लिए क्या कदम उठा रही है, इसकी जानकारी उनके परिवार के लोग भी चाहते हैं। आपने अपने स्टेटमेंट में कहा है कि हमने उनकी तरफ ध्यान देने के लिए ईरान में बात की है, लेकिन वे वापस कब आएंगे, इसकी चिंता बहुत से लोगों को है। इस पर सरकार क्या कदम उठा रही है? कनिमोजी जी ने वायरोलॉजी के

लिए भी कहा है तो यह बहुत इम्पोर्टेंट है। इसका देश में एक ही इंस्टिट्यूट है अगर देश में और भी होंगे तो अच्छा होगा।

SHRI KANUMURU RAGHURAMA KRISHNARAJU

(NARSAPURAM): Thank you, Chairman, Sir, for giving me an opportunity to talk on this important subject, which is shaking the whole world.

In this regard, of course, majority of the things have already been cleared by our hon. Minister. What I would like to submit here is that all our traditional Hindu culture, for example, not to shake hands, do *namaste* etc. have to be demonstrated ...*(Interruptions)* and also *adab* ...*(Interruptions)* These are all very good habits ...*(Interruptions)* All the Indian culture has to be clearly demonstrated and let there be advertisement on this ...*(Interruptions)*

श्री कौशलेन्द्र कुमार (नालंदा): माननीय सभापति महोदय, माननीय मंत्री जी ने कोरोना वायरस पर अपनी बात रखी है, उसके लिए आज पूरा देश चिंतित है। माननीय मंत्री जी ने हर बात को विस्तार से रखा है, मैं उसके लिए उनको बधाई देता हूं। इससे पूरा देश चिंतित है। आज लोगों में भय व्याप्त है। मेरा एक ही सुझाव होगा कि पंचायत स्तर से लेकर जिला स्तर तक इसका कोई ना कोई समाधान निकलना चाहिए। जहां पर भी इसके बारे में पता चले, वहां पर उसको तुरन्त पकड़ने का प्रयास होना चाहिए। आज हमारे देश के प्रधान मंत्री जी भी चिंतित हैं। मैं माननीय मंत्री जी को बधाई देता हूं कि अन्य देशों से पहले आज हमारे मंत्री जी चिंतित हैं।...*(व्यवधान)*

SHRI BHARTRUHARI MAHTAB (CUTTACK): Mr. Chairman, Sir, we have got a very exhaustive statement from the hon. Health Minister relating to the preparedness of our country and also what is happening outside.

For the last two or three decades, virus has become more pandemic and the earlier diseases that were actually affecting the human race have subsided to a very great extent because of the exploration that has been made through medical science.

A number of viruses has affected our country. Indian scientists were also praised throughout the world when Ebola affected large parts of Africa.

Today, I would like to impress upon the Government that they should disseminate information about the exploration our medical scientists are making to mutate the virus, which has caused this terrible disease throughout the country.

We are told that by month of May adequate medicine will be tested and also brought out in the market. But the panic that has been created throughout the world and also in our country is this. Is this virus only confined to the winter season? If it is going to have similar or same effect also in summer, then there would be no end to it.

What has been also stated is that this virus effects in a major way those people who are above 60 years. The children are seldom affected.

PROF. SOUGATA RAY : Children are also affected. It is children and old people.

SHRI BHARTRUHARI MAHTAB : Yes, but it is very miniscule. When you have a Professor sitting next to you, then you have lot of suggestions also coming, but they should go to the Government.

Here, I would also like to mention that screening of international passengers at airports is a necessity. We have a screening facility in

Delhi also, but all airports that have international flights including Bhubaneswar should have screening facilities as well as quarantine facilities. When I travelled to Africa, at that time I was quarantined before I went there. I was asked to take an injection, and I was quarantined near the Delhi airport.

PROF. SOUGATA RAY: It was for Yellow Fever.

SHRI BHARTRUHARI MAHTAB : Yes, it was for Yellow Fever.

Now, again you have made a point.

But my suggestion is that quarantine system -- as has been suggested by hon. Member from DMK -- should not be done in a medical college or medical facility that is available today where large number of patients / people visit. It should be exclusive as it was done in Haryana when Indians came from Wuhan, China.

Therefore, my earnest request is that you should also take the State Governments along with you; give them advisory; and also provide certain amount of funding so that they can help in eradicating this disease.

श्री रितेश पाण्डेय (अम्बेडकर नगर): धन्यवाद, अधिष्ठाता महोदय। कोविड-19 का जो प्रकोप हमारे देश में फैल रहा है, यद्यपि वह दुखद है, लेकिन सरकार ने इसका संज्ञान लेकर आज संसद में इस पर विस्तार से अपना वक्तव्य दिया है, इसके लिए मैं मंत्री जी को धन्यवाद देता हूँ।

मान्यवर, मेरे दो-तीन सुझाव हैं, मेरा अनुरोध है कि सरकार इनको गंभीरता से ले। अभी मास्क की बात हुई थी और यह भी बताया गया है कि सरकार ने उसका एक्सपोर्ट रोक दिया है, लेकिन उसके दाम कंपनियां अपने आप बढ़ाती चली जा रही हैं। जो मास्क 15 रुपये में मिलता था, आज वह 500 रुपये में मिल रहा है। उसके साथ-साथ, जो हैंड सैनिटाइजर की बात हो रही है, साबुन आदि चीजों

की बात हो रही है, उनके भी दामों पर अच्छी निगाह रखी जाए। जो हैण्ड सैनिटाइजर 50 रुपये या 150 रुपये में मिलता था, आज वह 500 रुपये का मिल रहा है। यहां पर कुछ कंपनियां इकोनोमिक अपॉर्चुनिटी देखकर, इस प्रकोप का फायदा उठाकर अपनी जेबें गरम करना चाहती हैं। मेरा सरकार से अनुरोध है कि इस पर खास निगाह रखी जाए, क्योंकि जो इस देश के सबसे गरीब लोग हैं, अगर उनमें यह फैलता है तो बहुत तेजी से फैलेगा और उनको ये सुविधाएं देना जरूरी है।

खास तौर से, उत्तर प्रदेश के बारे में मेरा एक अन्य सुझाव है। उत्तर प्रदेश में छः लोग इससे ग्रसित हुए हैं। मेरा निवेदन है कि उत्तर प्रदेश में लखनऊ एयरपोर्ट पर भी थर्मल स्क्रीनिंग लगाई जाए और वहां पर वायरोलॉजी का एक सेंटर खोला जाए। साथ ही, हरेक मेडिकल कॉलेज में ऐसा सेंटर होना चाहिए। मेरा सरकार से यही अनुरोध है। धन्यवाद।

HON. CHAIRPERSON: I would again and again request all of you to be brief.

श्री नामा नागेश्वर राव (खम्माम): धन्यवाद, चेयरमैन सर। अभी ऑनरेबल मिनिस्टर साहब ने काफी डिटेल के साथ बताया है कि सेंट्रल गवर्नमेंट ने क्या-क्या एक्शन्स लिए हैं और किस तरह से इसकी मॉनीटरिंग कर रहे हैं। उन्होंने बहुत अच्छी तरह से पूरे हाउस को बताया है और हाउस के थ्रू पूरे देश को बता दिया है, उसके लिए मैं सबसे पहले ऑनरेबल मिनिस्टर साहब को धन्यवाद देता हूं। आज वायरस के बारे में मेरा एक क्वेश्चन था, उसके बारे में एक्सटर्नल अफेयर्स मिनिस्टर ने रिप्लाई दिया है।

उस रिप्लाई में और माननीय मंत्री जी के उत्तर में कुछ डिफरेंस है। जापान, यूएई में आलरेडी अफेक्टेड लोग हैं। उन लोगों को अभी तक इंडिया में लेकर नहीं आए हैं। माननीय मंत्री जी उन अफेक्टेड लोगों के बारे में थोड़ा बता दें।

महोदय, इसके साथ-साथ मेरे तीन-चार वेल्युएबल सुझाव हैं। आपने बीफ्रिंग में बताया था कि स्पेशल इक्विपमेंट्स और क्रिटिकल इक्विपमेंट्स की रिक्वायरमेंट है। मैं केंद्र सरकार से कहना चाहता हूं कि सभी राज्यों के लिए क्रिटिकल इक्विपमेंट्स और स्पेशल इक्विपमेंट्स इमिडिएटली देने चाहिए। केंद्र सरकार को राज्यों के लिए कोरोना वायरस की रोकथाम के लिए विशेष फंड रिलीज करना चाहिए। हमने मीडिया द्वारा देखा है कि वर्ल्ड बैंक 12 बिलियन डॉलर रिलीज कर रहा है। इसी तरह सेंट्रल गवर्नमेंट को इस पार्टिकुलर वायरस के लिए इमिडिएटली फंड रिलीज करना चाहिए। माननीय सदस्या कनिमोड़ी जी ने बहुत अच्छा प्वायंट बताया कि तेलंगाना में दिन-रात हमारे मुख्य मंत्री इस वायरस को कंट्रोल करने के लिए काम कर रहे हैं। तेलंगाना में एक व्यक्ति इससे अफेक्ट हुआ है। हम लोग कंट्रोल रूम बनाकर इस वायरस की रोकथाम के लिए काफी कुछ कर रहे हैं।

मेरा एक और सुझाव है कि इस बीमारी को आगे बढ़ने से रोकने के लिए एक्सपर्ट डाक्टर्स की टीम को लगा दीजिए।

माननीय सभापति : आप अपनी बात समाप्त कीजिए। यदि कोई सुझाव आ गया है, तो उसे रिपीट करने की जरूरत नहीं है।

श्री अखिलेश यादव।

श्री अखिलेश यादव : सभापति जी, मैं आपको धन्यवाद देता हूं कि आपने मुझे अपनी बात रखने का मौका दिया है। मैं सभी माननीय सदस्यों की बात से अपने को जोड़ता हूं। माननीय मंत्री जी ने बहुत तैयारी की है। मैं आपके माध्यम से सरकार से कहूंगा कि सरकार प्रचार करने में बहुत आगे है। यह गंभीर बीमारी है।...(व्यवधान) आप मेरी बात को सुन लीजिए, आपके काम की ही मैं बात कर रहा हूं।

महोदय, यह बीमारी दुनिया के बाद भारत में आई है। हम उत्तर प्रदेश से हैं, यह बीमारी आगरा में फैल गई है। मैं सरकार से निवेदन करूंगा कि इस बीमारी का इतना प्रचार करे कि लोगों तक बात पहुंच जाए और इस बीमारी को

रोका जा सके। यहां से, आपकी तरफ से और हमारी तरफ से ऐसा कुछ न जाए, जिससे लोग और डरने लगें। वैसे भी सरकार बहुत डराती है। मंत्री जी ने कई प्रकार की तैयारियों की बात कही है।

माननीय सभापति : अखिलेश जी, आप सुझाव दीजिए।

श्री अखिलेश यादव : सभापति जी, उत्तर प्रदेश में स्वास्थ्य विभाग की हालत बहुत खराब है। सरकार इस बीमारी के लिए अलग से व्यवस्था करे। यदि इसकी अलग से निगरानी नहीं की जाएगी, तो यह बीमारी कंट्रोल में नहीं आएगी। अभी यह बीमारी हवाई जहाज से आई है, जहां स्क्रीनिंग की व्यवस्था नहीं है, यदि इस पर कंट्रोल नहीं किया गया और यह बीमारी ट्रेन द्वारा गरीबों के बीच आ गई, तो बहुत लोगों की जान चली जाएगी।

SHRIMATI SUPRIYA SADANAND SULE (BARAMATI): Sir, I thank the hon. Minister for his absolute detailed reply. I would like to put on record about my State. I am grateful to the hon. External Affairs Minister, Dr. Jaishankar who has been very cooperative whenever we reached out to him to help some people from Iran. I would like to thank him on behalf of my State.

In the budget for the Health Ministry, monies which are allocated for epidemic is very abysmal. Could you increase that? I think all the States, including my State, need support in this regard. There are gaps with the availability of medication. Is this the time you could help the States?

In this regard, there are a lot of doctors on various channels; and there are articles written. You have taken four meetings, which is much appreciated by us. Could you do a daily briefing to the media so that there is only one story that goes out? In every channel some doctors saying something. We do not know whom to believe and whom not to

believe. So, could you take one guideline and speak regularly so that we all can speak in one voice and follow what the Government gives us.

SHRI HASNAIN MASOODI (ANANTNAG): Sir, through you, I would like to invite the attention of the hon. Minister to the plight of 350 students from Kashmir who were stranded in Iran. I have taken up the matter with the Minister of External Affairs; I have met him twice. But nothing is being done; just a passing reference is made in the statement made by the hon. Minister. There are one thousand pilgrims from Kargil and 350 students from Iran who are stranded. They are confined in hostels and they do not have access to the eatables. The Government, it appears to me, is unmindful of the plight and no urgency is being shown at all.

Why should Kashmir be at a receiving end in every sector, be it political aspirations, be it good governance or be it the sovereign stand in Iran.

Having regard to sweeping due to the Coronavirus, Iran is next after China. I want to draw the attention of the Government that they should have taken steps during last ten days to evacuate and get back the students. In the clarification, I expect a statement from the hon. Minister that within a specific timeframe, the students would be called back.

SHRI JAYADEV GALLA (GUNTUR): Many of the hon. Members have already spoken about the health issues that are arising out of Coronavirus. My point is that the most important thing is the personal hygiene and habits for which the awareness needs to be taken across the country. Also, equally important, we are in the Budget Session, we need to understand the economic impact of this virus because people are expecting a global economic impact. Some people are saying that there

could be a slowdown in the global GDP growth to 1 to 2 per cent. If that happens, India is not going to be exempt from that. When we are already looking at our GDP growth going below 5 per cent, because of this virus, it may come down to 3 per cent and if it comes down to 3 per cent, what will happen to our economy? This is the Budget Session, the focus needs to be on the economic impact of this virus on our country.

श्रीमती नवनीत रवि राणा (अमरावती) : माननीय सभापति जी, मुझे लगता है कि मंत्री जी ने बहुत डिटेल में समझाया है और जिस तरीके से बाकी माननीय सदस्यों ने बताया है कि टी.वी. पर अलग-अलग प्रचार चल रहा है। कोई बोल रहा है कि तापमान 30 डिग्री होगा तो कोरोना वायरस खत्म होगा या कैसे होगा। मैं बताना चाहूंगी कि कल से कई फोन आ रहे हैं जो बाहर विदेश से लोग यहां पर ट्रेवल कर रहे हैं, उन्हें तो हम रोक रहे हैं परंतु टूर एंड ट्रेवल से जिन्होंने अपनी-अपनी ट्रिप्स बुक की हैं, उनके फोन आ रहे हैं कि अगर हमें अपना टूर पोस्टपोन करना है तो टूर ट्रेवल्स को अगर वे लैटर दे रहे हैं कि हमें अपनी ट्रिप पोस्टपोन करनी है, हमें विदेश में नहीं जाना है, तो उसके लिए मैं विदेश मंत्री जी और हेल्थ मिनिस्ट्री से रिक्वैस्ट करूंगी कि उनके टूर ट्रेवल्स कैंसिल न करते हुए जिससे न उनका नुकसान हो और न ट्रेवल करने वालों का नुकसान हो, उनके लिए कुछ सोचा जाए और विदेश मंत्री जी को एनाउंस करना चाहिए कि जब तक विदेश मंत्री जी यह सूचित न करें कि अब पूरे विश्व में चिन्ता करने जैसी कोई भी बात नहीं है, अब आप ट्रेवल कर सकते हैं। हमारी हेल्थ मिनिस्ट्री ने कहा है कि पिछले चार-पांच दिनों से नोएडा के दो स्कूल बंद किए हुए हैं। इसका कारण बताना चाहिए।

ADV. A.M. ARIFF (ALAPPUZHA): Sir, I would like to mention the experience of Kerala. As far as Kerala is concerned, there were three persons infected with Coronavirus. They were coming from China. All the three reported cases were treated very well and they have been discharged from the hospital. It is well appreciated by the WHO and the

Central Government. So, I request the Central Government to learn from the experience of Kerala and follow it everywhere in India.

SHRI E.T. MOHAMMED BASHEER (PONNANI): The hon. Minister's detailed statement on the preparedness about tackling the threat of Coronavirus is good. As correctly pointed out by the other hon. Members, I also emphasise the need for improving the testing facilities at the airports itself. Similarly, awareness creation is also very important in this case.

SHRI N. K. PREMACHANDRAN (KOLLAM): Sir, I have three suggestions regarding tackling Coronavirus. The first suggestion is regarding the test of Coronavirus. There are two ways to detect a virus, one is through the genetic material, DNA or RNA, and second is to detect the protein of the virus. The rapid test is to detect the protein. As Kanimozhi ji has stated, it is quite unfortunate to state that we have only one institute to check the virus, the National Institute of Virology. We have virology institute in the State of Kerala in Alleppey which has to be strengthened and empowered.

I am getting so many telephone calls from the people from Kuwait. Those who are coming from Kuwait are not able to travel because they have to submit a certificate that they are not infected with the Coronavirus. So, I seek the intervention of the Ministry of External Affairs so as to resolve that problem. That is number one point.

Secondly, as Arif Ji and Mohammad Basheer Ji have stated, in Kerala we had three confirmed cases and 2,400 suspected cases. How were they managed? I want to share our experience with the hon. Minister. All the 2,400 suspected cases were isolated in their respective homes, not in a public place. Decentralised management with the help of

the local bodies is required. There is no treatment for this. It can only be managed. Proper management at the decentralised level with the help of the local bodies is needed. So, the local bodies have to be taken into confidence so as to address this issue. Also, the Gram Panchayats and the local bodies should be provided assistance. Thank you.

श्री हनुमान बैनिवाल (नागौर): सभापति महोदय, 'कोरोना वायरस' की वजह से पूरे देश के अंदर खौफ है। मैं स्वास्थ्य मंत्री जो को धन्यवाद दूंगा। 'कोरोना वायरस' से पूरे विश्व के लोग बहुत डर गए हैं, हर जगह 'कोरोना'-'कोरोना' की आवाज सुनाई दे रही है। हिन्दुस्तान के अंदर ऐसा लग रहा था कि इससे बड़ा नुकसान होगा, लेकिन मंत्री जी और हमारी सरकार ने इस पर नियंत्रण पा लिया।

सभापति महोदय, मैं एक मिनट में अपनी बात समाप्त करूंगा। यहां 'कोरोना वायरस' के 29 मरीज हैं। 'कोरोना वायरस' के मरीज ज्यादातर इटली से आए हैं। इसमें मैं एक ही बात कहना चाहता हूं। अधीर रंजन जी ने बोला था कि सबसे पहले राहुल जी ने पूछा, तो ...*

माननीय सभापति : नो।

...(व्यवधान)

श्री हनुमान बैनिवाल : सभापति महोदय, ...*(व्यवधान)

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12.56 ½ hrs

(At this stage Shri Gaurav Gogoi and some other hon.

Members came and stood on the floor near the Table.)

माननीय सभापति : नो, यह कार्यवाही में नहीं जाएगा। इसे कार्यवाही से निकाल दिया गया है।

...(व्यवधान)

श्री हनुमान बैनिवाल : सभापति महोदय, ...*...(व्यवधान)

माननीय सभापति : हनुमान जी, आप क्या कर रहे हैं?

...(व्यवधान)

माननीय सभापति : सभा की कार्यवाही दो बजे तक के लिए स्थगित की जाती है।

12.57 hrs

The Lok Sabha then adjourned till Fourteen of the Clock.

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14.00 hrs

The Lok Sabha reassembled at Fourteen of the Clock.

(Shrimati Rama Devi in the Chair)

...(व्यवधान)

MATTERS UNDER RULE 377*

माननीय सभापति : नियम 377 के अधीन मामलों को सभा पटल पर रखने की अनुमति प्रदान की जाती है, माननीय सदस्य नियम 377 के अधीन मामले सभा पटल पर दे दें।

...(व्यवधान)