will chalk out a scheme to provide treatment facilities for the leprosy patients as well as to put a check on begging.

[English]

SHRI PABAN SINGH GHATOWAR: Sir, I have already stated that the rehabilitation part of it is looked after by the Social Welfare Ministry. But this World Bank project also includes Maharashtra for treatment and medical rehabilitation of the leprosy patients.

[Translation]

SHRI BRISHIN PATEL: Speaker, Sir, I want to know from the hon. Minister whether the Government in cooperation with the World Bank and other has formulated any countries scheme or fixed any target for eradicating leprosy from this country.

[English]

MR. SPEAKER: I am very sorry. Probably you have not read the question as well as the reply.

SHRI PABAN SINGH GHATOWAR: I have already stated in the earlier guestion as well as in this question that the main thrust of the World Bank project is on the leprosy patients in our country.

MR. SPEAKER: Right. The question has been replied.

Primary Health Centres

*306. SHRI SYED SHAHABUDDIN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Government had commissioned a study by the Foundation for Rsearch in Community Health in respect of the working of the Primary Health Centres:

- (b) if so; the main findings of the study;
- (c) whether any steps have been taken/proposed to be taken to improve the working of the Primary Health Centres and the sub-centres attached thereto: and

(d) if so, the details thereof?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR: (a) and (b) The Foundation for Research in Community Health, Bombay was commissioned to conduct a study on, inter-alia, service delivery, to assess access to and benefit from delivery of health services.

The main finding is that among those using Government health services. majority do so because it is free of cost or less costly or is the only source available in remote areas.

(c) and (d): The Central Government issued guidelines to the State Govts./UTs from time to time for improving the quality of services rendered through rural health infrastructure.

In the 90 demographically weak districts, 5 Primary Health Centres per district have been taken up for upgradation of facilities to promote institutional deliveries and reduce maternal mortality.

SHRI SYED SHAHABUDDIN: Mr. Speaker, Sir, my question is related to the availability and quality of health services in the rural areas through the primary health centres. Unfortunately, the reply to part (a) and (b) of the reply does not relate to that. What it says about the main finding is something for which we did not require the commissioning of research that the majority of the people go to Government hospitals because it is free of cost or less costly or the only source available.

We know that the quality of health services in the rural areas is extremely poor. The primary health centres are over-burdened. They are under-staffed and ill-equipped. The per capita outlay on medicines annually is of the order of Re. 1. The sub-centres simply do not exist.

I would like to know from the hon-Minister whether this inquiry brought out any finding regarding the quality of health services available in the rural areas and made any suggestions for improving it.

SHRI PABAN SINGH GHATOWAR: It is not true that there is no sub-centre in the country. As on today, there are 4,782 sub-centres in our country.

SHRI SYED SHAHABUDDIN: I did not say, there are not. I said, they exist on paper.

SHRI PABAN SINGH GHATOWAR: Health is a State subject. The manning of the hospitals and dispensaries done by the State Government and supply of medicines everything-is covered by the State budget. We have several times discussed this matter in a meeting of the Health Minister and the Health Secretary to improve the quality of service in the rural areas.

SHRI SYED SHAHABUDDIN: My question was whether this research had brought out any finding. That you have not replied.

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI SHANKARANAND): Sir, to a certain ex-

tent, I agree with the hon. Member. It is true that we have a large infrastructure in the country. And the capacity that has been created is not fully utilised for various reasons. The hon. Member has rightly said that in the primary health centres community centres and sub-centres. there are problems because in many of the health centres, there is no staff. The medicines that are given do reach properly. These are not properly utilised. It is a matter of very serious concern, (Interruptions) must submit to the House that it is not hundred per cent so. A large percentage of primary health centres are still catering to the needs of the poor people. The research has been conducted by a very well-known research organisation of Bombay, headed by a well-known person, Dr. N.H. Antia, He has conducted the research because there have been various researches conducted in the utility and utilisation of the health services infrastructure that has been created.

So, we proposed further research in this matter. The research carried out on various aspects of the matter should be put together. Then, we can cull out the information required to see whether the infrastructure that has been created is fully utilised or not, whether the PHCs are giving proper service to the people or not and so on. So, this research was conducted. The hon, Member has asked whether there have been any suggestions for the improvement of the Health Centres. Yes. There were suggestions. But here I should say that 'Health' is a State subject. Running, maintaining and keeping the centres up-to-date for the service of the people is the responsibility of the State. Money is spent through State budgets. We are in constant touch with the State Governments. Very recently, we had a meeting where the State Health Ministers and Health Secretaries were

present. And we did discuss the matter with them. (Interruptions)

SHRI SYED SHAHABUDDIN: My second question relates to the second half of the reply. In this the Minister has stated that the Central Government sent guidelines to the State Governments from time to time. He has also stated that they have suggested that five Primary Health Centres in 90 demographically weak districts should be taken up for upgradation. My question, Mr. Speaker Sir, is this. I do not understand the term 'demographically weak'. What does it mean?

Secondly, I do not understand as to why there should be an approach of selective upgradation of five centres in 90 districts? That means, not even ten per cent of the total number of Primary Health Centres are covered! Have they sent any guidelines for the general upgradation of the standard and quality of services in all the PHCs of the country.

Also they may please explain the term 'demographically weak districts'.

SHRI PABAN SINGH GHATOWAR: As regards the 90 demographically weak districts, I may explain that these are the very poor performing districts of our country in respect of family welfare schemes...(Interruptions)

SHRI SYED SḤAHABUDDIN: That is wrong! Who is performing?

SHRI PABAN SINGH GHATOWAR: If we update the infrastructure of the hospitals for family welfare purposes, that will not only cover the family welfare programmes, but they will treat other patients also. The facilities provided in the hospitals can definitely be extended to other patients of that area as well. This is a

special scheme taken up by the Central Government.

As regards the guidelines, we have already given the guidelines to the State Government that a Primary Health Centre should cover 20,000 to 30,000 population and that a Community Health Centre should cover up to one lakh population. It is true that many of the Primary Health Centres are not manned properly by doctors. They do not have nurses also. Even in this study, it is mentioned that medicines are also not available. It is not our statement. It is the statement recorded in the study. But I may mention here that the State Government is solely responsible to update the functioning of these centres. The Central Government can only advise. We have deliberated this matter for long with the Health Ministers of different States and we have requested them to take necessary action. It is up to the State Governments to act upon the guidelines and advises.

KUMARI MAMATA BANERJEE: The House should make a survey to find out whether a Health Minister is required or not! Sir, more than 80 per cent of our people are living in rural areas. When the Minister himself admits that there are no doctors, no nurses and no medicines in the PHCs, why should the Minister continue to sit here? I want to ask the Minister as to what is the purpose of having Health Minister at all. So, I want to ask whether the Health Minister is going to make a survey to find out as to how many of our Primary Health Centres in the country are working properly and how many are not. Have the Health Ministry taken up the matter with the State Governments to see that the rural people are given proper treatment by the Primary Health Centres?

SHRI PABAN SINGH GHATOWAR: Despite repeated discussions and follow

up action by the Central Government, if the State Governments are not going to appoint doctors in their primary health centres. I don't think the Central Health Minister should be held responsible for that. It is a State subject. (Interruptions)

[Translation]

SHRI RAM VILAS PASWAN: Mr. Speaker, Sir, the Government may have felt bad about the question asked by Mamata Ji. But regarding health, if the Government replies that the issue is a state subject and it cannot do anything about it, I think, injustice is being done to the House and also to the hon. Members.

Every year, more than 5 lakh infants die just after birth, because blades are not available to cut their umbilical cords and instead sickle is used for the purpose. I would like to ask a small and direct guestion whether the Central Government has prepared any scheme in consultation with the State Governments that every child should be provided a health card just after his birth, which will state about his disease etc. and will enable his parents to get him treated. The Government cannot treat anyone. Is any arrangement going to be made in this regard?

[English]

SHRI PABAN SINGH GHATOWAR: The main problem in our country is-according to the infant mortality rate and the mother mortality rate-that 60 per cent of our deliveries are not done in the institutions; even they are not operated by the trained people. That is one of the main reason, for IMR and MMR.

We have discussions with the State Governments and given instructions to them about it. We have deliberated upon this and told them that they have to educate people to have more institutional deliveries, and deliveries should be done by the trained dayees and not by other people. There are schemes and we are pursuing those schemes with the help of the State Government.

SHRIMATI GEETA MUKHERJEE: As I understand, one of the principal reasons for malfunctioning of these primary health centres is the difficulty in getting finance by the State Governments. Is the Minister fighting regarding this with the Cabinet so that the State Governments can have some more aid in this regard? Otherwise, there will be really no arrangement for medicines in those primary health centres.

SHRI B. SHANKARANAND: The State Governments have to take care of the health of the people; they have to find enough money in their budgets; and if they want any assistance for formulating any schemes for them and help in negotiations for their health with the Planning Commission, we will help them.

[Translation]

SHARAD YADAV: SHRL Mr. Speaker, Sir, I am not on my legs just to ask the question.

MR. SPEAKER: You should only ask questions at present.

SHRI SHARAD YADAV: I rise to seek clarification to the question.

MR. SPEAKER: No, ask your question.

SHARAD YADAV: Mr. SHRI Speaker, Sir, the Minister of Health and the Minister who are here to assist him

have replied that they are helpless and cannot do anything in the regard. So there is no use of asking any question, when they are so much helpless that nothing can be done then what is the use of wasting time like this. First of all, the responsibility of the hon. Minister should be decided.

MR. SPEAKER: No. it is not so.

SHRI SATYA DEO SINGH: Mr. Speaker, Sir, the hon. Minister says that health is a State subject. I would like to whether the Ministers know Secretaries of the State Governments have ever been consulted for the proper functioning of primary health centres? (Interruptions).....The State Governments must have appeared their problems. In view of the assistance sought by the State Governments for running their PHCs properly, whether any scheme has been made in this regard?

[English]

SHRI B. SHANKARANAND: As I said earlier, it is a fact that there are certain States in the country which are not using the funds that we have already given to them under the National health Programme; they are not spending that money.

SHRI VIJAYARAMA RAJU SATRUCHARLA: Under the Central Government quota. the Central Government is sanctioning some new primary health centres each year. The State Governments are not consulting the MPs for setting up and starting such primary health centres in the rural areas. Will the Central Government give any direction to the State Governments for consulting MPs at the time of selecting new venues for setting up these primary health centres?

MR. SPEAKER, Disallowed.

The Question Hour is over.

WRITTEN ANSWERS TO QUESTIONS

[English]

Investment Plan

*305. SHRI **BOLLA BULLI** RAMAIAH:

> SHRI R. DHANUSHKODI ATHITHAN:

Will the Minister of PETROLEUM AND NATURAL GAS be pleased to state:

- whether (a) the Indian Oil Corporation has drawn up any investment plan:
 - (b) if so, the details thereof:
- (c) whether under this plan joint venture projects are being undertaken with the foreign companies;
 - (d) if so, the details thereof; and
- (e) the time by which these are likely to be commissioned?

THE MINISTER OF STATE OF THE MINISTRY OF PETROLEUM AND NATURAL GAS (CAPT. SATISH KUMAR SHARMA);(a) and (b) The major projects proposed to be undertaken by the Indian