

industry, in the case of SSI units, the problem is two-fold:—

- a. Inability to detect sickness at the incipient stage.
- b. Large number of non-viable sick units with both the entrepreneur and the bank saddled with idle non-performing assets.

It is, therefore, essential that an institutional arrangement in the form of a Tribunal be made to deal with the question of liquidation of assets of the non-viable sick units. On the other hand, the mechanism of rehabilitation of potentially viable, but sick, SSI units should be strengthened, so as to enable detection of sickness at the incipient stage and implementation of rehabilitation packages within the stipulated time frame.

(c) As per the data collected by RBI from the scheduled commercial banks, total number of SSI sick units as at the end of March, 1992 and 1993 aggregated 2,45,575 and 2,38,176 with outstanding amounts of Rs. 3100.67 crore and Rs. 3442.97 crore respectively. Of these 19210 and 21649 units with outstanding amounts of Rs. 728.90 crore and Rs. 789.79 crore respectively were considered as potentially viable.

(d) For tackling the problems of industrial sickness in SSI sector and rehabilitation of sick SSI units, RBI has issued guidelines to scheduled commercial banks in February, 1987 (modified in June, 1989 and April, 1993) containing inter-alia, definition of sick units, viability norms, incipient sickness as also reliefs and concessions from banks/financial institutions for implementation of packages in the case of potentially viable units.

Family Welfare Programmes

*52 SHRI KASHIRAM RANA: Will the PRIME MINISTER be pleased to state:

- (a) the role of the voluntary organisations engaged in the Family Welfare Programmes in the country;
- (b) the number of the non-Governmental organisations engaged in these programmes;
- (c) the criteria adopted by the Government for providing assistance to these organisations;
- (d) the steps taken by the Government to ensure better participation of these organisations in the family welfare programmes during the last three years; and
- (e) the effective measures proposed to be taken by the Government to check the population growth in the country with the help of these organisations?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA):
(a) The voluntary and other non-Governmental Organisations supplement and complement Government's efforts in Family Welfare programmes in

unserved, under-served as well as difficult and remote areas of the country.

(b) Over 800 non-Governmental Organisations have been funded by Department of Family Welfare and the State Governments since 1992-93.

(c) Government assistance to non-Governmental Organisations is provided as per specific pattern of assistance under specific schemes.

(d) Steps taken by Government include:

- (i) Model schemes have been prepared and advertised widely.
- (ii) Most State Government have established Standing Committees on Voluntary Action for closer interaction with Voluntary Organisations.
- (iii) New Model Schemes of the Department of Family Welfare contain flexible provisions for ensuring better participation.
- (iv) Rolling funds have been established under Mother Unit scheme to facilitate participation by smaller Organisations.
- (v) Training/study tours, conferences and meetings are conducted to resolve the difficulties faced by non-Government Organisations.

(e) Higher budgetary support is being provided for NGOs in encouraging spacing methods and promoting awareness for adoption of small family norm.

Industrial Growth Rate

*53. SHRI DATTATRAYA BANDARU:
SHRI BALRAJ PASSI:

Will the PRIME MINISTER be pleased to state:

- (a) the increase indicated in industrial growth during the first half of the current financial year as compared to the previous year, sector-wise;
- (b) the target fixed for the current financial year;
- (c) whether the target is likely to be achieved; and
- (d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF INDUSTRY (DEPARTMENT OF INDUSTRIAL DEVELOPMENT AND DEPARTMENT OF HEAVY INDUSTRY) (SHRIMATI KRISHNA SAHI): (a) As per the Quick Index of industrial production released by CSO, overall growth of industrial production in terms of broad sectors is given in the statement enclosed.

(b) to (d). Eighth Five Year plan (1992-1997) has envisaged a growth of 8.2% for the manufacturing sector. However, overall target of industrial growth are not fixed on an annual basis.

STATEMENT
Industrial Growth Rates

Sector	Weight	Growth Rates-(Percent)	
		April-September 1993-94	1994-95
Mining & Quarrying	11.46	3.5	4.7
Manufacturing	77.11	3.2	8.2
Electricity	11.43	8.7	7.0
General	100.00	4.0	7.6

Source:— Central Statistical Organisation.

Homoeopathy and Ayurveda

*54. SHRI MANJAY LAL:

SHRI VILASRAO NAGNATHRAO GUNDEWAR:

Will the PRIME MINISTER be pleased to state;

(a) whether the Government have taken a final decision to set up a separate Directorate for Homoeopathy and Ayurveda;

(b) if not, the reasons therefor;

(c) whether the Government propose to promote Ayurveda by Planting more medicinal herbs in various parts of the country;

(d) if so, the details thereof; and

(e) the recent development made in identifying new medicines in Ayurveda for incurable diseases?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (DR. C. SILVERA): (a) Government has set up a separate Department of Indian Systems of Medicines and Homoeopathy under the Ministry of Health and Family welfare.

(b) Does not arise.

(c) Yes, Sir.

(d) A scheme for development and cultivation of medicinal plants which are in short supply or becoming extinct was devised by this Ministry and assistance has been provided to various organisations from the year 1990-91 under the scheme.

(e) The Government is carrying out research through the Central Council of Research in Ayurveda and Siddha and new medicines in Ayurveda and Siddha are under trial. These trials involve identifying efficacious drugs against diseases like epilepsy, psoriasis and poliomyelitis.

Oral Health Policy

*55. SHRI MOHAN RAWALE: Will the PRIME MINISTER be pleased to state:

(a) whether the Government are considering to launch an oral health policy;

(b) if so, the details thereof;

(c) whether a World Congress on Prosthodontics was held in New Delhi in February, 1995;

(d) if so, the details of the recommendations and suggestions made at the congress; and

(e) the reaction of the Government thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) and (b). Oral Health is an integral and important component of the overall health programmes.

A pilot Oral Health Care Programme has been included in 1995-96 budget. It is planned in the initial stage for five districts in different areas of the country. In general, programme will focus on the following:—

(i) Promotive and preventive aspects of Oral and dental care through education;

(ii) To devise a training package for trainers and Primary Health Care workers;

(iii) To strengthen the existing oral health care services at the districts and community health centres;

(iv) To maintain effective liaison with N.G.Os., health education personnel/School teachers and other agencies for imparting education on oral health; and

(v) To introduce appropriate curriculum in school and college level for imparting education on the subject of oral health.

(c) Yes, Sir.

(d) and (e). Recommendations are yet to be made available to the Government.

Health Cure Clinics

*56 SHRIMATI D.K. BHANDARI: Will the PRIME MINISTER be pleased to state:

(a) whether several health cure clinics have cropped up in Delhi and other metropolitan cities in the country promising cure for baldness, hypertension, obesity, etc.;

(b) if so, whether these clinics have been opened with the prior permission from the Government;

(c) if not, the action taken by the Government in this regard;

(d) whether the Government have examined the working of these clinics; and