

- priority to tribal, hilly and backward areas.
- xii) Developing Health Information Management System.
- xiii) Development of I.S.M. & Homoeopathy and involvement of I.S.M. & Homoeopathic practitioners in the health care delivery systems.
- xiv) Developing research in the bio-medical and allied sciences.
- c) Does not arise.
- d) No, Sir, Not at present.
- (e) and (f) Do not arise.

#### **Integrated Military Strategy**

1601. SHRI V. SREENIVASA PRASAD :

SHRI TARA SINGH :

Will the PRIME MINISTER be pleased to state :

(a) whether attention of the Government has been drawn to the newsitem captioned "Need for integrated military strategy stressed" appearing in the *Statesman* dated October 11, 1995;

(b) if so, the facts thereof; and

(c) the steps taken in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (DEPARTMENT OF DEFENCE RESEARCH AND DEVELOPMENT) AND MINISTER OF STATE IN THE MINISTRY OF PARLIAMENTARY AFFAIRS (SHRI MALLIKARJUN) : (a) Yes, Sir.

(b) and (c) India has a comprehensive strategic and security policy, based on, inter-alia, our threat perceptions and the global and regional security environment. This policy is continually under review, in the light of developments which impact on our national security enabling Government to take all necessary measures to cope with any threat to the security of the nation.

#### **Merger of Companies**

1602. SHRIMATI SUMITRA MAHAJAN : Will the PRIME MINISTER be pleased to state :

(a) the Indian Companies which have merged with Multi National corporations since July, 1993; and

(b) whether the Government have considered the impact of such mergers and acquisitions on the degree of fair competition within the country?

THE MINISTER OF STATE IN THE MINISTRY OF LAW, JUSTICE AND COMPANY AFFAIRS (SHRI H.R. BHARDWAJ) : (a) and (b) : The information is being collected and will be placed on the Table of the House.

#### **Health Conference**

1603. SHRI PARAS RAM BHARDWAJ : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the Central Council for Health and Family

Welfare has a three-day Conference in Delhi in October, 1995;

(b) if so, the main recommendations and observations made in the Conference regarding the implementation of the Family Welfare plan;

(c) the Government's reaction thereto;

(d) whether any proposal with the Government for raising the effective age of marriages amendments to medical termination of pregnancy rules and regulations and implementation of pre-natal diagnostic techniques; and

(e) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI A.R. ANTULAY) : (a) and (b) Yes, Sir. Recommendations and Observations made in the Conference regarding the implementation of Family Welfare Programmes are given in the attached Statement.

(c) The Government has accepted the recommendations in principle and has requested all the State Governments to comply.

(d) and (e) Yes, Sir. Details are included in reply to parts (a) and (b) of the question.

#### **STATEMENT**

*Progress of Family Welfare Programme in Terms of its Impact on Birth Rate, death, infant mortality rate and couple protection rate.*

#### **RESOLUTION**

The Council notes the progress made by different States in achieving the goals of the F.W. Programme set by the National Health Policy. The Council would like to place on record its appreciation of the efforts by the States and UTs in the implementation of the Family Welfare Programme. The Council would like to compliment those States and UTs which have already achieved the goals of 2000 A.D. and those which are very close to these goals. The Council strongly urges the other States to continue their efforts in this direction by according a high priority to population and family welfare programmes.

*Variations in the findings of national family health survey and coverage evaluation surveys vis-a-vis reports submitted by States regarding immunization status.*

#### **Resolution**

The council resolves that reporting and monitoring systems regarding immunization status should be strengthened so that immunization coverage levels in infants and pregnant women are realistically assessed. Over estimation of immunization coverages should be strongly discouraged and avoided.

*Replacement of quantitative contraceptive targets*