

amount is not made use of by the department except in case of default in payment of dues by the subscriber. The amount is kept under deposit. This amount increases as and when tariff is revised increasing the rent of a telephone.

(c) As indicated above, the security amount obtained by the department cannot be made use of by the department for provision of facilities.

(d) For improving telephone service, performance of different exchanges is being regularly monitored and defective equipments/plants are attended to. Special drives have been initiated in large telephone systems for overhauling of exchange plants, replacement of heavy open wire alignments by underground cables, gas pressurisation of junction and primary cables, close coordination with local authorities to minimise the incidence of damage to underground cables and reduction in electric power shut-down, etc. Action is also regularly taken to improve the design and manufacture of equipments.

Complaints against forced Sterilisation

695. SHRI KANWAR LAL GUPTA:
SHRI PRADYUMNA BAL:

Will the Minister of Health and Family Welfare be pleased to state:

(a) the number of complaints received by Government in the last two months against forced sterilization;

(b) the broad details thereof;

(c) the names of officers and public men responsible therefor and action taken by Government against them; and

(d) how many persons have been compensated against forced sterilization and the total amount spent on it?

THE MINISTER OF HEALTH AND FAMILY WELFARE: (SHRI RAJ NARAIN): (a) to (c). A very large number of complaints have been received during the period. Out of these

complaints quite a few refer to alleged forcible Sterilisation and harassment at the hands of motivators and other Family Planning staff. These complaints are being looked into in consultation with the State Governments.

Out of these complaints it has been possible to sort out nearly 4100 and approximately 50 per cent are complaints regarding forced Sterilisation and request for compensation. The Central Govt. has set up a Grievances Cell in the Department of Family Welfare and has also advised the State/Union Territory Administrations to set up similar Grievance Cells under them to process and examine the complaints and Grievances pertaining to Family Planning drive. All such complaints where excesses at the hands of staff or other agencies are alleged, are forwarded to the concerned State Govt./Union Territory Administrations for prompt and speedy enquiry. It has been suggested to the States/Union Territories to fix the responsibility for the excesses and to take appropriate action against those responsible for harassment of the people.

(d) There is no scheme for giving cash compensation to those who report having undergone sterilisation under force and as such the question of spending any amount does not arise.

Increase in Lay-Offs

696. SHRI K. LAKKAPPA: Will the Minister of PARLIAMENTARY AFFAIRS AND LABOUR be pleased to state:

(a) whether there has been any increase in the incidence of lay-offs;

(b) whether any instructions have been issued to States to prevent such lay-offs; and

(c) if so, the facts thereof?

THE MINISTER OF PARLIAMENTARY AFFAIRS AND LABOUR (SHRI RAVINDRA VARMA): (a) Information is being collected and will be laid on the Table of the Sabha after it is received.

(b) and (c). No new instructions have been issued in the last two months.

Recruitment of Indians

697. SHRI K. LAKKAPPA: Will the Minister of PARLIAMENTARY AFFAIRS AND LABOUR be pleased to state:

(a) whether recruitment of Indians for employment abroad by any agency has been forbidden; and

(b) if so, the facts thereof?

THE MINISTER OF PARLIAMENTARY AFFAIRS AND LABOUR (SHRI RAVINDRA VARMA): (a) and (b). According to a policy decision taken by the Government in June, 1976, no firm, organisation or individual shall engage in the recruitment of skilled, semi-skilled and unskilled labour from India for deployment abroad unless registered and duly licensed for this purpose by the Ministry of Labour which has been designated as the Focal Point for this purpose. Foreign firms and organisations shall also not be allowed to make direct recruitment of skilled, semi-skilled and unskilled labour. However, they may appoint an Indian company/organisation registered with the Focal Point to act on their behalf for this purpose in accordance with the terms and conditions acceptable to the Focal Point. Indian firms/organisations engaged in consultancy/execution of work abroad will be allowed to directly recruit their genuine requirements of skilled, semi-skilled and unskilled workers for service abroad on the terms and conditions of employment to be approved by the Ministry of Labour.

Necessary amendments to the Emigration Act, 1922 are also under consideration.

In respect of highly qualified experts holding graduate or post-graduate qualifications, the Government of India policy regarding recruitment by other friendly developing countries is

that all requirements should be met on a Government to Government basis. Experts interested in deputation to such countries through the Government of India, whether they are in governmental or private employment in India, can apply to the Foreign Assignment Section, Department of Personnel and Administrative Reforms, North Block, New Delhi. Indian firms/organisations engaged in consultancy/execution of work abroad are, however, allowed to depute experts in their own employment abroad for the genuine requirements of their own work.

Better Health Services in India

698. SHRI K. LAKKAPPA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether health service in India is not a well planned system;

(b) if so, whether Government are taking any steps for better health services; and

(c) if so, outlines thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI RAJ NARAIN): (a) and (b). Health service in India is a fairly well planned system. However, to improve the rural health service further, a Rural Health Scheme has been drawn up.

(c) The Scheme provides for community health workers to be selected by the community itself. Such community health workers will provide basic preventive, promotive and curative services at the level of the community. This also provides for improvement in the quality of the professional services by way of increasing the number of multi-purpose workers, induction of a large number of doctors in the rural areas and making medical colleges responsible for total health of selected primary health centre. It envisages training of about 5.8 lakh community health workers in a period of two years and training of equal