

(क) क्या गत दस महीनों के दौरान औद्योगिक कर्मचारियों (1960-100 आघार वर्ष) के अखिल भारतीय उपभोक्ता मूल्य सूचकांक सम्बंधी मासिक तथा 12 महीनों के औसत आंकड़े क्या हैं ; और

(ख) उन शहरों के नाम क्या हैं जिनमें मूल्य सूचकांक संबंधी आंकड़े एकत्र किए जाते हैं और इस उद्देश्य के लिए किन वस्तुओं को शामिल किया जाता है ।

संसदीय कार्य तथा भ्रम मंत्री (श्री रवीन्द्र वर्मा) : (क) और (ख). सूचना तीन सभा पटल पर रखे गए विवरणों i, ii और iii में दी गई है [संघालय में रखे गए ।
देखिए संख्या LT 1080/77]

Malaria in the Country

742. SHRI PRASANNABHAI MEHTA.
SHRI RAMJI LAL SUMAN;
SHRI YASHWANT BOROLE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the press report in the *Sunday Standard* dated the 9th October, 1977 under the heading 'Malaria control set up is sick';

(b) if so, whether this year the country was in the grip of Malaria; if so, the factor responsible for this sudden rise;

(c) how many persons died and how many suffered due to this disease during 1977 in the country; and

(d) the preventive measures taken to meet the challenge?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI JAGDAMBI PRASAD YADAV): (a) Yes.

(b) Though the incidence of Malaria has been rising gradually during the last 10 years or so, on the basis of reports available up to September this year the incidence of positive cases of Malaria is 30,21,864 as against the incidence of 30,98,666 for the same period during the last year. There is thus a decline of about 11 per cent in the incidence of cases this year so far. However, while Himachal Pradesh, Jammu and Kashmir, Karnataka; Punjab, Rajasthan, Sikkim, Kerala, Meghalaya, Nagaland, Uttar Pradesh, Andaman and Nicobar Islands, Chandigarh, Delhi and Pondicherry have reported increase in the incidence, other States and Union Territories have reported decline.

(c) The positive incidence reported upto September, 1977 is 30,21,864 and 20 deaths directly due to Malaria have been confirmed.

(d) A statement indicating the preventive measures taken to control the disease is attached.

Statement

The following steps have been taken by Government of India for controlling Malaria:—

1. A modified plan of operations is being implemented by the Governments of States and Union Territories for from the 1st April, 1977. While the ultimate objectives of NMEP continues to be eradication of Malaria for the present it is proposed to contain it.

2. The existing N.M.E.P. units have been re-organised to conform to the geographical boundaries of the districts. The Chief Medical Officer of the district has been made primarily responsible for the programme in the district.

3. Increased quantity of the required type of insecticides have been/are being provided with the available resources.

4. Insecticidal spray operations have been undertaken in all rural areas, which have incidence of two or more cases per thousand population.

5. Adequate quantity of anti-malaria drugs have been supplied to the States and Union Territories Governments. Drug Depots/Drug Distribution Centres/Fever Treatment Centres have been opened from where anti-malarial drugs are available conveniently to the public free of cost. In a few areas where resistance to chloroquine by parasites has been noticed, alternative anti-malarials like quinine have been supplied.

6. Anti-larval operations under Urban Malaria Areas Programme have been intensified. The Scheme has been extended to 38 towns during 1977-78 besides continuing it in the already existing 28 towns.

7. For early examination of blood smears and providing quick medical treatment, to positive cases, laboratory services have been decentralised to the P.H.C. level.

8. Supervision of the field staff has been toned up.

9. Steps have been taken for undertaking both fundamental and operational research in Malaria.

10. Intensive campaign has been started in North Eastern region with World Health Organisation assistance for containing the spread of *P. Falciparum* infection.

11. Steps have been taken for imparting health education regarding the disease and for seeking cooperation of public organisations e.g. Panchayats School teacher students, Youth Organisations, Medical Practitioners etc. in controlling the disease.

Mineral Resources of Himachal Pradesh

743. SHRI DURGA CHAND: Will the Minister of STEEL AND MINES be pleased to state:

(a) the mineral resources tapped in Himachal Pradesh during the last three years; and

(b) the steps being taken to make a survey of all the minerals hidden in Himachal Pradesh?

THE MINISTER OF STATE IN THE MINISTRY OF STEEL AND MINES (SHRI KARIA MUNDA): (a) During the last three years major minerals like rocksalt, limestone and barytes; besides minor minerals such as slate, ordinary clays, sand, kankar and building stones were mined in Himachal Pradesh.

(b) Geological Survey of India and State Directorate of Industries are actively engaged in survey and exploration of minerals in Himachal Pradesh. During 1977-78 field season, Geological Survey of India intends to investigate for cement grade limestone in Simla District, clay in Mandi district, slate in Kulu, Kangra and Mandi districts and for antimony-lead-zinc around Bara-Shigri glacier in Lahaul-Spiti district.

Reorganisation of Statutory Tripartite Bodies

744. SHRI DINEN BHATTACHARYA: Will the Minister of PARLIAMENTARY AFFAIRS AND LABOUR be pleased to state:

(a) whether Government have not yet reorganised statutory tripartite bodies like the ESI Corporation, Provident Fund Trustees etc.;

(b) if so, the reasons therefor;

(c) whether the Congress Government constituted these Committees on