(ii) maintenance of a permanent Locust Warning Organisation fully equipped with technical insecticides personnel control equipments, which has recently been strengthened appreciably to meet current locust invasion:

Written Answers

(iii) maintenance of a fleet of four aeroplanes to support ground operations.

Apprehending a serious locust situation this year, the Government of India have already alerted the Governments of all States vulnerable to locust attacks.

(d) The current locust incursions from the west commenced on 15th May, 1962. Since then, 13 swarms have visited Punjab, Rajasthan, Union Territory of Delhi and Uttar Pradesh. The extent of the area affected is not known at present.

## Delhi Maternity Hospital Pusa Road

2997. Shri Warior: Will the Minister of Health be pleased to state:

- (a) whether Government are giving any grants to Delhi Maternity Hos. pital situated in Pusa Road;
- (b) whether Government have any information as to the rates charged there in delivery cases;
- (c) whether Government have any say or control in the administration of the above hospital; and
- (d) whether Government have received any complaints from the public regarding unsatisfactory treatment there?

The Minister of Health (Dr. Sushila Nayar): (a) The following grants were given to the Hospital.

> 1960-61-Rs. 2,32,514.00 1961-62-Rs. 91,792.33

- (b) So far as Government aware, no charges are made for delivery cases in the General Ward.
  - (c) and (d). No.

## Elephantiasis

2998. Shri Koya: Will the Minister of Health be pleased to state:

- (a) in what ways Central Government helps State Governments in any scheme of combating and eradicating the disease of elephantiasis on the West Coast of South India:
- (b) whether the cause of the disease has been definitely ascertained;
  - (c) if so, what it is; and
- (d) what are the steps which Government are taking in the matter?

The Minister of Health (Dr. Sushila Nayar): (a) Elephantiasis is a condition which develops in some cases of Elephantiasis, once it is filariasis. established in a person, cannot be eradicated as there is no cure for it. except surgical treatment in selected cases. For preventing elephantiasis, filaria control is necessary.

In this the States have been assisted by the Central Government by providing (1) insecticides and larvicidal oil for anti-mosquito and anti-larval measures and (2) diethylcarbamazine tablets for mass therapy of affected population. Medical Officers and sub-professional personnel of the States are given training in Filariology.

- (b) Yes.
- (c) The disease is caused by repeated bites of certain species of culicine mosquitoes which bite a person with filariasis, and then a healthy person thus injecting microfilaria into the healthy individual.
- (d) For removing the cause of the disease, mosquito control through environmental sanitation (i.e. proper drainage, adequate disposal of sewage and sullage) is being taken up. For combating the spread of the disease, control measures so far undertaken consist of (1) mass therapy with diethylcarbamazine and (2) antimosquito measures. As the mass therapy and insecticidal measures have not proved effective, only anti-larval

measures are being enforced in urban areas along with measures for improvement of drainage. Further study and research in Filariasis is necessary before effective control in rural and urban areas can be taken up. For this purpose, it is proposed to establish Research-cum-Training units in each State where filariasis is a problem.

## Family Planning Conference

- 2999. Shri D. C. Sharma: Will the Minister of Health be pleased to state:
- (a) whether a three-day Conference on family planning communication research was held recently in New Delhi; and
- (b) if so, the recommendations thereof and the steps taken to implement the same?

The Minister of Health (Dr. Sushila Nayar): (a). Yes, Sir. An informal conference mainly of field workers associated with family planning communication action research was held from the 28th to 30th May, 1962.

- (b). The matters relating to (i) the methods of measurement of fertility to be used in the Action-Research situation; (ii) measurements of total impact of the family planning programme other than fertility methods: (iii) improvement of educational and organisational methods for intensifying the family planning action research programme; (iv) scope of future diagnostic studies on problems regarding implementation of the programme; and (v) suggestions regarding the methods of research mainly discussed at the Conference. The main recommendations made by the four committees formed at the Conference are given below:
  - It is necessary to conduct base line survey in areas selected at random.
  - (2) There is need of specifying the targets in regard to the

- number of persons undergoing sterilization operations, individuals accepting family planning methods, persons motivated to use these methods, the number of persons having information knowledge about family planning, their attitudes. awareness, and interests learn about the methods and their use etc
- (3) As the problem of measurement of impact of family planning is complex, a Technical Committee to meet periodically to work out and disseminate the details of measures of impact on population should be appointed.
- (4) A uniform pattern of having both a male and a female worker for family planning at the primary health centre should be adopted.
- (5) Studies should be undertaken to find out (a) where the family planning staff should be placed in the Block so that it can function most effectively and (b) how can coordination and supervision be best achieved in the family planning programme.
- (6) Study should be undertaken to find out what equipments, audio-visual aids and transport facilities are available and are being used for family planning workers at the primary health centres.
- (7) Active steps should be taken to involve the Block Advisory Committee and the Panchayat Samities in planning the family planning activities in their areas. In order to achieve this it is essential that Panchayat members should be given orientation as early as possible.