

**GOVERNMENT OF INDIA
RURAL DEVELOPMENT
LOK SABHA**

UNSTARRED QUESTION NO:365
ANSWERED ON:24.07.2001
SANITATION HEALTH SYSTEM IN RURAL AREAS
RAVI PRAKASH VERMA

Will the Minister of RURAL DEVELOPMENT be pleased to state:

- (a) whether 91% people in the rural areas of the country are suffering due to improper sanitation and inadequate health system;
- (b) if so, the details in this regard and the reasons therefor, State-wise;
- (c) whether out of budget allocation of Rs.31, 995 crore Rs.1, 380 crore were not utilised and returned during the last three years;
- (d) if so, the reasons therefor; and
- (e) the steps taken by the Government to improve the sanitation and health system in the rural areas of the country?

Answer

MINISTER OF STATE FOR RURAL DEVELOPMENT (SMT RITA VERMA)

(a)&(b): The Central Rural Sanitation Programme was launched in 1986. By the end of VIII Five Year Plan the total sanitation coverage stood at around 16-20% of the total rural households. Keeping in view the low coverage of sanitation in rural areas, major policy changes have been brought about in the Central Rural Sanitation Programme with a view to cover at least 25% of rural population at the end of 9th Plan period. As reported by the Ministry of Health & Family Welfare, the details of health infrastructure in the country are: Sub-Centres 1,37,271, PHC's 22,975, Community Health Centres 2,935, Rural Family Welfare Centres 5,435.

(c)&(d): The budget allocation for the Ministry of Rural Development during the last three years was Rs.29544.90 crores. The total surrender during the period was Rs.1888.45 crores (which includes 458.35 crores surrendered for transfer to non-lapsable pool for North-Eastern Region during 2000-01). The surrender were mainly due to cut effected by the Ministry of Finance at Revised Estimates stage on account of large opening balances with the State Governments under various Programmes/Schemes of Ministry of Rural Development and also due to the fact that North-Eastern Region including Sikkim could not take its full share of 10% allocation during 2000-01.

(e): The Central Rural Sanitation Programmes has been restructured w.e.f. 1.4.99. It moves away from the principle of State-wise allocation primarily based on poverty criteria to a `demand driven` approach in a phased manner. The new programme is community led and people centred. Total Sanitation Campaign is being implemented in the project mode. Moreover, the Ministry of Health have constituted a Group to formulate a Comprehensive National Programme on Sanitation and Environment Hygiene on the lines of Technology Mission. A committee has also been constituted by them to review the public health system comprehensively in the country. National Surveillance Programme for communicable Diseases have also launched certain programmes for early detection of outbreaks and appropriate response thereto with ultimate objectives for reduction of morbidity and mortality.