

Government Medical Centres in the Country for treating respiratory tract infection has been found ineffective in treating majority of the children suffering from these diseases;

(c) if so, the details thereof; and

(d) the steps proposed to be taken by the Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes, Sir.

(b) to (d) Under the Child Survival and Safe Motherhood Programme, Cotrimoxazole is the recommended drug for use in mild to moderate cases of pneumonia among children under 5 years of age. There are a few reports regarding resistance of common causative organisms to the drug. Most of these reports are for hospitalised cases and are based on laboratory settings. Some of these studies also show that in areas where drug resistant strains have been identified in laboratory settings, the clinical efficacy of the drug is still high. There are no adverse reports regarding the efficacy of the drug when used in field situations by the Health Workers, based on programme guidelines.

The National guidelines on use of drugs in acute respiratory infections among children are reviewed periodically. An expert group consisting of eminent national and international experts and representatives of Indian Academy of Paediatrics and Indian Council of Medical Research who reviewed the issue in March, 1997 have opined that in view of the clinical performance of Cotrimoxazole in community setting being still good any change in the policy on use of this drug should be based on clinical trials.

Clinical studies are being currently carried out at the All India Institute of Medical Sciences and by a number of agencies including the WHO.

#### Indian Workers in Gulf

2276. PROF. P. J. KURIEN: Will the PRIME MINISTER be pleased to state:

(a) the number of Indians recruited for employment in Gulf countries during the year 1996-97 and the current year;

(b) whether the Government have received complaints that the salaries and allowances agreed to in the contract are denied to the workers by the employers;

(c) if so, the details of such cases; and

(d) the action taken by the Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF EXTERNAL AFFAIRS (SHRIMATI KAMLA SINHA): (a) to (d) The information is being collected and will be placed on the Table of the House.

#### Remote Sensing Technique for Treating Salt Affected Soils

2277. SHRI AYYANNA PATRUDU: Will the PRIME MINISTER be pleased to state:

(a) whether the National Remote Sensing Agency has introduced remote sensing technique for treating salt affected soils for reclamation measures which can increase food production;

(b) if so, the details of the States where these tests are being conducted;

(c) whether the Government propose to popularise this technique in coastal regions for more agricultural yield and to assist farmers in this regard?

(d) if so, the details thereof, and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF PERSONNEL, PUBLIC GRIEVANCES AND PENSIONS AND MINISTER OF STATE IN THE MINISTRY OF PARLIAMENTARY AFFAIRS (SHRI S.R. BALASUBRAMONIYAN): (a) to (e) National Remote Sensing Agency (NRSA) has not by itself introduced any advanced remote sensing techniques for treating salt affected soils for reclamation measures, which could increase food production.

NRSA has, however, developed the methodology for identification and delineation of salt affected soils and for categorising them into different groups based on the nature and magnitude of the problem of soil salinity, using satellite remote sensing data. The information from these maps is useful for taking further steps towards reclamation measures of salt affected soils by Agriculture Departments/ Research Institutions.

Mapping of salt affected soils on 1:250,000 scale using satellite data, has been taken up for Andhra Pradesh, Andaman & Nicobar Islands, Bihar, Gujarat, Haryana, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Punjab, Orissa, Rajasthan, Tamil Nadu, Uttar Pradesh and West Bengal. The work is nearing completion.

Further, for Krishna, Guntur, Prakasam and Nellore Districts of Andhra Pradesh; Ahmedabad district in Gujarat and Mainpuri district in Uttar Pradesh, the mapping has been carried out on 1:50,000 scale using Indian Remote Sensing Satellite (IRS) data.

#### Screening of AIDS Virus

2278. SHRI SATYAJITSINH DULIPSINH GAEKWAD: Will the PRIME MINISTER be pleased to state :

(a) the extent to which the vulnerable sections of society have been screened in each State and Union Territory separately for presence of AIDS-Virus (HIV) in blood;

(b) the percentage of these sections still remain to be screened; and

(c) the details of the Action Plan to screen out these sections indicating the allocation made therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) As on June, 30, 1997, 3131470 samples have been screened for the presence of AIDS-Visus (HIV) in various parts of the country. These samples are mostly from high risk groups of population. The State-wise details of the number of persons screened and found positive for HIV is enclosed as a Statement.

(b) and (c) The screening of blood for the presence of HIV is an ongoing process and is done on unlinked anonymous basis in 62 Surveillance Centres all over the country. To monitor the trends of HIV infection in High Risk Groups as well as sections of the general population, 55 sentinel sites all over the country have been established.

#### Statement

##### Sero-Surveillance for HIV Infection

Period of report upto: 30th June, 1997 (provisional)

S. No.	Name	Screened	Positive	Sero positivity rate (per thousand)
1	2	3	4	5
1.	Andhra Pradesh	73275	693	9.46
2.	Assam	12716	169	13.29
3.	Arunachal Pradesh	485	0	0.00
4.	Andaman & Nicobar Island (U.T)	10588	89	8.41

1	2	3	4	5
5.	Bihar	8790	24	2.73
6.	Chandigarh (U.T)	55104	184	3.34
7.	Punjab (U.T)	1488	65	43.68
8.	Delhi	314213	1244	3.96
9.	Daman & Diu (U.T)	250	8	32.00
10.	Dadra & Nagar Haveli (U.T)	160	1	6.25
11.	Goa	61689	1215	19.70
12.	Gujarat	374078	607	1.62
13.	Haryana	135952	244	1.79
14.	Himachal Pradesh	13851	92	6.64
15.	Jammu & Kashmir	8981	40	4.45
16.	Karnataka	372602	3134	8.41
17.	Kerala	44547	215	4.33
18.	Lakshadweep (U.T)	755	7	9.27
19.	Madhya Pradesh	93062	390	4.19
20.	Maharashtra	370897	37841	102.03
21.	Manipur	28128	4807	170.90
22.	Mizoram	24838	83	3.34
23.	Meghalaya	14070	57	4.05
24.	Nagaland	7011	389	55.48
25.	Orissa	81573	201	2.46
26.	Pondicherry (U.T)	76370	2406	31.50
27.	Rajasthan	21014	234	11.14
28.	Sikkim	187	3	16.04
29.	Tamil Nadu	687934	9660	14.04
30.	Tripura	4234	2	0.47
31.	Uttar Pradesh	75545	529	7.00
32.	West Bengal	157083	567	3.61
Total		3131470	65200	20.82

[Translation]

#### Education for Labourer's Children

2279. SHRI R.L.P. VERMA : Will the Minister of LABOUR be pleased to state:

(a) the number of schools being run by 'Labour Welfare Institution' in Bihar;

(b) whether there is only one Primary, Middle and High School in Karma for the children of thousands of Labourers engaged in Mica, Lime Stone, Dolomite, Beedi and Crusher industry and registration therein has been closed since