

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

UNSTARRED QUESTION NO:486
ANSWERED ON:27.07.2005
ELIMINATION OF KALAAZAR
Ramadass Prof. M

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

- (a) Whether the Government of India has signed a Memorandum of Understanding with Bangladesh and Nepal to eliminate Kalaazar;
- (b) if so, the details thereof; and
- (c) the steps taken by the Government to eradicate this disease by 2015?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE(SMT. PANABAKA LAKSHMI)

(a) Government of India has signed a Memorandum of Understanding with Bangladesh & Nepal on elimination of Kala-azar from the South East Asia Region on 18th May, 2005.

(b) Health Ministers of the three countries, namely, India, Bangladesh and Nepal signed a Memorandum of Understanding (MoU) on Elimination of Kala-azar from the South-East Asia Region on 18th May, 2005 considering that over 147 million people are at risk of contracting Kala-azar in South-East Asia Region particularly in Bangladesh, India and Nepal. MoU has a target to reduce annual incidence of kala-azar to less than 1 per 10000 population at the district and sub-district levels by 2015. Strategies to achieve the target will include access to early diagnosis & treatment, strengthening treatment & vector surveillance, integrated vector management, social mobilization, research & networking. An Inter country Task Force will be established for mobilization of resources, exchange of information and strengthening inter-sectoral collaboration.

(c) Kala-azar is endemic in four States of India, namely, Uttar Pradesh, Bihar, Jharkhand & West Bengal. Government of India launched a centrally sponsored Kala-azar Control Programme in 1991

The main strategy for kala-azar control consists of following major activities:

- a) Vector control through Indoor Residual Spraying with DDT up to 6 feet height from the ground twice annually.
- b) Early case detection and complete treatment.
- c) Communication for behaviour Impact for social mobilization and Inter-sectoral collaboration.
- d) Capacity Building.
- e) Operation research.

The implementation of the strategy resulted in declining trend in cases and deaths upto 1995. However, there has been a setback in 1996. Since then, the number of cases of kala-azar are almost fluctuating year after year between 12,239 to 22,699. Since December, 2003, Government of India provides 100% cash assistance including freight charges for DDT transportation to endemic states for effective implementation of the programme.

A National plan for kala-azar elimination by 2010 has been prepared. Government of India has provided Rs.217 crores during Xth Five Year Plan. In year 2005-06 Rs.58.86 crores have been earmarked. Additional fund from WHO for strengthening the programme has been requested for. Endemic States have reaffirmed their commitment for kala-azar elimination by 2010 at a review meeting held on 12.7.2005 in New Delhi. Kala-azar elimination programme in India sets the target to reduce incidence of kala-azar to less than 1 per 10000 at sub-district levels by 2010.

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