

- (c) convergence through sustainable support system;
- (d) employment generation and skill upgradation; and
- (e) improvement of hygiene and sanitation and environmental improvement.

The main components of the programme are:

(a) Self-employment through setting up of micro enterprises and skill development, (b) Environmental improvement through provision of basic physical amenities, (c) Shelter Upgradation (d) Community organisation & empowerment, (e) Strengthening of Urban Local Bodies (ULBs), (f) Setting up of National Urban Poverty Eradication Fund (NUPEF), (g) Training of functionaries and development of urban base, (h) Involvement of NGOs.

The programme will be applicable to Class II towns with a population of 50,000 to less than one lakh which number 345 as per 1991 census. The scheme was extended to cover 72 district towns in the North-Eastern States, Sikkim, J & K, Himachal Pradesh, Garhwal and Kumaon regions of UP.

#### Urban Basic Services for Poor (UBSP):

UBSP is a dynamic process which functions with the broad goal of creating a facilitating environment for significant improvement in the quality of life of the urban poor. This is envisaged to be achieved through community organisation and mobilisation, empowerment of communities, especially of women in order to equip them in the roles of decision making and community management and a process of convergence to enhance the reach and effectiveness of the existing sectoral programmes for the urban poor who are found not only in slums but in a wide range of conditions and places. It aims to introduce a pro-poor orientation in the design of new programmes and evolve innovative partnership arrangements to fulfill the community's critical needs.

The Urban Basic Services Programme (UBS) in India was initiated during the Seventh Five Year Plan period for urban poverty alleviation. Based on the experience of implementing the UBS Programme and the recommendations of the National Commission on Urbanisation, the Government revised it as urban Basic Services for the poor (UBSP) in 1991 and integrated it with other urban poverty alleviation programmes like Environmental Improvement of Urban Slums (EIUS), Nehru Rozgar Yojana (NRY) and Low Cost Sanitation (LCS).

[*Translation*]

#### Financial Assistance for Madhya Pradesh

9. SHRI PAWAN DIWAN: Will the PRIME MINISTER be pleased to state:

(a) the additional financial assistance sought by Madhya Pradesh during the last three years;

(b) the allocation made by the Union Government, scheme-wise and year-wise;

(c) the reasons for not providing funds as per the demand;

(d) whether the additional financial assistance sought during the current financial year has been released;

(e) if so, the details thereof; and

(f) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF PLANNING AND PROGRAMME IMPLEMENTATION (SHRIMATI RATNMALA D. SAVANOR): (a) and (b) In the year 1994-95 additional central assistance of Rs. 1 crore was given to Madhya Pradesh for widening of road from Ashok Nagar to Esagar in district Guna. An amount of Rs. 25 crore as central assistance was provided in 1995-96 for strengthening of Panchayat Raj System in Madhya Pradesh. No additional central assistance was provided in the year 1996-97.

(c) The additional central assistance is given for various schemes taking into consideration the actual requirement and the availability of resources with the Planning Commission.

(d) No additional financial assistance has been sought by the State Government of Madhya Pradesh in the current financial year.

(e) and (f) Do not arise.

[*English*]

#### Primary Health Centres in Orissa

10. SHRI SOUMYA RANJAN: Will the PRIME MINISTER be pleased to state:

(a) the number of primary health centres and family planning centres functioning in Orissa as on May 31, 1997; and

(b) the amount provided to these centres by the Union Government during 1995-96 and 1996-97?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) As per the available information 1056 Primary Health Centres are functioning in Orissa as on 31st December, 1996.

Family Welfare Services are also provided through a network of Rural Family Welfare Centres, Post Partum Centres, Urban Family Welfare Centres and Urban Health Posts. In the State of Orissa there are 314 Rural Family Welfare Centres, 79 Post Partum Centres, 10 Urban Family Welfare Centres and 8 Urban Health Posts.

(b) Primary Health Centres are established and maintained by the State Government under the State sector Minimum Need Programme. 100% financial assistance is provided to the States for Rural Family Welfare Centres,

Post Partum Centres, Urban Family Welfare Centres and Urban Health Posts. Details of the amount allocated to these Centres during 1995-96 and 1996-97 are given in the attached statement.

**Statement**

|                              | 1995-96        | 1996-97 |
|------------------------------|----------------|---------|
|                              | (Rs. in lakhs) |         |
| Minimum Need Programme       | 1293.00        | 1961.00 |
| Rural Family Welfare Centres | 925.00         | 925.00  |
| Post Partum Centres          | 228.00         | 228.25  |
| Urban Family Welfare Centres | 16.00          | 15.00   |
| Urban Health Posts           | 25.00          | 24.00   |

**Cash Incentive for Family Planning Programme**

11. SHRIMATI LAKSHMI PANABAKA: Will the PRIME MINISTER be pleased to state:

(a) whether Elabotharam village in A.P. had been selected for the incentive for successful implementation of the family planning programme by the Government;

(b) if so, the incentive awarded;

(c) whether incentive amount will be spent on the development of the village;

(d) if so, the other districts where family planning programmes have been fully implemented in A.P. State;

(e) whether Andhra Pradesh is the only State where a number of districts have been able to achieve the family planning targets; and

(f) if so, the incentives provided to the other villages/districts?

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

(b) Rs. 2.00 lakh.

(c) The award money is intended to be used only for developmental works in Elabotharam village.

(d) The Family Welfare Programme is implemented in the districts of Andhra Pradesh.

(e) and (f) The Family Welfare Programme has dispensed with setting of contraceptive method linked targets from April, 1996. Under the 'Community Award Scheme', 249 villages in as many districts of 14 States and Union Territories have been sanctioned Awards of Rs. 2.00 lakh each, for efforts in lowering Birth Rate, Infant Mortality Rate and Child Mortality Rate.

[Translation]

**Hospitals/Dispensaries in Gujarat**

12. SHRI CHHITUBHAI GAMIT: Will the PRIME MINISTER be pleased to state:

(a) whether any hospital/dispensary has been set up in Gujarat with the help of World Bank during the Eighth Plan; and

(b) if so, the location-wise details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) No hospital/dispensary has been set up in Gujarat with World Bank assistance during the Eighth Plan. However under the IPP VII Project, which is being implemented with World Bank assistance, 578 sub-centres have been constructed in Gujarat during the 8th Plan period.

**Poverty Line**

13. SHRI ASHOK PRADHAN: Will the PRIME MINISTER be pleased to state:

(a) whether the Uttar Pradesh Government has requested the Union Government for increasing the economic ceiling of Rs. 11850 (based on the year 1991) to Rs. 15000 for identifying the people living below poverty line;

(b) whether such requests has also been made by other State Governments also; and

(c) if so, the details thereof and the reaction of the Government thereon?

THE MINISTER OF STATE IN THE MINISTRY OF PLANNING AND PROGRAMME IMPLEMENTATION (SHRIMATI RATNMALA D. SAVANOOR): (a) to (c) The Planning Commission has not received any specific request from the State Government of Uttar Pradesh to raise the economic ceiling to identify the people below the poverty line from Rs. 11850 to Rs. 15000. However, such a request has been received from the State Government of Maharashtra. The poverty lines are generally updated at the beginning of the Five Year Plan. The work on the Ninth Five Year Plan is in progress.

**Heart Surgery**

14. SHRI RAJESH RANJAN ALIAS PAPPU YADAV: Will the PRIME MINISTER be pleased to state:

(a) whether there is no provision for free heart surgery for the poor and low income group heart patients in Government hospitals and a heavy amount is charged from them;

(b) if so, whether any effective steps are being taken by the Government to make arrangements for heart surgery at divisional (pramandal) level;