

(c) The information is being collected and will be laid on the Table of the House.

Establishment of Herbaria in Andhra Pradesh

5086. SHRI B. S. MURTHY : Will the Minister of HEALTH AND FAMILY PLANNING be pleased to state :

(a) whether the Central Government has given any funds for establishing herbaria in Andhra Pradesh during 1972-73 and 1973-74 ; and

(b) the existing herbaria in that State and the Central grants for the same during the Fourth Plan ?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI A. K. KISKU) : (a) and (b). No. However, the Central Council for Research in Indian Medicine and Homoeopathy is having a Regional Research Centre with Survey of Medicinal Plants Unit as one of the components at Vijayawada, Andhra Pradesh. The herbarium of the Centre has about 1400 mounted herbarium sheets.

12.15 hrs.

CALLING ATTENTION TO MATTER OF URGENT PUBLIC IMPORTANCE

Reported decision of senior doctors in Delhi hospitals not to attend Out-Patient Departments.

SHRI P. M. MEHTA (Bhavnagar) : I call the attention of the Minister of Health to the following matter of urgent public importance and I request that he may make a statement thereon :—

"The serious situation arising out of the reported decision of senior doctors in Delhi hospitals not to attend out-Patient Departments."

THE MINISTER OF HEALTH AND FAMILY PLANNING (DR. KARAN SINGH) : As Hon'ble Members are aware, senior doctors of the Delhi hospitals have maintained hospital services during the last

three months despite the junior doctors' strike. The advent of the warm weather has, however, led to an increase in the number of patients, and the under-graduate medical students who were on strike have also reported back for their classes, thus requiring some of the senior doctors to resume their teaching responsibilities. In the All India Institute of Medical Sciences, based on a representation from some of the faculty members, the Medical Superintendent felt that to reduce the load on the senior doctors, the speciality services in the OPD could be progressively curtailed. When this was brought to my notice, I immediately contacted the Director and indicated to him that however great the strain, the services to the suffering public should be maintained at a reasonable and adequate level. The Director assured me that this would be done. Many senior doctors of Safdarjang and Irwin Hospitals have lately complained about the strain being felt by them.

On Monday the 25th some of the striking junior doctors and under-graduate medical students came to the Out-Patient Departments of both the All India Institute and the Safdarjang Hospital in large numbers, and tried to persuade the registration staff not to register the patients. They had earlier put up posters on the campus that the Out-Patient Departments would be closed from Monday. They also prevented patients from going in and physically pulled out two doctors who were attending to them, which was resented by the patients. The modus operandi adopted by them was to block the OPDs by queuing up for registration cards and displacing the genuine patients. After obtaining registration cards, they entered the service cubicles of the OPD doctors and mobbed them. These actions naturally disrupted the working of the OPD services. These disruptive elements were, however, later persuaded to vacate and the OPD services were resumed. The other three hospitals were not affected.

On Tuesday the 26th five bus-loads of students and junior doctors from Maulana

Azad Medical College and the All India Institute invaded the premises of the Safdarjang Hospital. They attempted to upset the working of the Orthopaedics, Surgical and Medical OPDs, but were not successful. They later went to the Lady Hardinge Medical College and Willingdon Hospital. In the meantime, information having been conveyed to the Medical Superintendents, timely precautions to close the gates and prevent their entry was taken. Thus, while the OPD services were disturbed to some extent in the Safdarjang Hospital, they functioned in all other hospitals. On Wednesday the 27th the OPD services have functioned in all the five hospitals.

Information just received regarding the situation this morning shows that while the OPDs are functioning in the All India Institute, Safdarjang, Willingdon and Lady Hardinge Hospitals, attempts have again been made to disrupt services in the Irwin and Pant Hospitals. It seems that a large number of students and junior doctors have invaded the premises and are interfering with the work of the OPDs. I am sure Hon'ble Members will agree that such behaviour is most unfortunate and reprehensible.

I have on the floor of this House expressed my appreciation of the services rendered by senior doctors during the strike period in very difficult conditions. It is my sincere hope that they will continue to perform their duties conscientiously and with the sense of broader responsibility that they have displayed so far.

SHRI P. M. MEHTA : Mr. Deputy Speaker, Sir, I had never expected this type of statement from Dr. Karan Singh. I think the Ministry has misled him and by drafting this statement they have added to the difficulty in these difficult days. This statement has created further difficulties for the Minister to solve the dispute. It is most unfortunate that Government has tried to escape from the responsibility and they have tried to put the responsibility on the junior doctors. The genesis of the problem is the non-implementation of the March

1973 agreement by the Government. The Secretary of the Ministry is responsible for this. He has not attended to the genuine problems of the junior doctors during the whole year 1973 and even thereafter.

Now, it is a tragedy that for the fulfilment of the genuine demands and grievances, the engineers, the doctors, the teachers and professors in the universities, and the students are compelled to resort to direct action. This is because of the attitude and the policy of the Government towards the intelligentsia and the working classes in the country in the unorganised and the organised sectors or in the public and the private sectors. This issue involves a basic problem. and...

MR. DEPUTY-SPEAKER : What is the information you want? You have given the information!

SHRI P. M. MEHTA : The immediate issue is that the senior doctors of the city hospitals have taken a decision to refrain from attending to the outpatient departments because of the heavy strain put on them by the 85-day old indefinite strike by the junior doctors, and they have also resolved to boycott the out-door patients department until the junior doctors' disputes are settled.

What is the dispute of the junior doctors? Most of their demands were settled by bipartite negotiations and now, only one or two points remain to be solved. What is the demand? Their demand is very genuine and very reasonable. What they ask is to safeguard their career against victimisation. This is based on past experience of the doctors as well as of the other employees of the Government.

These are the points on which they require an amicable settlement. The demands are these: there shall be no victimisation of any kind of any of the striking doctors. All punitive action taken/initiated against the striking doctors shall be withdrawn immediately. No mention of the present strike shall be made in the official records and in

[Shri P. M. Mehta]

the certificates to be issued to these doctors in future. All doctors who were on rolls or were selected to join as on 1-1-1974 shall be allowed to complete their respective terms of appointments. The period of strike, excluding Sundays and gazetted holidays, not adjusted against the leave of the kind due and the future Sundays and gazetted holidays in respect of both junior and senior residents, shall be treated as extraordinary leave without pay and shall be governed by the principle of "No Work, No Pay." The question of continuity in the terms of internship shall be referred to the Medical Council of India for sympathetic consideration and the dates of future recruitment to the posts of junior residents shall be suitably adjusted so that these doctors are not put to any disadvantage.

The other point is regarding the non-practising allowance. Both these points are very genuine and very reasonable and rational. Now there is a conflict.

MR DEPUTY SPEAKER : You are confusing a very good case by bringing in too many things. Let the Minister reply to your points.

PROF. MADHU DANDAVAT : (Rajapur) : At this rate he may become a Minister one day!

MR. DEPUTY SPEAKER : That is the ministerial prerogative!

SHRI P. M. MEHTA : This is the only opportunity which this House has been given for discussing the genuine demands of the junior doctors.

MR. DEPUTY SPEAKER : I want this to be put effectively and pointedly. I want Members to come out with hard punches.

SHRI P. M. MEHTA : I gave the background, because he has conveniently kept silent on all those points regarding the doctors. He has simply tried in his statement to fix the responsibility on the senior doctors and the junior doctors. Therefore, I stated all these things. Now, there is a conflict between the Secretary and the Minister and that is the reason why this dispute is not yet solved.

Now, I want to put my question. I want to ask why the agreement of 31st March, 1974 was not implemented? What were the reasons for non-implementation? I also want to know why the Government has backed out from the assurance given during the course of negotiations regarding the mode of treatment of the strike period? Why did the Government make a show of strength by deploying armed and lathi-wielding police in the premises of all the strike-bound hospitals? Is the hon. Minister aware that the CGHS and municipal doctors have also resolved not to replace the senior doctors to run the out-patient departments? Why do not the Government hold the Secretary concerned responsible for this agitation which was due to his backing out from the 14th March agreement? Lastly, how many deaths have taken place in the hospitals due to non-availability of medical help in time to the patients and how many more does he expect before the dispute is settled?

DR KARAN SINGH : The hon. Member seems to be asking questions which are about the genesis of the problem with the junior doctors. The call attention notice, as I understood it, was with regard to senior doctors' reported decision not to attend the OPD. I have submitted in my reply the factual situation and I have not tried to mislead the House. I may also add that there has been no blanket decision by the senior doctors to boycott the OPD in various hospitals but they have expressed their difficulties and explained to us that they were under great strain. As I said in my statement the OPDs are functioning in several hospitals except where they have been deliberately disturbed.

With regard to the problem of junior doctors, I should submit for your consideration that the House had several opportunities of discussing this matter very carefully and I have also spoken on it. The matter, I hope, is nearing some kind of a finality and I submit that this is not the time for me to get involved in a long discussion with regard to junior doctors. As soon as I am ready with some statement,

I shall come before the House. In my previous statement I have said that Government had not backed out of any agreement. I should like to controvert that statement made by the hon. Member. Therefore, with your permission, I want to say that I do not like to be drawn into a long debate on the junior doctors' problems this morning because that matter is under very careful consideration at present.

SHRI AMRIT NAHATA (Barmer) : On a point of order. The statement given by the hon. Minister tells us firstly that there is no strike in OPD in the hospitals; he also says that some junior doctors went in truckloads to the hospitals and created some disturbances and he has described this as reprehensible. I want to read out from the Press report which is absolutely contradictory. It says the police went there in truckloads. Whose behaviour is reprehensible? There is a strike but he says there is no strike?

डा० लक्ष्मी नारायण बाबू (मदसौर) : पुलिस ने कहा सीनियर डाक्टरों को बसीट कर निकाला है 6 सीनियर डाक्टरों के साथ इस तरह हुआ है यह अखबार में लिखा है (अबधान) टाइम्स आफ इन्डिया में यह समाचार छपा गया है। पुलिस ने यादगी की है। दृष्यवहार किया है।

MR. DEPUTY SPEAKER : He has raised a point of order and I shall confine myself to the point of order. . . (Interruptions) . . The matter now under discussion is the call attention motion. Some questions have been put by the hon. Member and the hon. Minister has replied. Other Members are yet to put questions. Many Members say that they do not like the reply of the hon. Minister or they are not satisfied. But that is no point of order. If you are not satisfied then you should come forward with some notice.

SHRI S. M. BANERJEE (Kanpur) . You allow a discussion.

MR. DEPUTY SPEAKER : You give notice and it will be considered. It cannot

be done in this way. You may not be satisfied and there may be reasons why you are not satisfied. . . (Interruptions)

SHRI AMRIT NAHATA (Barmer) : The Minister says that there is no strike, in fact there is a strike.

MR. DEPUTY SPEAKER : A point of order has been raised and I have given a ruling. The only point of order now could be that you are creating disorder in the House by such interruptions.

SHRI AMRIT NAHATA : He is misleading the House . . (Interruptions).

MR. DEPUTY SPEAKER : Order order. You send notice. It will be considered.

श्रीमती सवित्री श्याम (बावला) : उपाध्यक्ष महोदय, मैं डा० कर्णसिंह जी के स्टेटमेंट की मगहना करनी है इसलिए कि उन्होंने स्टेटमेंट आफ फैक्ट्स दिया है। वस्तुतः स्थिति क्या है, हमारे दिल्ली के बड़े अस्पतालों में इस स्ट्राइक के कारण वह उन्होंने बताई है। लेकिन मैं उनकी इस बात से सहमत नहीं हूँ कि स्ट्राइक नहीं है इसलिए कि कोई भी ऐसी मेडिकल जगह पर, प्रोफेशनल जगह पर बाई भी ऐसा प्राविधान नहीं है जैसे कि इन्स्टीट्यूट ऑफ डिप्लोमा इन फिजियोलॉजी में है कि पहले नोटिस दे या क्या करें। मैं अखबारों के माध्यम पर तथा अपनी जानकारी के माध्यम पर कह सकती हूँ कि सीनियर डॉक्टर्स ने स्टेटमेंट दिया है और उन्होंने रेजोल्यूशन भी पास किया है। इस बात को मैं मानने के लिए तैयार नहीं हूँ कि केवल वर्कलॉड के कारण उन्होंने ऐसा किया है। जूनियर डॉक्टर्स महानो से स्ट्राइक पर है और वे काम से दबे जा रहे हैं—केवल इसलिए दिया है, ऐसी बात नहीं है। उन्होंने इसलिए दिया है कि जूनियर डॉक्टर्स के संबंध में जल्दी से जल्दी फैसला किया जाये। उन्होंने साथ साथ यह भी कहा है कि हम कौजसल्टी और इमर्जेंसी वार्ड को बंद करने रहेंगे, इसके लिए वे बर्धार्ड के

पाव है। मैं माननीय मंत्री जी से जानना चाहती हूँ कि जूनियर डाक्टरों के साथ ममता करने में श्रीर स्ट्राइक खत्म करने में क्यों देर हो रही है? मैं जानती हूँ मंत्री जी का एटीट्यूड महानुभूतिपूर्ण है और प्रधान मंत्री जी भी अपना कन्वर्न सो किया है और बताया है कि शीघ्र से शीघ्र वे चाहती हैं कि जूनियर डाक्टरों की स्ट्राइक समाप्त हो जाँ महीनो से चल रही है और जिसमें सारी व्यवस्था वैरिटाइज कर रखी है? वे डाक्टरों को तरह तरह की फैसिलिटीज बढ़ाने की बात करते हैं वे उसी जनता को परेशान करने हैं जिसकी कीमत पर वे तयाम इन दुनिया भर की महत्त्वियों को मामले के लिए तैयार होते हैं। उनकी यह स्ट्राइक पॉस्टिफाइड नहीं है। अपनी डिमान्ड रखना धन्य बान है लेकिन जनता को परेशानी में डालना दूसरी बात है। इसके लिए गवर्नमेंट को बिल्कुल काऊ-डाउन नहीं होना चाहिए, बिल्कुल झुकना नहीं चाहिए मकिन उनकी गैजनेबिल मागों का धन्य स्वीकार करना चाहिए, यह मैं मानती हूँ। मैं मंत्री जी से जानना चाहती हूँ कि इस स्ट्राइक में, जूनियर डाक्टरों से मेरा मतलब है, भले ही वे कहें कि हम प्रश्न का सबध जूनियर डाक्टरों में नहीं है, बड़े डाक्टरों से सबध है लेकिन उसके कारण जा देर हो रही है और साथ ही कैबिनेट से बात जाने वाली है, मैं ममतानी हूँ बहा पर डाक्टर कर्ण सिंह अपनी पूरी सिध्दियों हम बान में दिखायेंगे कि एक डाक्टर कितनी मेहनत और कितनी कीमत पर बन कर तैयार होता है (अवधान) एक डाक्टर दस वर्षों की मेहनत के बाद तैयार होता है और आई० ए० एम० ऑफिसर जो उनके ऊपर शासन करते हैं उनसे वे किमी तरह से कम नहीं हैं। जितने भी प्रोफेसनल हैं, इंजीनियर्स या डाक्टरों उनके लिए बुनायत की बान है कि वे आज खड़े हुए हैं एडमिनिस्ट्रेटिव सर्विसेज और व्युरोक्रैट्स से क्योंकि उनके धन्य सुपीरियार्टी कामनकम भा गया है और इनके लिए गवर्नमेंट भी तुरन्त ही देती है।

मैं माननीय मंत्री जी से जानना चाहती हूँ कि वे बार बार जी० सी० इश्यु करते रहे हैं, 1-3-74 को उन्होंने इश्यु किया जिसमें उन्होंने कहा:

"The period of strike will be treated as unauthorised absence on the principle of: no work, no pay."

इसके बाद उसी तारीख को दो-बार बंदे के बाद उन्होंने अपना स्टैंड बदला और उन्होंने कहा

"The Health Ministry would recommend to the concerned State Government to take similar action"

यहाँ पर दिल्ली के जो डाक्टर हैं, जो पोस्ट ग्रेजुएट हैं, इन्टरनिंग में हैं या हाऊस जाब में हैं उनके साथ दूसरा व्यवहार होगा और जो स्टेट के भाये हुए हैं उनके साथ दूसरा व्यवहार होगा। इस सबध में फ्राम टाइम टु टाइम बार नोटिसेज 7 में 14 तारीख तक आपकी निकली हैं। (अवधान) माननीय मंत्री जी से प्रश्न है क्या मंत्री जी इन बड़े अस्पताला का बिना जूनियर डाक्टरों के चला सकत हैं?

मेरा दूसरा प्रश्न है क्या जा मेडिकल कौमिल आफ इंडिया ने सिफारिश की है, जो कर्तार सिंह कमेटी ने सिफारिश की है इन्टरनिंग, हाऊस-जाब और पोस्ट ग्रेजुएट के सबध में कि रेगुलर सर्विस में उनको मान लिया जाये, उनको वैरिटी दी जाय, और साथ जो नान-सिफिडिंग एलाउन्स है वह भी दिया जाये-क्या इन सिफारिशों को मानेंगे?

मेरा तीसरा प्रश्न है क्या डिफिटमार्डेबलन समाप्त करने के स्ट्राइक पीरियड को उनकी तरह तरह की जो लीव होती है उसमें शामिल करके उसको कन्वोज किया जायगा? इसके बाद डाक्टरों पर, चाहे वे सीनियर हो या जूनियर, यह प्रतिबन्ध लगाया जायगा कि साल दो साल के लिए वे इस तरह की कोई स्ट्राइक नहीं कर सकेंगे और गवर्नमेंट भी उनके सामने नहीं मुकेगी? यह उन तरह की कोई स्ट्राइक नहीं है जिसका प्रोडक्शन से ही संबंध ही बकि इसका सबध साधारण जनजीवन से है इसलिए इसका बहा महत्व है।

बन्धुत्व सिद्ध: उपायमय महोदय, माननीय सदस्या ने बहुत सी बातें कही हैं। एक बात तो यह कि मैंने यह कभी नहीं कहा कि स्ट्राइक नहीं है। स्ट्राइक इंग्लिशर इन्फर्न्स की है। इसके प्रभावों को प्रथम श्रेणी बुझ गया था सीनियर डॉक्टरों के संबंध में यह थो० पी० डी० के संबंध में था इसलिए मैंने थो० पी० डी० के संबंध में उत्तर दिया। पहली बात तो मैं यह स्पष्ट करना चाहता हूँ।

दूसरे आपके खयाल से जो पुलिस वाला प्रश्न है, क्योंकि इस किस्म का डिस्ट्रिप्शन हो रहा था, ला लैंड आर्डर को बिगाड़ने की कोशिश की गई थी इसलिए पुलिस बल मोड में बहा गई थी। यह जो आत्म बख्शारी में निकलना है कि पुलिस न 8 इन्फर्न्स को घसीटा, मुबह इसको पहकर मैं भी धारणवर्धकित रह गया। जब मैंने इसका पता लगाया तो मान्य हुआ कि यह खबर विस्तृत निराधार है और बहा पर मैं इसका कौन्सिलरिन्स डेनायल करना हूँ। (अबखाल) मैंने चेक किया अपने स्ट्राइक से और पुलिस के। (अबखाल) टाइम्स आफ इंडिया ने जो निकला था उसमें भी यह लिखा था

'The report could not be confirmed'.

मैंने बड़ा दुःख है कि इस प्रकार की रिपोर्टों को कन्फर्म हो, इतनायन अपने रिपोर्ट हो वह छाप दी जावे। बहुरहाल जैसा मैंने कहा, मैंने उसको चेक किया।

SHRI PILLOO MODY (Godhra): What do you do about the Report?

DR. KARAN SINGH: What can we do about it?

Today, on the floor of this House, I am denying it.

SHRI AMRIT NAHATA: *The Times of India* report says.....

DR. KARAN SINGH: That report is not true.

5 LSR/4-7

SHRI AMRIT NAHATA: What about truck loads of police ..

DR. KARAN SINGH: Police has been posted. The two things are not mutually contradictory.

Sir, the hon. lady Member has made some very valid and pertinent observations with regard to the whole problem of junior doctors. She has said quite rightly that this is not only a service matter, but, it also affects the welfare of large sections of the people. As I submitted earlier, with regard to all these problems, whether it is NPA or treatment of strike period and so on, we are now nearing a final solution. Therefore, all I can say now is, as soon as a decision is taken, we will come before the House and inform the House of the decision taken.

SHRI D. D. DESAI (Kaira): Sir, most of the revolutionaries in the world have their origin in injustice. I would request the minister not to be carried away by the departmental views but to make on the spot investigation and come to his own conclusion on the basis of conscience and justice.

Is it a fact that the Health Ministry officials were unaware of what could happen if the senior doctors too boycotted the OPDs, till it actually happened? If so, does it not mean that his ministry has lost touch with realities and is living in a make-believe world?

Has the ministry any firm opinion on what doctors serving its public health system should get and should not get or is it a question of first saying "we will not give this" and then giving in to it and then saying "we will never give this, come what may" and then again waiting on events to force the hands of the Government?

Is it a fact that the Health Ministry had contacted senior doctors on the eve of their boycott and conveyed to them its wish that they should not boycott OPDs? If so, does not the rejection of this appeal reveal a lack of confidence or rapport bet-

ween the most senior men in the profession working in hospitals and their executive colleagues in the offices of the Ministry ?

If the Government now thinks that no harm will come if the victimisation clause is given up, was it necessary to subject the public to further harassment since the draft agreement was hammered out early this month ?

Does the countrywide discontent of the medical profession now surfaced demand, in the opinion of the ministry, that a second look should be taken on the Government subsidised public health system and the role of the medical profession in it ? If the answer is yes, what steps are being taken to study this aspect and come out with immediate corrective steps before this system is expanded further, as it must be, in the fifth plan ? If the answer is no, how does Government expect to meet the discontent in the medical profession which is bound to grow with the increase in inflation, the bureaucratisation of the profession and the visible shift from medical duties to paper work of an increasing number of these professional men, in their day to day work ?

MR. DEPUTY-SPEAKER : These are broader questions of medical administration and medical facilities in the country. We are concerned with the OPD and the reported decision of the senior doctors to boycott it and that is connected with the trouble of the junior doctors. We cannot go over the entire gamut of medical administration in the country.

DR. KARAN SINGH : The first question was with regard to our being rigid and bureaucratic. I can assure the House that I have approached this very difficult problem not at all in any bureaucratic or rigid spirit. I have tried my very best to understand the problem and meet the aspirations of the people as far as we could. I would like to place that on record. What comes out of it ultimately is a different matter, but this has been my approach.

He asked, what would happen if senior doctors do not attend the OPDs ? Obviously, if the junior doctors are on strike and if senior doctors also do not attend the OPDs, the OPDs will close down, because the only two doctors remaining will be Dr. Karan Singh and Dr. Srivastava who is the DGHS, the rest of the doctors being either junior or senior. With regard to the question as to what should be paid to various types of doctors, the entire Government of India doctors have been covered by the Pay Commission's report, except for the junior residents. They have looked into it very carefully and that is part of the problem with which we are grappling now. He said that the DGHS has been in close touch with the senior doctors in various hospitals and has been trying to persuade them that going on strike or refraining from attending OPDs will create a great deal of problems and troubles for the patients. It is to a large extent because of this dialogue that there has been no boycott, except disruption in two places. Regarding the broader question of medical education, as I have said on the floor of the House, we are planning to set up a Medical Education Commission, which alone can look into the whole gamut of the problem that the hon. Member has raised.

SHRI C. K. CHANDRAPPA (Telli-cherry) : I am extremely sorry that Dr. Karan Singh has been trying so desperately to evade the real problems involved in the strike by the senior doctors.

SHRI PILOO MODY : Even his stethoscope is false !

SHRI C. K. CHANDRAPPA : The hon. Minister was trying to impress upon the House that he will deal only with the strike by the senior doctors and the difficulties caused by the closure of the OPD. But, I am sorry, I cannot oblige him because the real question which brought about this situation, in which thousands and thousands of people are put to difficulties, in fact the real genesis of the whole trouble, is the continuing strike by the

junior doctors. So, we cannot shut our eyes to that aspect of the problem.

Here I would like to point out that in recent times the Government is adopting a tough, authoritarian and highly bureaucratic attitude towards strike by the working people, be it the doctors, the employees of the LIC or the railway workers. Whenever the workers collectively bargain for their legitimate rights, the government come on them with an iron hand. When something untoward happens because of this, the Government immediately start shouting "fascism is coming, save us". I say that you are responsible for creating this explosive situation in the country, and Shri Piloo Mody is trying to make use of this situation.

SHRI PILOO MODY : I am keeping my health all right

SHRI C. K. CHANDRAPAN The Government should not behave in the same old fashion of the kings, monarchs, of the Diwans of the British days.

MIR DEPUTY-SPEAKER . Your point is very clear that the Government is authoritarian and bureaucratic. So, come to the question

SHRI C. K. CHANDRAPAN . Shri Srivastava, the Director General of Health Service, also a doctor, to whom you made a reference, is the villain of the piece. I know that Dr. Karan Singh is asked to play a role which he does not like. He has been assigned the unpleasant task of repeating here what he has been asked to say, by the people who are sitting at the helm of affairs in Nirman Bhavan. They still behave in a bureaucratic manner and the Minister has to defend them. So, I appreciate his difficulty.

The Minister began by saying that there is nothing to negotiate. Now the differences have already been narrowed down by negotiations. They have already come to an agreement which is described by the Minister as package deal. Doctors are apprehensive of clause 7 of that package

deal. They apprehend that if they withdraw the strike then some action will be taken against them under clause 7. So, I want an assurance from the Minister that no harm will come to them under this clause, if they withdraw the strike.

He should make an assurance on the floor of the House that he will not victimise a single doctor in the name of their participation in the strike, that their continuity of service will be accepted and there will not be any break in service because of their participation in the strike. If he can make this simple assurance, tomorrow they will offer for settlement. If he wants any help from this side of the House, right from Mr. Piloo Mody to this side, the people are ready, I suppose, to help him. But the Government is not ready to concede to the legitimate demands put forward by the doctors. If he can make this assurance, then we can bring about a settlement. If he takes that high and mighty attitude and try to run the hospitals with policemen, then I would like to remind him that he is trying to deal with a highly inflammable material. They are all young people; they are educated. It is not a question of doctors only. All kinds of people are trying to collectively bargain. If he tries to put them down, there will be an explosion which he will not be able to prevent.

I would like to request him through you, Sir, to make a simple assurance that he will deal with the matter in a most sympathetic, reasonable and friendly manner

DR. KARAN SINGH Sir, the hon Member has made one or two broader remarks about our policy in regard to labour. I do not intend to go into that except to say that the charge that we have been authoritarian or unreasonable is something which I must deny.

Also, there is no question of evading the problem. I have plunged into this problem so much personally that, as you know, I went on with a mild attack of doctoritis because I was in such close

[Dr Karan Singh]

contact with so many doctors. I am approaching the issue in what I consider to be a sympathetic, reasonable and constructive manner.

There are, never-the-less, certain parameters, certain policies, within the ambit of which one has got to function. The hon. Member wants an assurance from me. The only assurance that I can give is this that we are seized of this problem. I am trying to approach it as sympathetically as possible and whatever maximum I can do for the doctors, I will do. I am afraid, at this stage, it is not possible for me to either go into more details or to give a more categorical assurance.

श्री विभूति मिश्र (मोतीहारी) उपाध्यक्ष जी की प्रश्नमाई नेहता ने दस मिनट लिए। चन्द्रप्यन जी ने बारह मिनट लिए। पहले इसका फैसला करें तब मुझे समय दे तब तो मैं बोलू नहीं तो मैं बैठ जाऊ। (स्वबचाल) मैं बड़ी बेचता रहा हूँ। इनको दस मिनट इनको बारह मिनट दिए तो आगे जो भी उनका ही समय देने का कष्ट कीजिये।

एक भाषणोप सवस्य: इनको पंद्रह मिनट दें।

श्री विभूति मिश्र: कोई बहंगा यह ज्योमेट्री है। ज्योमेट्री के बाद कोई कहेगा यह विन्दु है। आप कहने लगे कि ज्योमेट्री क्यों कहा विन्दु क्यों कहा इसलिए कि विन्दु से ज्योमेट्री बनती है।

नीतिपर डाक्टर स्ट्राइक पर जा रहे हैं, काम नहीं कर रहे हैं उनका सबसे जूनियर डाक्टरों के साथ है। इसलिए यह सवाल उठता है। कर्म सिंह जी की जितने डाक्टर आए तब ने टारिक की (स्वबचाल) विफल यह है कि नीकर बाड़ी के फकर में वे पड़ गए हैं। बचिस ने जवाहर साह नेहक जी को जेल में बन्द किया। उसी बचिस ने जवाहरसाह जी के साथ बराबरी का बरसाह किया। कर्म सिंह जी बहुत अच्छे धीर वाले सादबी हैं। बाल अच्छे वाले भावनी हैं।

उनको उनकी भांगी को सहायपूर्वक बेचता चाहिये। हिंसा की मैं निन्दा करता हूँ।

क्या आप जूनियर डाक्टरों को क्षमा बुला करके धीर अपने स्टाफ को हटा करके उन से बात करेंगे धीर बात करके उनके साथ फैसला करेंगे ?

क्या यह सही नहीं है कि सब समझौता हो गया है धीर छुट्टी का सवाल सबिस का सवाल, विक्टिमाइजेशन का सवाल ही क्या है। उनकी सबिस को जोड़ने के लिए, उनके पीरियड को जो स्ट्राइक का है सबिस ने जोड़ने के लिए, यह कैस हो, क्या डा० कर्म सिंह खुद स्टाफ को हटा कर उन डाक्टरों से बात करेंगे। डाक्टर उनके साथ समझौता करने का तैयार हैं।

मैं आपको बताना चाहता हू कि नीकरसाही मुगल राज को खा गई, अंग्रेजी राज को खा गई और आपको भी खा जायगी और उनके बाद हम भी चले जायेंगे। आपने नर्मों के साथ समझौता किया, एल आई सी वालों के साथ किया, आप कैबिनेट मिनिस्टर हैं, कैबिनेट की ज्यादा रिस्पॉन्सिबिलिटी है, मैं जानना चाहता हू कि उसी आधार पर आप इनके साथ क्यों नहीं करेंगे है।

ऐसे भी डाक्टर है जो हमारे फ्रीडम फाइटर के सखी हैं। इतना ही बजह से सब को तकलीफ हो रही है। इसकी वजह से सीनियर डाक्टरों का काम का बोझा बढ़ गया है। डा० करीबी ने कहा कि आपको कहें कि समझौता कर लें, डाक्टरों का विक्टिमाइजेशन न हो। डा० करीबी भले डाक्टर हैं। डा० कर्म सिंह नीकरसाही के फकर में पड़ कर क्या यह समझते हैं कि एका गद्दी ह्वारे हाथ में बराबर बनी रहेगी ? डाक्टर मैम्बर पार्लियामेंट हो सकते हैं; एसीएमसी के मैम्बर हो सकते हैं, मिनिस्टर हो सकते हैं। 2500 डाक्टर आपके मासहूत दिल्ली में हैं। जैसे आप अपने भेदों, वेदों, भाई कण्डू के साथ बाने पीने का बरसाह करते हैं उसी तरह के आप इनके साथ समझौता कर के समझौता करने की तैयार हैं व्हुटेकैड्रस को इस में के हदयों के लिए तैयार

हैं ? उनके साथ साथ बैठने हैं तो वे आप की तारीफ़ करती हैं, आप उन से नर्म नर्म बात करती हैं । लेकिन साथ में लगड़ा घट जाना है । डा० कर्ण सिंह दूसरी चीज के डाक्टर हैं वे दूसरी चीज के हैं । जिस चीज के वे डाक्टर हैं उस बजह के इन में ममियत है और वे बेचारे चीर फाट करने वाले डाक्टर हैं । सब बातों पर समझौता हो गया है । अब क्या विक्टिमाइजेशन हटाने के लिए आप तैयार हैं या नहीं हैं और यदि हैं तो पार्लियामेंट में आप दो दिन के अन्दर कोई बयान देने को तैयार हैं ताकि डाक्टर सब काम पर आए और जनता का काम हो सके ? जो इनकी परीक्षा की महुलियन का मवाल है, सीनियारिटी जूनियारिटी की महुलियन का मवाल है उरा भी, लीस्ट भी उनको मुकमान नहीं होगा क्या आप यह धार-वामन देने को तैयार है ? विक्टिमाइजेशन की जो वफा है उसको हटा कर, डाक्टरों को निर्मल मन का बना कर उनको आप अपने काम में लगाने, इनका ही मुझे कहना है ।

डा० कर्ण सिंह : पहिले जो बड़े बुजुर्ग सदस्य है । उनकी बात की मैं बड़ी कद्र करना हूँ । उन्होंने कहा कि डाक्टरों के साथ ऐसा मलूक करना चाहिये जैसे अपने घर वालों के साथ किया जाता है । मैं प्रार्थना करूँगा कि मैंने जब इन में बात की चार पाँच दिन मयालार और छ-छ और घाट-घाट बंदे तो मैं ने विनिस्फुटी में नहीं की । मैंने इनको अपने घर में ही बुलाकर की । इसका कारण यही था कि उनको यह विचार न हो कि हम एक प्रकार के सामाजिक डंग से इस मामले को देख रहे हैं । मैंने व्यक्तिगत रूप से इन से बात की और मेरा रईसा हुनका ही इनके साथ बड़ा विमल रहूँ है । म्यूनेसिपी का कहीं कोई मवाल नहीं है । जब भी एकीकृत करना होना है तो सब गवर्नमेंट पार्लियामेंट भी होती उन्हें वका मवाल भी उस में उलझा है, काइनेस मिनिस्फुटी का मवाल भी उलझा है और सब सब कावों को कमीशर करना पड़ता है । इसका मवाल महु नहीं होता है । बहुत तो ऐसी वक्तें होती हैं जिस का अन्तर बुजुरी अन्तही पर भी पड़ता है ।

श्री कूल चन्द बर्वा (उज्जैन) : कितने साल लगेगे ?

डा० कर्ण सिंह : आपसे ज्यादा मुझे इनकी फिक्र है, बहुत ज्यादा है । मैं तो नब्बे दिन से इस में उलझा हुआ हूँ । यह न ममझे कि हम अपनी नरफ से कोई डील कर रहे हैं । हम तो दिनरान इस में लगे हुए हैं । बल्कि अन्य जो कार्य थे और जो मुझे करने थे टैन्थ और फेमिली प्लानिंग के वे बिल्कुल रह गए हैं । मैं इसी में उलझा हुआ हूँ ।

13. hrs

मैं यह भी जानना हूँ कि जनता का कष्ट हो रहा है । इसी लिए मैं ने प्रारम्भ में ही डाक्टरों से कहा था कि उन्होंने अपनी बात कद्र दी है, हम मोच रहे हैं, यह स्ट्राइक वाना निर्मासला मुझे पसद नहीं है, वे अपना कार्य करें, हम उन की समस्याओं को देखेंगे । दुर्भाग्य से उन्होंने वह बात नहीं मानी । अगर वे उन बात को मान लेने और काम पर वापिस चले जाने, तो आज यह स्थिति न होती ।

आज स्थिति यह है कि हम प्रत्येक प्रयत्न कर रहे हैं । मैं स्वयं प्रयत्न कर रहा हूँ कि यह मामला किन्ती न किन्ती तरीके से सुलझ जाये । मैं स्वयं ममझना हूँ कि ज्यादा देर तक इस हंग में नहीं चल सकता है । जैसा कि पंडित जी ने कहा है, सीनियर डाक्टरों पर बहुत बोझ पड़ रहा है । बरमबर्षी मुक्त हो रही है । सीनियर डाक्टरों कह रहे हैं कि हमारा अपना हुआ है । मैं इस को देख रहा हूँ ।

माननीय सदस्य ने कहा है कि दो दिन में स्टेटमेंट दिया जाये । जितना शीघ्र हो सकेगा, मैं स्टेटमेंट ले कर इस हाउस के सामने आऊँगा । लेकिन जो चीज मेरी अमना में बाहर होती है, मैं उस को पूरी कर के ही आ सकता हूँ । इस लिए, उपाध्यक्ष महोदय, मैं आप के माध्यम से इस हाउस को यह धारवाहन दे सकता हूँ कि मैं जल्दी से जल्दी जहाँ तक संभव हो सके, उन की अवद करने की कोशिश करूँगा ।