

**Staff working in Tripura Oil Exploration Areas**

1499. SHRI BIREN DUTTA : Will the Minister of PETROLEUM AND CHEMICALS be pleased to state :

(a) the number of staff working in Tripura Oil Exploration Areas ; and

(b) whether they have been provided with suitable accommodation and working conditions there ?

THE MINISTER OF PETROLEUM AND CHEMICALS (SHRI P. C. SETHI) : (a) At present, 120 employees, including officers, are working in the Tripura Project.

(b) the staff have been provided with suitable accommodation and working conditions prevailing there are reported to be satisfactory.

**Number of Votes in Wards of Ambala Cantonment Board**

1500. SHRI PHOOL CHAND VERMA : Will the Minister of DEFENCE be pleased to state :

(a) whether the number of votes in different Wards in Ambala Cantonment Board (Haryana) is extremely unequal ;

(b) whether the Ambala Cantonment Board has demanded reorganisation of the Wards to have equal number of votes vide its Resolution No. 9 dated the 13th October, 1970 ;

(c) if so, the decision of Government thereon ; and

(d) when the first elections of Ambala Cantonment Board will be held and whether the elections would be held on the basis of old or new wards ?

THE MINISTER OF DEFENCE (SHRI JAGJIWAN RAM) : (a) The distribution of voters amongst the Wards is unequal, varying from 2877 to 8610.

(b) The Resolution No. 9 dated 13.10.70 does not contain any demand for re-organisation of Wards.

(c) Does not arise.

(d) Next election would ordinarily be due before 28th September, 1971, but no final decision has been taken thereon.

**12.16 hrs.**

**CALLING ATTENTION TO MATTER OF URGENT PUBLIC IMPORTANCE**

**OUTBREAK OF CHOLERA IN AN EPIDEMIC FORM AMONG THE REFUGEES FROM BANGLA DESH**

SHRI CHINTAMANI PANIGARHI (Bhubaneswar) : Sir, I call the attention of the Minister of Health and Family Planning to the following matter of urgent public importance and I request that he may make a statement thereon :

“The reported outbreak of cholera in an epidemic form among the refugees from Bangla Desh and action taken by the Government to meet the situation.”

SHRI KALYANASUNDARAM (Tiruchirappalli) : On a point of order, Sir. This is not an epidemic in the ordinary course. This relates to the whole question of Bangla Desh. In my calling attention notice, I had drawn the attention of the Home Minister. I do not know how it got changed into Health Minister. I do not know whether it was done by your office. The House expects either the Prime Minister or the Defence Minister to answer it.

MR. SPEAKER : This is about the cholera epidemic and the Health Minister has to reply to it.

SHRI INDRAJEET GUPTA (Alipore) : The Prime Minister should at least be present here now, because she has returned from Calcutta.

SHRI S. M. BANERJEE (Kanpur) : The question is not merely of cholera epidemic. The question is of law and order situation in West Bengal. After coming from Calcutta, the Prime Minister should make a statement here *suo motu* (Interruptions).....

THE MINISTER OF WORKS AND HOUSING AND HEALTH AND FAMILY PLANNING (SHRI UMA SHANKAR DIKSHIT): Mr. Panigrahi's call attention relates directly to health matters. If there are any other matters, they can be raised separately.

The sudden influx of refugees from East Bengal in large numbers following the unprecedented and brutal attack by the West Pakistan Army has posed a human problem of great magnitude. Government are alive to the emergent and large scale requirements of medical care arrangements for these refugees. We are doing all that lies within our means and we are stretching our means to the maximum; but we must all remember that the problem is colossal.

A majority of these refugees are arriving in a condition of exhaustion caused by malnutrition. A number of persons, it is reported have died after crossing the border. The precise cause of all the deaths reported is not known.

Most unfortunately and in spite of all the care we have taken, a growing number of cholera cases have been reported from the evacuee camps. It appears that the infection has been carried by the evacuees from East Bengal. Government are greatly concerned and we are fully in touch with the developments. We have information that there have been about 9,500 cases of cholera till June 4th and that about 1,250 persons have died. But for the timely and well organised efforts made by Government for preventive and curative medical care, the incidence of deaths might have been higher.

First reports about the occurrence of cholera cases were received in early May from Cachar District of Assam. Later, similar reports were received about cases from Malda, 24 Parganas and Nadia Districts also.

Fifty lakhs doses of preventive vaccine for cholera have already been supplied to the States bordering East Bengal. We have approached various agencies including foreign agencies for building up stocks of vaccine. For the treatment of cholera patients, supplies of Normal Saline and Molar-lactate have been arranged. Jet guns are being rushed to West Bengal. Disposable syringes are being sent.

We have transferred a 400-bedded mobile hospital from Rajasthan to West Bengal and sanctioned additional mobile hospital and beds. A number of doctors have been requisitioned from the Railways and AMC officers pressed into service.

For the transportation of patients, doctors, medicines and equipment, vehicles are being moved from Bombay and some have been obtained from the UNICEF at Calcutta.

The Indian Red Cross have arranged for supply of some nutritive food for the refugee children.

To meet the pressing need for safe drinking water in the refugee camps, 1500 tube-wells have already been commissioned in the camps.

We deputed a doctor from the All India Hygiene and Public Health Institute to study the situation and assess the precise cause of the reported deaths. Two epidemiological teams have been set up at Calcutta and Gauhati for emergency investigation of cases of out-break.

We are receiving daily reports from our Liaison Officer in Calcutta. The Prime Minister has visited the area. The Minister of State for Health has also been on a tour of the affected areas. Secretary Health has visited and the DGHS is being deputed to visit the spot.

The State Governments concerned have been advised to intensify protective care of the local population in areas where the camps have been established.

The problem is big and has been growing with the continuing influx of refugees. We shall not relent in our efforts to tackle it. We shall do all that we can to deal with this great human tragedy.

SHRI CHINTAMANI PANIGRAHI: All the reports that are available so far go to show that while the peoples' revolution in Bangladesh started from the 25th March, the incidence of this dreadful disease took a serious turn only towards the 29th of May. According to foreign observers about 60 million people in Bangladesh and in the eastern States of our

country are now threatened with this virulent type of cholera which, as the hon. Minister has stated, has spread from Bangladesh. Since this epidemic started from Bangladesh will the government request the military scientists to enquire whether it was part of the campaign of the military authorities of Pakistan to exterminate the entire nation and also India by secretly unleashing a bacteriological war? Then, the earlier assumption of the government was that the refugees would go back after six months. Now that assumption has proved wrong and the epidemic is spreading. May I know whether the government will get an assurance from the foreign powers and the international agencies that they will share the entire burden of relief which will come to about Rs. 400 crores? May I also know whether the government, including the Health Ministry are preparing a long-term phased programme for the betterment and protection of the refugees because they are not likely to go back after six months? If so, the Government should let us know what new formula has been arrived at, what assurances they have got from the world powers who will come to our assistance and whether this operation will continue only up to six months after which they will go back or they will continue for 1½ years.

SHRI UMA SHANKAR DIKSHIT : So far as the first question is concerned, he refers to military strategy and things of that sort, and that we should undertake an inquiry of that character. I do not think that it is indicated and my reply is in the negative.

So far as the other aspects of the question he has raised are concerned, we have sent a team for inquiring into the medical aspect of it. I have said in my statement that the strain or the nature of the cholera is peculiar to East Bengal. In previous years also the same classical nature of cholera had been prevalent in East Bengal. The same character has been discerned in the tests that our teams have carried out. On that point there is hardly any difference. Therefore I do not think any further action is necessary.

So far as his last question is concerned, it really covers a much wider area and I do not think I would like to attempt an answer to that.

SHRI CHINTAMANI PANIGRAHI : Per-

haps the hon. Minister could not recollect my question. The last part of my question was : What is the total expenditure that you have thought of incurring and are you going to extend it to 1½ years?

SHRI UMA SHANKAR DIKSHIT : If I may say so without any disrespect to the hon. Member, the approach is rather unfortunate. We cannot start planning for years ahead, assuming that refugees will stay for all time. We have examined the situation and are watching it carefully. Our plans will be directly and carefully attuned to the situation. It is wrong, in my opinion, to think of refugees staying here for all time to come.

So far as aid is concerned, the various international agencies have been approached. I am not in a position to say that the response is satisfactory, but the general mental approach is improving and the agencies are also responding with concrete suggestions. But we have in the present state to depend on our own effort essentially.

PROF. S. L. SAKSENA (Maharajganj) : I have carefully read the statement of the hon. Minister. He has himself admitted that it appears that the infection has been carried by the refugees from Bangla Desh, that is, East Bengal. I admire the effort that he has made and is making. I know him for so long and he is a very efficient person. But I want to know how he can cope with this problem when the infection comes from East Bengal. Unless we tackle it at the source and stop the infection in East Bengal, all the refugees coming from there will carry the infection. So, how long can he stop people from dying of cholera? I will, therefore, again impress upon the Prime Minister that unless she recognised Bangla Desh, we could not go in and tackle the disease there, from where it is coming.

I have learnt from newspapers that there is no arrangement in East Bengal for curing it. There are no medicines, hospitals or doctors and people there are dying like flies. People who come here bring the infection. This will continue and, I am afraid, it will infect our local population also in West Bengal. I would like to know how he wants to tackle the problem now itself so that it does not become more serious in the future.

[Prof. S. L. Saksena]

Then, the number of refugees is sometimes given as 45 lakhs, 47 lakhs, 50 lakhs and so on. What is the actual number of refugees and what is the average rate of their coming into India ?

Further, in how many camps they are housed Statewise and from how many camps cholera cases have been reported. What steps have been taken by the Government to prevent infection to the local population of West Bengal and other States. If it is not properly checked, it will affect other provinces also.

There are reports of starvation deaths in West Bengal. These are the paper reports :

“Over 300 people have died of starvation in the Rangpur and Lalmanirhat areas of Bangla Desh according to reports from across the border.....Villages have been experiencing acute scarcity conditions following indiscriminate looting and destruction of godowns by Pakistani troops and their Muslim League supporters.....”

They are destroying every grain in villages and so there are so many refugees. What are we going to do there to provide food to starving people in Bangla Desh ?

I want to know if you are aware that if food is not rushed to villages in Bangla Desh, there may be famine, much bigger than the one which occurred in 1943. I would like you to tell me how you are trying to protect the refugees from starvation and cholera. Heavy rains have also come in. There is no shelter. Most of the refugees do not have any shelter. What is being done for their shelter ? What are you actually doing to tackle all these problems ?

SHRI UMA SHANKAR DIKSHIT : Sir, I would answer the questions so far as health and sanitation are concerned. I have already indicated the measures that we have taken to tackle the problem. His first question was as to how we propose to tackle the problem. I have in detail indicated how we are actually tackling the problem. As soon as refugees arrive we contact them. We are taking every conceivable care in the matter of food, in the matter of shelter, in the matter of medicines and all that. Preventive action is being taken at a rate

which has never been tried before. I have already indicated in detail what we are actually doing.

Then, he has asked about the number of refugees, the number of camps and how many refugees are there in each of the camps. I can give the number of refugees coming, week by week. The number of refugees for the first week ending 17-4-71 is 1,19,5,66; 24-4-71—6,55,874; 1-5-71—3,67,428; 8-5-71—15,72,220; 15-5-71—23,99,667; 22-5-71—33,71,931 and 29-5-71—36,88,350. This is week by week position of the number of refugees arriving into the country on the eastern side.

As regards camps, according to information available up to 4th June, the Statewise break of refugees is as follows. Camp in West Bengal—22,65,000 refugees; Assam—87,000—and odd; Meghalaya—1,86,000; Tripura 3,81,000 and Bihar—3965. The total number of refugees in camps will be 27,22,561. In respect of outside camps, this is not Statewise, but the total here is 20,15,497.

PROF. S. L. SAKSENA : How many camps are affected by cholera ?

SHRI UMA SHANKAR DIKSHIT: I don't have that statement now.

SHRI KALYANASUNDARAM : What are the international agencies which have been approached by way of help regarding medicines and supply of drugs ? This is a question which I am addressing to the Health Minister. What was the response from them ? From which country has the Government got its required aid and how much ? This is point number one.

My second question is this. Is it a fact that Pakistan has poisoned the wells in the border regions ? What is the action taken against that ? Is it possible that this poisoning is the cause of the spread of cholera into our side ? I am encouraged to put a question to the Prime Minister who has just returned from Calcutta. The House would expect her to make a statement immediately. These epidemics and other problems are due to the influx of refugees and this influx is mounting up every week. It seems as if Pakistan has declared and is carrying on war against our economy

and health. It is a war against our economy. Our economy is threatened. How long can this country go on like this? So, I want to know what the Government proposes to do to protect the people in their own homeland. It is a larger question connected with the struggle in Bangla Desh and the brutal massacre carried on by West Pa'kistan army inside Bangla Desh.

Our country is vitally interested in this matter. If this continues, our economy will be ruined. It is a direct threat to the health of the citizens of our nation. Can our country afford to witness the whole thing as helpless spectator? What is the action which Government proposes to take? Let us take a lesson in the way Chamberlain appeased Hider. Already we are delaying matters. Chamberlain's appeasement emboldened Hitler. Our Government is emboldening the Pakistan military authorities to more and more adventure. May I know from the Government as to what action they propose to take in this regard? I request the Prime Minister to reply to this part of my question. The first two questions relate to Health Minister.

SHRI UMA SHANKAR DIKSHIT : We approached UNO and WHO and they care in all possible ways, helping us in their own region in their own way. Both these agencies are helping. I do not know what further details would be necessary. The WHO is giving a number of items. It includes medicines and other requirements, particularly vaccines. We have to build up supply for the whole country, particularly the Eastern States and have adequate supplies. If he wants, I can give each figure. But I don't think that would advance his point of view in any manner.

AN HON. MEMBER : What about poisoning of the wells in the border regions?

SHRI UMA SHANKAR DIKSHIT : Over and above what I have stated, there is no other information either in the Ministry of Rehabilitation or in the Ministry of Health. No such information has been received uptil now.

SHRI S. M. BANERJEE : On a point of order. My hon. friend's question had two parts. The first part was about the cholera epidemic. That has been replied to by the hon. Minister. But the second part was what action had been taken to see that they were kept in their

own country, and my hon. friend made a request that question should be replied to by the hon. Prime Minister. Either the Prime Minister should say that she does not want to reply or she should say something.

MR. SPEAKER : Shri M. Kalyanasundaram can look after himself very well.

SHRI S. M. BANERJEE : We support each other.

SHRI INDRAJIT GUPTA : I think the Prime Minister is not averse to saying something. Let her tell us something.

SHRI KALYANASUNDARAM : Let the Prime Minister say what she knows about. She has just returned from Calcutta. The House is expecting her to say something.

अध्यक्ष महोदय : आप सारे लोग एक साथ क्यों बोलते हैं? किसी की समझ में नहीं आ रहा है।

श्री श्यामनन्दन मिश्र (बेगसराय) : पूछ रहे हैं इलाज क्या किया।

MR. SPEAKER : Would the hon. Prime Minister like to say something?

THE PRIME MINISTER, MINISTER OF ATOMIC ENERGY, MINISTER OF HOME AFFAIRS AND MINISTER OF INFORMATION AND BOARD-CASTING (SHRIMATI INDIRA GANDHI) : I am sorry that my coming here seems to have enlarged the scope of the question.

SHRI SHYAMNANDAN MISHRA : There has been a persistent demand that she should come.

SHRIMATI INDIRA GANDHI : I was on the way here, but as you know, I get waylaid by people from various States ...

AN HON. MEMBER : Not hijacked?

SHRIMATI INDIRA GANDHI : I think that my colleague, the Health Minister, has given full information so far as the actual calling-attention is concerned, that is, as regards what we are trying to do about the outbreak of cholera and the general health of refugees who are pouring in and also how this situation

[Shrimati Indra Gandhi]

affects the local population. I do not think I can add much, because the other question asked by the hon. Member is an overall question which we have discussed many times. I should only like to refute that part of this statement where he says that we are trying to encourage the Government of West Pakistan or that we are appeasing them in any way, I protest against that statement.

SHRI SHYAMNANDAN MISHRA : Indirectly encouraging.

SHRIMATI INDIRA GANDHI: Neither indirectly nor directly are we encouraging them. In fact, we are very active in drawing the world's attention to the real state of affairs there. As the House knows, this is a rather delicate matter which we have discussed on numerous occasions with the Members of the Opposition and we can discuss it again with them. I do not think that one can talk about these things especially in answer to a calling-attention-notice which deals with a specific matter such as the outbreak of cholera.

श्री रामशेखर प्रसाद सिंह (छपरा) : अध्यक्ष महोदय, माननीय मन्त्री जी ने स्वीकार किया है कि अधिकांश रेफ्यूजीज जो कैम्प में आये हैं वह पहले से ही हैजे से रोगग्रस्त थे। मैं जानना चाहता हूँ कि जो रेफ्यूजीज रोगग्रस्त थे उनको और जो स्वस्थ थे क्या उनको अलग-अलग कैम्पों में रखने की व्यवस्था की गई है? यदि नहीं तो जैसा कि अखबारों में पढ़ने को मिला है कि कलकत्ता एरोड्रोम के पास भी एक रेफ्यूजी कैम्प है जिसको हटाने के लिए सिविल एविएशन डिपार्टमेंट ने निवेदन किया है क्योंकि अगर वहाँ पर उस कैम्प में हैजे से रोगग्रस्त लोग हुए तो हैजे का प्रकोप बढ़ सकता है और यह भी भय है कि सारे देश में उसका प्रकोप बढ़ जाये तो उन कैम्पों से निकट की बस्तियों में हैजे का प्रकोप न बढ़े उसके लिए कौन सी व्यवस्था की गई है?

श्री उमाशंकर दीक्षित : बंगाल के निकट जो राज्य है विहार और उड़ीसा, उनकी सरकारों को और बाकी देश की सारी राज्य सरकारों को हमने इस बात की तरफ ध्यान दिलाते हुए

आग्रह किया है। जैसा कि माननीय सदस्य ने मेरे उत्तर को लेकर कहा कि जो लोग पहले आते हैं वे वहीं आकर गिर जाते हैं तो जो गिर जाते हैं उनका प्रश्न तो है नहीं लेकिन जो कैम्पों में पहुँच जाते हैं उनकी परीक्षा की जाती है और जिनमें कालरा या गैस्ट्रो एन्ट्राइयटस के सिम्पटम्स पाये जाते हैं उनकी तात्कालिक मुश्रूषा और चिकित्सा हो जाती है और इसके लिए जितनी भी सामग्री चाहिए वह सब कैम्पों में मौजूद है।

जहाँ तक इस रोग के प्रकोप के बढ़ने की बात है, एक कैम्प से दूसरी जगह पर जब उनको हम भेजते हैं जैसे कि मध्य प्रदेश के माना कैम्प में भेज रहे हैं तो उनको हम बजाये ट्रेन के और तरह से सीधे भेजते हैं ताकि रास्ते में उनका किसी और से सम्पर्क न आये। इस प्रकार से जितना भी प्रकाशन सम्भव है वह हम ले रहे हैं। इसके अलावा दूसरी स्टेट्स में हम बहुत सारी सामग्री खासकर प्रिवेन्टिव मेडिसिन्स और वैक्सिन्स वागैरह भेज रहे हैं।

12.45 hrs.

#### PAPERS LAID ON THE TABLE

NAVAL CEREMONIAL, CONDITIONS OF SERVICE AND MISCELLANEOUS (AMENDMENT) REGULATIONS

THE MINISTER OF DEFENCE (SHRI JAGJIVAN RAM) : I beg to lay on the Table a copy of the Naval Ceremonial Conditions of Service and Miscellaneous (Amendment) Regulations, 1971 (Hindi and English versions) published in Notification No. S.R.O. 179 in Gazette of India dated the 29th May, 1971, under section 185 of the Navy Act, 1957. [Placed in Library. See No. LT—326/71]

REPORTS UNDER ARTICLE 151 (1) OF THE CONSTITUTION AND APPROPRIATION ACCOUNTS ETC.

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI K. R. GANESH) : I beg to lay on the Table ;