

SHRI G.G. SWELL : By casual contact, I mean, casual sexual contact.

SHRI P.V. NARASIMHA RAO : That is right ; absolutely right.

Decision on Demands of Nurses

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*129. SHRI P.M. SAYEED :

SHRI SODE RAMAIAH :

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

(a) whether Nurses in most of the Government hospitals in Delhi went on strike in the second half of January, 1987 ;

(b) if so, what were their demands ;

(c) whether their demands are still pending decision and no action had been taken in the matter ;

(d) if so, the reasons thereof ; and

(e) if not, the details of the decision taken ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) Yes, Sir.

(b) to (e) A Statement is given below.

Statement

The following tabular statement indicates the demands of the nurses and the decision taken by the Government on those demands :

DEMANDS

DECISION OF THE GOVERNMENT

1. Revision of scale of Pay already recommended by I V. Pay Commission :

Not accepted.

2. Allowances :

(i) Non- Practising Allowance :

(i) Not accepted.

(ii) Enhancement of Uniform Allowance :

(ii) Rate of Uniform Allowance has been increased from Rs. 300/- per annum to Rs. 1500/- per annum.

(iii) Enhancement of Washing Allowance :

(iii) Rate of Washing Allowance has been raised from Rs. 25/- per month to Rs. 75/- per month.

(iv) Grant of Risk/Messing/night Weightage Allowance :

(iv) All these have been taken care of by grant of Nursing Allowance at the rate of Rs. 150/- per month keeping in view the duties of Nurses.

(v) Grant of Qualification Allowance :

(v) It has been decided in principle to grant two increments (non-absorbable) for each approved qualification. The details and modalities about the implementation of this scheme are being worked out.

DEMANDS

DECISION OF THE GOVERNMENT

(vi) Grant of Special Pay :

* (vi) A Committee has been set up to identify the specialised areas, in addition to the existing ones, where this benefit can be extended.

(vii) Grant of Over Time Allowance :

(vii) It has been decided that as and when the general scheme of grant of Extra Work Allowance get finalised, the same will be made applicable to the Nurses also.

(viii) Increase of Student Stipend :

(viii) Rate of stipend to the student nurses undergoing general nursing and midwifery courses has been enhanced to Rs. 500/- per month uniformly for all the three years.

3. Cadre Review of Nurses :

3. A Committee has been set up for looking into the restructuring of cadre of nurses.

4. Family Accomodation and Transport Facilities :

4. It has been explained to the Nurses that it would not be possible for the Government to provide family accommodation to all the nurses. Nor would it be possible to provide exclusive transport facilities to them.

SHRI P.M. SAYEED : Sir, it is clear from the statement that the Government has honestly tried to satisfy the demands of the striking nurses. Out of the genuine demands that have been mentioned in the reply, there are 4 major demands. The first one is revision of scale of pay. That has not been accepted by the Government. Non-practising allowance also has not been accepted. But in the case of uniform allowance, that has been increased from Rs 300 to Rs. 1500. And also the washing allowance has been increased from Rs. 25 to Rs. 75. Also, the grant of nursing allowance has been given at the rate of Rs. 150/- per month.

Now, in order to solve their problems, after giving this kind of concessions to them, a committee has already been set up to identify the specialised areas. May I know from the hon. Minister whether any time-frame has been already fixed to give the findings of the committee to the Government? If not, will the Government come

forward and say that within such and such time, the outstanding issues will be settled even if the committee has not given its report to the Government?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT AND MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P. V. NARASIMHA RAO) : We have not fixed any right time-frame for the committee. But I am sure, the intention is to have the views of the committee and come to certain conclusions and decisions as quickly as practicable.

SHRI P.M. SAYEED : Sir, my second supplementary is, unfortunately in our country, about the Essential Services, whatever the Government's sincere intention to solve the problem, time and again, we see whether it is doctors' strike or nurses strike or some other essential service, irrespective of whatever emoluments and allowances that have been given to them, whenever the general elections are fast approaching the unscrupulous political organisations and

politicians try to create problems. And, from now on this menace will be frequently coming to the forefront. Therefore, I would like to ask the Government whether the Government is contemplating some sort of measure to ban such essential services to go on strike.

SHRI P.V. NARASIMHA RAO : This is a very important question. We cannot shout either 'yes' or 'no' and dispose of the matter. It is a matter of human life. I remember to have raised this when we were facing a strike but I thought that was not the proper time pursue it. It is open to this House to the hon. Members to raise the debate to the level where we are concerned with human lives; whatever the other factors, whoever is wrong, whether it is the employer or employee we could raise the debate to that lofty level. We can certainly discuss it. I am open to discussion. I am open to conviction. I am not jumping the gun by saying that I want this to be done or that not to be done. But on some suitable occasion I would be very happy, if you could permit, if the hon. Speaker could permit, a discussion on the subject.

PROF. MADHU DANDAVATE : In UK, there is an independent machinery to settle such disputes in essential services so that they are not required to go on strike at all. That is how they avoid it.

SHRI P. V. NARASIMHA RAO : I entirely agree. On the one side if you say there should be no strike, on the other side, there must be a machinery which is effective, which is timely, and which is expeditious, both go together—I entirely agree with that approach.

(Translation)

SHRI RAM NAGINA MISHRA : Mr. Deputy Speaker Sir, I want to submit to the hon. Minister that it is often seen in the Central as well as in the State Governments case that when the employees demand something, it is not accepted at the first instance but when they go on a strike and the Strike takes a violent turn then the Government gives in and accepts their demands. The employees are encouraged to resort to strikes for they feel that this approach forces the Government to accept their demands. This disease has infected both the Central and the State Government employees. Hence, I would ask the hon.

Minister whether he would frame a rule by which genuine demands would be accepted in the beginning and the ones which are not genuine would not be accepted under any circumstances regardless of whether they go on a strike or they resort to any other measure so that they do not get encouraged in future at all?

SHRI P.V. NARASIMHA RAO : Sir, I also want that we should say whatever we have to say before the strike is called and we should not change our position later. But the strikers and the organisers of the strike make efforts to call a strike when something is on the verge of being accepted so that could take the credit of it and convince the people that it is on account of the strike that the Government has accepted their demands. There is always a race by both sides which must be guarded against. In the case of the Departments with which I have been connected I have always tried to do the same and have found out whether so and so demand can be accepted or not and have then tried to stick to a certain stand but when people resort to strike, then it becomes difficult to say anything.

SHRI RAM NAGINA MISHRA : Mr. Deputy Speaker, Sir, when the striking nurses were demonstrating the police had cordoned off the area but when their number increased, the police removed the cordon and they entered the premises and went on a rampage. This way they get encouraged. Hence I was saying that a solid policy should be framed under which the genuine demands should be accepted and those which are not genuine should not be accepted under any circumstances.

[English]

DR. V VENKATESH : Just now the hon. Minister said that he wants to have a complete discussion on this subject. When there is a strike in one State, that demand will be met by that particular Government. Generally, the Government of India is going on enhancing the pay structure of those who are agitating at the Centre at the cost of the common man's revenue and, due to this, the State Governments are suffering much more and, very recently, the doctors of Delhi here, had gone on strike and due to that strike, the Government of India has enhanced their stipend and everything. Due to this, throughout the country from

Kanyakumari to Kashmir, every junior doctor is demanding higher pay structure. Therefore, by raising these scales of pay, Government is not going to solve the problem.

At the cost of the common man, the Government of India is spending here and the problem is on the State Governments, on the other side. Therefore, I want to know from the Government of India whether you are going to have a uniform pay structure and education policy of the Government of India or whether you are going to take up this health programme as a national one. I want to know from the Government categorically.

SHRI P. V. NARASIMHA RAO : I wanted a discussion on this subject. I did not know that the hon. Member would start the discussion straightway. But one thing I would like to say. I am approaching this question from the other end. What is the idea of the Central Government running hospitals? We have got very few employees. Sometimes the tendency is somehow to square up matters by giving them whatever we think they want or they deserve or whatever. The State Governments may not think so and similar demands being made at the State level would cost so much to the State Governments that they have a grievance or a complaint against the Central Government.

All these difficulties can be got over by going to the root question whether we should run any hospitals at all ourselves. That again is matter for discussion. I am raising these points so that all these matters can be discussed in a dispassionate manner and not under the threat of strike or strike goes on or while the strike is going on but really on their own merit.

[Translation]

Steps to Check Cancer

*130. **DR. PRABHAT KUMAR MISHRA :**

SHRI NIRMAL KHATTRI :

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

(a) whether cancer cases are on increase and if so, the number of known cases in the country, during the last three years ;

(b) the preventive measures taken so far to protect people from this dreaded disease ;

(c) whether cancer control programme has been launched throughout the country to detect cancer at early stages ; and

(d) if so, the achievement so far ?

[English]

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) to (d) A statement is given below.

Statement

It is roughly estimated that there are about 1.5 million cases of cancer in India and the incidence of cancer is generally on the increase. The number of known cancer cases in specialised cancer hospitals in India during the years 1983 to 1985 year-wise, for which the figures are available, is given below :—

Year	No. of known cancer cases
1983	44,020
1984	44,345
1985	36,768

A National Cancer Control Programme has been launched in India for primary prevention of cancer, diagnosis and treatment and distribution and extension of services through Regional Cancer Centres and Medical Colleges. Non-governmental organisations have also been involved in the programme. Realising that one third of the cancers are preventable and another one third can be cured with a high percentage of survival if detected early, the emphasis of cancer research has been on primary prevention of tobacco related cancer and secondary prevention of cancer of uterine cervix. The preventive measures include educating the masses, statutory warning on Cigarette packets and advertisements, promulgation of laws by several State Governments prohibiting smoking in closed areas like cinemas, buses, educational institutions, hospitals etc. An allocation of Rs. 20.00 crores has been made for the National Cancer Control Programme for the 7th Five Year Plan. A National Cancer Control Board has also been set up to guide the activities of the programme. The Government provides financial assistance to the 9 Regional Cancer Centres for their development and grants to State Governments/voluntary institutions for setting up of Cobalt Therapy Units and Early Cancer Detection Centres.