

and hypothyroidism. For detecting goitre patients is the Government taking any steps to increase the number of centres of nuclear technology so that the fast spreading disease which is not detected at an early stage will be controlled and by the time you spread the use of iodized salt, it would have been brought under control to a reasonable extent ?

SHRI P. V. NARASIMHA RAO : We have some facilities for detection at the moment. I do not think, they are adequate. But since we are undertaking a massive programme to prevent this from happening in future, I think the concentration should be in completing this programme in a record time, may be a year earlier than intended, rather than now starting diagnostic centres all over the country. The arrangements that are available, wherever they have to be strengthened, that could be undertaken, but starting new centres does not appear to be feasible.

DR. T. KALPANA DEVI : I would like to know whether there is any proposal to provide hundred per cent financial assistance to the States for setting up of goitre control units, State Health Directorates and for the State level coordination committees, and for organizing health education activities for effective implementation of goitre control programme.

SHRI P. V. NARASIMHA RAO : Yes, Sir. When it has been taken up on a national scale, education of the people is being done, maybe it needs strengthening in some areas, but all that would depend on the State Governments and I am sure, the State Governments where this complaint is in an endemic form will certainly take all the necessary steps. But the question actually centres round the permanent measures to be taken and the permanent measure is one, and that is the cheapest and also the most effective, and that is the use of iodized salt and that is what I have answered.

Strikes by doctors and para-medical staff in Delhi hospitals

*680. **DR. B.L. SHAILOSH :** Will the

Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether any in-depth study has been made by his Ministry into the causes of frequent strikes by doctors and nurses and other para-medical staff in Delhi hospitals;

(b) if so, the outcome of such study; and

(c) the remedial steps proposed in this regard ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) : (a) to (c) The issues on which the doctors, nurses and other para-medical staff in Delhi Hospitals have resorted to agitational approach in the recent past mostly centre around their grievances relating to pay and various categories of allowances. By and large the approach of the Government has been to negotiate with the employees and arrive at an amicable settlement. Joint Consultative Machineries have also been established at different levels to discuss and decide on issues which agitate the mind of the employees.

[Translation]

DR. B L. SHAILOSH : Mr. Speaker, Sir, will the hon. Minister kindly state as to how many times the doctors and other medical staff have gone on strikes and how has it affected the patients ? Along with it, what steps has the Government taken to provide medical facilities to the patients during the course of a strike ?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT AND MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P.V. NARASIMHA RAO) : I want to appeal to the hon. Member that he should not repeat this matter so many times, because we have tried our best to arrive at a settlement, but it should be ensured that they do not resort to such strikes in future, but it could not be said that there would not be strike at all. We have tried to make them

understand. I think that the situation has vastly improved and we will have to think about other measures in future. Again, as regards the number of strikes, it has been neither more nor less. We want that the sick people should not suffer on account of the strikes and they should not face any sort of inconvenience as well. We want to create a healthy environment. So far as the life and the health of an individual is concerned, it will be good if the question of strike is not raised at all in such matters. The relationship between an employer and an employee can be good as well as bad. Somewhere the employer may be at fault and somewhere the employee may be in the wrong. But the patient should not suffer in this tug-of-war. He should not be put to any sort of inconvenience because once a person is dead, he cannot be brought back to life and the situation becomes irreversible. Therefore, we want to give it special emphasis. We want to create a conducive environment.

DR. B L. SHAIKESH : Mr. Speaker, Sir, as everyone is aware, the doctors have to do a great deal of work and have to be on emergency duties as well. They have to work round the clock and have to work more as compared to others. Under the circumstances, is the Government thinking of declaring the medical service as 'Essential Service' and provide benefits like special pay, etc. accordingly? This will perhaps put an end to their strikes for ever. The poor people suffer the most during strikes. The rich people can afford to go to private nursing homes, but the poor people can go nowhere except to the O.P. Ds and therefore, they have to suffer a lot during strikes. Hence, is it under the consideration of the Government to declare this service as 'Essential Service' and impose a ban on strikes in medical services?

SHRI P.V. NARASIMHA RAO : Yes, Sir. It is a very good suggestion and we are considering it to a certain extent. But I think we have to talk about it with many people and with our hon. Members also. I have talked to some hon. Members. I feel that we can create such an environment. We are thinking of setting

up a machinery so that there is no necessity for such strikes.

[English]

SHRI P. K. THUNGON : Mostly, the problem appears to be not because certain facilities to the doctors are not there. But to me it occurs that certain amount of motivation is required in this country, coupled with proper handling by the Administration concerned. For example, there was a strike in Delhi by one section of doctors and that was followed by a strike by nurses because they felt that they were not being taken care of adequately. And so far as my knowledge goes, some of the doctors are again thinking of resorting to agitation because there is some anomaly between the pay scales or emoluments of the junior doctors, doctors of the CGHS and so on and so fourth. The grievances have been such that during the nurses' strike, there was a slogan "Patients are dying, nurses are crying and the Minister of Health is in coma". Keeping this slogan in mind, I would like to know from the hon. Minister whether there is any programme for the purpose of motivation. Secondly, is any proper study going to be made to see that some parity with regard to pay scales, emoluments and facilities is maintained, so that there will be no scope for such grievances?

MR. SPEAKER : The Health Minister does not seem to be in a coma. He seems to be between two ladies.

SHRI P.V. NARASIMHA RAO : Sir, earlier I had an occasion to answer a question and at that time Mr. Deputy Speaker was in the Chair. In the course of that, I had requested him to give us a discussion in this House because I want to raise certain questions of principal. It is not a question of whether the strike is right or wrong and whether the employer is right or the employer is wrong. It is not a question of apportioning blame or responsibility. It is a much higher question and it is a question of whether a patient should be allowed to die because there is a difference of opinion, there is a conflict between the employer and the employee.

He is a third party and he has come to the hospital to be cured and not to die. Therefore, considering the supreme need to save the patients, to save human lives in this country, can we think of a method wherein such strikes will not be necessary and will not be restored to? In order to firm up that, we may have to resort to steps that need to be taken in that regard. That is a matter of detail. But the question is in principle, do we agree on this? And, if the Parliament says that it agrees on this, then the stage will be set for the Government to take certain steps. This is what I really want from the Parliament as a guidance.

DR. V. VENKATESH : Mr. Speaker, Sir, I belong to the medical profession, as you know it. But in spite of it, I would like to bring to your notice that unfortunately the strikes which are going on throughout to country, particularly in this profession, is very-very bad. I will tell you that very recently the Ram Manohar Lohia Hospital—previously, it was known as —Willington Hospital....

AN HON. MEMBER : Lady Willington Hospital,

DR. V. VENKATESH : Lady Willington Hospital. Though the name has been changed, even today the condition remains the same. Unfortunately, an hon. Member of this House fell ill in the Annexe. Myself and another hon. Member of our House took care of him and immediately we contacted the Ram Manohar Lohia Hospital authorities. They took about an hour or so to reach here. They brought an ambulance with them. In that ambulance we took him there. The condition there was very pitiable. I am sorry to say all these things. But with great pain I am telling you, though I belong to the same profession and I do not want to cast aspersions on the profession, if these strikes in this country go on like this, what would be the condition of the common man. I have seen so many patients who are not attended to at all. Unfortunately on that day, even the hon. Member was not given any attention at all.

Therefore, I wanted to ask a straight

question to the hon. Minister, who may be under coma—medically he is under coma, I would say—because for every question that is raised in this House, he has been telling, “we will take the consensus of the Members” and all that. He has been postponing like that. How long can he postpone it, Sir? He cannot play with the lives of the common man in this country. (*In-eruptions*) The common man in this country is suffering because of the mismanagement of the Government.

Therefore, I want to know whether any measure is going to be taken immediately to check these strikes throughout the country?

MR. SPEAKER : Put the question.
(*Interruptions*)

DR. V. VENKATESH : I say this because, if no measures are taken, this disease of strikes may spread further. Therefore I want to ask a categorical question whether he is going to check this immediately or he wants to play with the lives of the common men of the country?

SHRI P. V. NARASIMHA RAO : I do not know what else to say. I have submitted to the House that this matter is not an ordinary matter of employee going on strike for his demands. This is a matter concerning lives of the people. I want the support of the Parliament to take certain unconventional methods. Not merely this. If no consensus is forthcoming, I have a course of action. But I do want to appeal to the House to give me the benefit of their wisdom. Let us have one hour and two hour discussion so that I get some lines of approach from the hon. Members so that I could obviate the need for explaining and explaining and explaining the steps to the House later on. If it comes as a consensus, it will give me encouragement. It will support me, and therefore, would be easier for me to cut short the duration of taking these steps later on. This is all I wanted to appeal to the House.

If I am in a coma or somebody else is in a coma, that is a different matter. But

the point is something needs to be done. That is what I really wanted the House to tell me.

DR. V. VENKATESH : How long will it take ?

MR. SPEAKER : You give a Motion and we shall just get it discussed. What is the problem ? No problem.

[Translation]

SHRI GIRDHARI LAL VYAS : We are not getting good quality medicines.

MR. SPEAKER : Therefore, get it discussed early, Vyasji.

SHRI P. V. NARASIMHA RAO : This question relates to strikes by doctors. The hon. Member is speaking about the general non-availability of medicines, but the issue is about strike.

Repair and widening of bridges on Nagpur-Raipur National Highway.

*683. **SHRI VILAS MUTTEMWAR :** Will the Minister of SURFACE TRANSPORT be pleased to state :

(a) whether due to culverts being very old, frequent accidents occur on Nagpur-Raipur National Highway;

(b) whether there is any proposal for widening of the bridges on this National Highway and for repairing the uneven road in order to avoid accidents; and

(c) if so, the time by which this work is likely to be completed ?

[English]

THE MINISTER OF STATE OF THE MINISTRY OF SURFACE TRANSPORT (SHRI RAJESH PILOT) : (a) to (c) There are no reports of frequent accidents on this Section of National Highway No. 6 due to existence of old cross drainage works. However,

widening of the bridges to two lane width have been taken up and work on four bridges has been completed. Estimates for three bridges have been sanctioned recently. Proposals for four more bridges are under correspondence. Improvement of the roads is a continuous process and is taken up in a phased manner depending upon the inter-se priority and availability of resources.

[Translation]

SHRI VILAS MUTTEMWAR : Mr. Speaker, Sir, the hon. Minister has given a routine reply to my question. Frequent accidents occur on Nagpur-Raipur section of the National Highway No. 6 which connects Bombay with Calcutta. But the hon. Minister has replied that no reports of frequent accidents on this section of the highway have reached the Ministry of Surface Transport. Secondly, regarding culverts he has stated that their construction is undertaken on the basis of inter-se priority. I want to know from the hon. Minister as to how is this priority decided ? After how many accidents and after how many losses of lives is the construction work taken up ? The constituency of hon. Shri Narasimha Rao is located about 30 kms. away from the Nagpur-Raipur highway. Near Miyath village, industries with an investment of Rs. 400 crores have been set up here. It has increased the traffic in that area. The bridge is so narrow that traffic gets jammed here. Again, serious accidents have occurred on the bridge over Telinala near Sakana in which 30 persons have so far lost their lives, but the Ministry has no information about it. . . *(Interruptions)*...

I think it is the only culvert where 13 traffic signs have been put up like 'Drive slowly', 'Use brakes', 'Look to your left and to your right' but still accidents occur. The hon. Minister should go there and find out himself as to why the people are afraid to move on this road and why they move very slowly over there. I want to put a straight question to the hon. Minister and ask as to how long will you take to complete that culvert ?