

for purposes of getting an increase in City Compensatory and House Rent Allowances; and

(ii) Cancellation of transfer of certain workers from Ernakulam to other depots in Kerala.

(c) The Indian Oil Corporation are looking into these demands.

#### Plan for the Family Consulting Units in the Universities

\* 460. SHRI MUHAMMED SHERIFF: Will the Minister of HEALTH AND FAMILY PLANNING be pleased to state:

(a) whether Government have chalked out any plan for the family consulting units in the Universities to advise the youth on family life and education;

(b) whether Government have considered the suggestion of Dr. Fonseca, Director, Council of Family Planning on sex education; and

(c) if so, the main suggestions made and action taken thereon?

THE MINISTER OF WORKS AND HOUSING AND HEALTH AND FAMILY PLANNING (SHRI UMA SHANKAR DIKSHIT): (a) No, Sir.

(b) and (c). The suggestions of Dr. Fonseca of the Indian Social Institute, which have just been received, will be given due consideration.

#### C. G. H. S. for Pensioners and their Families

\* 463. SHRIMATI BIBHA GHOSH: Will the Minister of HEALTH AND FAMILY PLANNING be pleased to refer to the reply given to unstarred Question No. 1098 on the 2nd March, 1970 and state the progress made in the Plan to extend the Health Schemes to the pensioners and their families throughout India through C. G. H. S.?

THE MINISTER OF WORKS AND HOUSING AND HEALTH AND FAMILY PLANNING (SHRI UMA SHANKAR DIKSHIT): The Central Government Health Scheme has been introduced so far only in Delhi, Bombay and Allahabad. In these three places medical facilities under the scheme are available to Central Government pensioners also. The scheme can be introduced only in

cities where there is a substantial concentration of Central Government employees.

It is primarily the responsibility of State Governments to provide medical care to their pensioners.

#### Shortage of Medicines in Rural Areas

\* 464. SHRI BISHWANATH JHUNJHUN WALA:  
SHRI N. K. SANGHI:

Will the Minister of PETROLEUM AND CHEMICALS be pleased to state:

(a) whether there is an acute shortage of medicines in the rural areas due to reduction in commission under the Drugs Act and the retailers are finding it unremunerative to stock more stocks of medicines; and

(b) if so, the steps Government propose to take to mitigate the difficulties of the rural people and to ensure a steady flow of medicines in the rural areas?

THE MINISTER OF PETROLEUM AND CHEMICALS (SHRI P. C. SETHI): (a) No, Sir. It is not correct that there is acute shortage of medicines generally in the rural areas due to reduction in trade commission under the Drugs (Prices Control) Order. However, shortages of certain brands of medicines have been reported from certain areas. These shortages are attributable to cause other than reduction in the trade commission.

(b) Steps taken to remove shortages are:

(i) import of additional quantities of bulk drugs through the State Trading Corporation.

(ii) Expansion of indigenous capacity for bulk drugs.

(iii) Encouraging manufacturers to step up production of medicines reported to be in short supply.

Some improvement has taken place during the last month with the arrival of bulk drugs being imported by the State Trading Corporation and further improvement in the situation is expected to take place in the next two to three months.