# [English]

MR. SPEAKER: That statement has been made on the floor of the House now.

.....(Interruptions).....

## [Translation]

SHRI RAM NAIK: There are 1300 families in the security zone even today. My question is whether you will try to rehabilitate them somewhere else at the earliest?

SHRI BHUVNESH CHATURVEDI: My submission is that there are no inhabitants in the security zone. They are out of security zone and they have not been affected in any way. That area has not been affected.

#### **AIDS Control**

#### \*44. SHRI TANNA JOSHI :

#### DR. LAL BAHADUR RAWAL:

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

- (a) the number of AIDS cases along with the number of persons tested HIV positive in each state/ Union Territory at present;
- (b) the number of deaths reported due to AIDS in each state/Union Territory during the last three years:

- (c) the States which are still AIDS free in the country; and
- (d) the steps taken to effectively check the spread of AIDS?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE ( SHRI PABAN SINGH GHATOWAR):-

(a) to (d) . A statement is laid on the table of the Lok Sabha.

### STATEMENT

- (a) A Statement for the period ending 30th June. 1995 is enclosed (Annexure I).
  - (b) A Statement is given as Annexure II.
- (c) No HIV/AIDS Cases have been reported from the States of Arunachal Pradesh, Sikkim, Tripura and Union Territory of Daman & Diu.
- (d) A comprehensive Programme for the Prevention and Control of AIDS is currently under implementation as a Centrally Sponsored Scheme throughout the Country. The strategies of the programme consist of generation of awareness amongst high risk behaviour and general public about HIV/AIDS, control of sexually transmitted diseases, blood safety and rational use of blood, better surveillance; and diagnosis and clinical management of HIV/AIDS cases.

# ANNEXURE-I SERO-SURVEILLANCE FOR HIV INFFECTION

Period of report upto: 30th June, 1995 (Provisional)

S. No. NAME SCREENED **POSITIVE** NO. OF AIDS CASES 1 2 3 4. 5. Arunachal Pradesh 1. 4 2. Andhra Pradesh 39157 214 1 3. Assam 9982 6 4. A & N Islands (UT) 360 1 5. Bihar 8401 3 Delhi 307522 978 82 6

41	Oral Answers	SRAVANA 11, 1917 (SAKA)		Oral Answers	
1.	2.	3.	4.	5.	
7.	D& N Haveli (UT)		Reports not received	1	
i.	Daman & Diu (UT)		-		
١.	Goa	55906	694	12	
0.	Gujarat	369960	517	18	
1.	Haryana	116510	134	1	
2	Himachal Pradesh	12848	13	9	
3.	Jammu & Kashmir	7009	10	2	
4.	Karnataka	350415	1736	26	
5.	Kerala	40058	448	76	
6.	Lakshadweep (UT)	537	5	-	
7.	Madhya Pradesh	- 64456	189	21	
3.	Maharashtra	238694	5482	1041	
9.	Manipur	33291	3184	91	
0.	Meghalaya	14013	53	-	
1.	Mizoram	14948	59	-	
2	Nagaland	1466	112	2	
3.	Orissa	51935	127	2	
4.	Punjab/ Chandigarh (UT)	54019	165	71	
5.	Pondicherry (UT)	56856	1336	6	
3.	Rajasthan	33462	43	3	
7.	Sikkim	116	-	-	
3.	Tamil Nadu	573156	2766	372	
€.	Tripura	Reports no received		1	
٥.	Uttar Pradesh	74040	475	8	
1.	West Bengal	102031	251	39	
_	Total :	2631202	18901	1888	
		ANNEXUR	E -II		
	NL	IMBER OF REPORTED D	EATHS DUE TO AIDS		

S. No.	Name of the state	Year 1992	Year 1 <b>993</b>	Year 1994	Year 1995	
					upto June	
1.	Andhra Pradesh	-	1	-	3	
2.	Assam	-	1	-	24	

1	2	3	4	5	6
3.	Delhi	10	23 ·	12	8
4.	Gujarat	2	3	-	-
5.	Haryana	4	3	-	-
<b>3</b> .	Jammu & Kaşhmir	-	1	-	40
7.	Karnataka	2	9	2	-
3.	Kerala	-	40	-	-
9.	Madhya Pradesh	-	14	-	-
10.	Maharashtra	18	37	35	67
11.	Manipur	4	6	13	
12.	Himachal Pradesh	2	-	1	2
13.	Goa	•	8	1	
14.	Pondicherry	5	6	-	3
15.	Punjab	5	30	-	20
16.	Tamil Nadu	17	· 10	23	40
17.	Uttar Pradesh	-	6	-	4
18.	West Bengal	-	12	2	10
19.	Orissa	-	-	1	2
20.	Nagaland	-	-	1	-
<u> </u>	Total	69	210	91	224

SHRI ANNA JOSHI (PUNE) : Sir, in the answer the hon. Minister has said that some states are completely free from AIDS and some are affected a little. But some states like Delhi, Maharashtra, Tamil Nadu and Madhya Pradesh are affected very badly. There, the number of affections and number of deaths that have occurred during the last three years is alarming. So, what are the special reasons for the increase in the number in these States? This is the first part.

The second part is this. More than the AIDS affected people, there is the serious problem of orphans and infected children. There is nobody to look after them. It is estimated that by 2000 A.D. India would have 20,000 AIDS orphans every day. I would like to know, through you, what the Government is going to do for these special regions and special cases.

SHRI PABAN SINGH GHATOWAR: Regarding the first part of the question, those States which have not reported cases are small States like Arunachal Pradesh, Sikkim, Tripura and the Union Territory of Daman and Diu.

I think that the hon. Member also knows why the cases are more, especially in Maharashtra, Tamil Nadu and Manipur, and also in Delhi. Manipur's AIDS cases are a little bit different from these three States because there are more intravenous drug users in Manipur and because of exchange of infected needles the spread of AIDS is more in Manipur compared to other States.

In respect of other States, we have a large number of sex workers and there are other high risk groups buy which the increases in the number of AIDS cases in these States are more. And from the

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Government of India side, Under the AIDS Control Programme, we are taking all possible steps to screen these high risk group people, to prevent the spread of AIDS in the country.

Oral Answers

SHRI ANNA JOSHI : Sir, he has not answered the second part. The report is that it is estimated that by 2000 A.D. India would have 20,000 AIDS orphans every day.. So, what eventuality do you see? And what arrangements have you made? That was the second part of my first supplementary.

I will now ask my second supplementary also if you permit me. An AIDS hospital project is coming up in Raigad, District, in the hon. Minister's constituency. Dr. I.H. Gilada of the Indian Health Organisation is working for that project. It is heard that the State Government and the Central Government are also joining him. I would like the hon. Minister to elaborate on this point.

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI A.R. ANTULAY): It is true that Dr. Gilada, who resigned to dedicate himself for this cause has been doing excellent work in this field. It is also true that he has, through his organisation. purchased about 26 or 24 acres of land in Raigad, District for this very purpose (four or five years ago.)

It is not going to be to only an AIDS hospital, but it is going to be a multipurpose and multidimensional one and cure and preventive measures for various diseases will be undertaken there.

Sir, for the information of the hon. Member, I may say that during the past almost one month or a little more that I have been here in this Ministry, I have held at least - with my colleagues, officers and some other social activists in this field - three to four meetings. As the hon. Member knows, a lot of money is coming from the world organisations. It is also true that - I must concede - that it is not being well spent. In fact in respect of what was to be spent during the Plan period of which only two years are left, not even 25 per cent to 30 per cent has been spent. This is the situation which is true: I must concede that and I will not be accused of withholding any information from the hon, House.

Now-we are going to go in for a Reform Committee for this purpose and that Committee will be comprising not only of the officials, but also of the non-officials who, throughout the country are known to have been dedicated, to dedicate themselves to this cause, like not only Dr. Gilada but many others also. We are going to have the first meeting of such a Committee next week because protection

prevention and early detection is very important, This not only a deadly disease, but a communicable disease, Unfortunately, unlike cancer which is noncommunicable yet deadly, even unlike malaria which is communicable and deadly but not so deadly to that extent and unlike TB also which is not that deadly, here in the case of AIDS, there is a social stigma attached. Unfortunately if a person is a victim of AIDS, he is almost trying to hide it and his family members also try to hide it. Now, we are going to make a public awareness campaign all over to say that it is no fault of anybody. A person can contract from someone most innocently and anyone can be a victim. Therefore, it is not as if a particular class or a particular type of people can be the victim. For that purpose, we are going to make public awareness besides whatever measures need to be taken. If the hon. Member is interested. I shall be very happy to have him associated with this particular Committee because there are very few people who really volunteer to do the work in this field. Thank you.....(Interruptions)

SHRI ANNA JOSHI: Sir, It is a serious problem.

(Interruptions)

MR. SPEAKER: No. This is not going on record.

(Interruptions)

[Translation]

DR. LAL BAHADUR RAWAL: Mr. Speaker, Sir, many advertisements and slogans are shown on television and in newspapers but they are devoid of sense of proportion. They cannot be watched with family. They are not known to check Aids but to promote lewdness. I want to ask the hon. Minister whether efforts are being made to improve the language of advertisements. Delhi University has started a programme three-four days back to give information on telephone this is very good programme. It will not affect anybody in a bad manner. Is there any other scheme to start such programmes in other universities? Apart from this, is there any plan to get the politicians, officers employees or aristocratic people compulsorily tested?

MR. SPEAKER: Lot of self-introspection!

SHRI PABAN SINGH GHATOWAR : Sir. there is no treatment of AIDS. We have to depend mostly on information, education and communication system. It is a very sensitive subject. We have discussed it in our Consultative Committee and taken its opinion.

\* Not Recorded

Because of the sensitivity of the subject, we have to tell the public about that.

It is a fact that majority of AIDS cases come from physical contact.

MR. SPEAKER: The first part of his question is very pertinent. There is other side of this coin also. This method can be misused. How to protect the people?

SHRI PABAN SINGH GHATOWAR: Our Ministry is taking the views of those who are experts in the line of media about how best we can present this problem before the community.

About the Delhi project, the information is given on telephone. We are thinking to enlarge this scheme in other places also.

## WRITTEN ANSWERS TO QUESTIONS

[Translation]

#### Law And Order Situation In J & K

\*45. SHRI SURENDRA PAL PATHAK:

SHRI CHITTA BASU:

will the PRIME MINISTER be pleased to state :

- (a) whether any survey team under the leadership of a Minister had visited J&K recently to study the law and order situation in the State:
  - (b) if so, the details thereof;
- (c) whether the team has submitted its report to the Government:
  - (d) If so, the main features thereof; and
  - (e) the reaction of the Government thereto?

THE MINISTER OF STATE IN THE PRIME MINISTER'S OFFICE AND MINISTER OF STATE IN THE DEPARTMENT OF ATOMIC ENERGY AND DEPARTMENT OF SPACE AND MINISTER OF STATE IN THE MINISTRY OF SCIENCE AND TECHNOLOGY (SHRI BHUVNESH CHATURVEDI):

(a) to (e) :- A high level team headed by the Minister of State in the Prime Minister' office visited Jammu and Kashmir during 1st to 4th July, 1995 to take stock of the overall situation including development activities and law and order situation. The programme included visits to Srinagar, Tangdhar (Distt. Kupwara). Anantnag, Doda and Jammu. Apart from meeting with officials, the team met political leaders and delegations from the public in all the above places. Two migrant camps in Jammu were also visited by the team.

The following was the broad assessment of the Team:

- (i) The Development Administration has been rejuvenated and it is geared to utilise the entire plan out lay gainfully. The Inspection Committees set up at the District level under the Chairmanship of Deputy Commissioners have enabled the State Government to enforce accountability and increased efficiency in implementation of development schemes.
- (ii) The special Central assistance to bridge the huge budget deficit as a result of the disturbed situation in the State has helped the State Government to tide over its financial crisis. This has helped restoration of credibility in the Administration.
- (iii) After the Chrar-e-Sharief incident, the general law and order situation has gradually returned to the level of pre-Chrar incident days. However, the fear of the gun is still prevalent and security operations need to be intensified further. The member of foreign mercenaries, is on the increase.
- (iv) The overall law and order and security situation can be assessed as under control although the militants may carry out clandestine sporadic terrorist activities in different parts of the State. The mood of the people is upswing and in a few months time, there may be more qualitative improvement. However, the possibility of foreign mercenaries upgrading violence to thwart the political process cannot be ruled our.
- (v) The mainstream political parties have increased their political activities in the State considerably including in the Kashmir valley although their mass contact is still limited on account of the fear of gun. The common masses fell increasingly oppressed by the militants activities and are yearning for normalcy to return.
- (vi) The position with regard to supply of essential commodities and critical inputs for various development programmes was found to be satisfactory.

In addition to the above overall assessment, the team identified a large number of actionable points in different areas. These have been submitted to the Government for appropriate follow up action.