

programme on limited scale for control of canine rabies was sanctioned in 16 States and one Union Territory. Each State/Union Territory was allocated one to two canine rabies control units. An amount of Rs. 117 lakhs, Rs. 192 lakhs and Rs. 334 lakhs were earmarked as central assistance for this programme during the Sixth, Seventh and Eighth Plan.

During 1997-98 an amount of Rs. 70 lakhs was provided under this programme. This programme is being continued during the 9th Plan. At present a total of about 60 canine rabies control units are functioning in the country.

Arsenic contamination of water

2026. SHRI SOLIPETA RAMA-

CHANDRA REDDY:

DR. MOHAN BABU:

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

(a) whether WHO have sounded alarm bell to India about Arsenic contamination;

(b) if so, the districts where groundwater is not meeting the safe limit of the chemical set by WHO; and

(c) what action Government have taken to contain this problem?

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI SURESH PRABHU):

(a) WHO have drawn attention to the problems arising out of presence of Arsenic in Drinking Water Supplies in India and Bangladesh;

(b) The names of the Districts where Ground Water Quality is not meeting the Safe Limit of the Chemicals set by the WHO are (i) Murshidabad; (ii) Malda; (iii) Nadia; (iv) North 24 Parganas; (v) South 24 Parganas; (vi) Howrah; (vii) Hugli; and (viii) Burdhan.

(c) The State Government in collaboration with and financial support from Government of India has sanctioned a First Phase Action Plan to a cost of Rs. 858.33 lakhs whereunder replacement of Arsenic affected spot sources and big dia tubewells have already been completed, and four Water Supply Schemes have been fully commissioned. For Malda District, a surface water based piped Water Supply Scheme has been sanctioned at an estimated

cost of Rs. 8848 lakhs. Other works undertaken include;

- (i) Installation of Arsenic removal plants.
- (ii) Construction of sanitary protected ring wells.
- (iii) Trial boring-cum-handpump fitted production wells.
- (iv) Replacement of Arsenic affected spot sources.

Approval for a Surface Water based Piped Water Supply Scheme for Arsenic affected areas of South 24 Parganas district at an estimated cost of Rs. 232.84 crore has been accorded.

The All India Institute of Hygiene and Public Health in Calcutta, of the Ministry of Health and Family Welfare has undertaken Epidemiological Study in Arsenic affected areas under the sponsorship of Ministry of Health and Family Welfare. This Institute carried out Ministry of Rural Development sponsored R&D Study for development of field model for Arsenic removal. The Institute also carried out Trainers Workshop, and field training for water quality analysis in respect of Arsenic contamination during 1997.

Eradication of Polio

2027. SHRI K.M. SAIFULLAH:

DR. MOHAN BABU:

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

(a) whether Government have fixed any target for eradication of Polio in the country;

(b) if so, what arrangement have been made to achieve national target for eradication of polio in rural and urban areas of the country; and

(c) the details of the effective action being taken by Government in this regard?

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI SURESH PRABHU):

(a) The Government is aiming at eradication of Polio by the year 2000 A.D.

(b) and (c) 1. High Coverage in the routine immunization programme;

2. Since 1995, the Pulse Polio Immunization Campaign is being held every year on two specific dates for administering Oral Polio Vaccine to all children in the country below five years of age.

3. The programme has been further strengthened by the launching of a Surveillance Project for detecting all cases of Polio and taking timely action for controlling the transmission of Polio Virus.

Debarring the CGHS Beneficiaries without Family Photographs

2028. SHRI V.P. DURAISAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the CGHS beneficiaries are being denied CGHS facilities for not having affixed group-photo of the family;

(b) whether it is a fact that the cost of photograph is borne by the beneficiary who is subscribing for CGHS every month;

(c) if so, whether it is not violative under the Consumer Protection Act to deny CGHS facilities to the subscribers; and

(d) whether Government would direct the CGHS authorities not to deny medical facilities to the beneficiaries on the ground of their not having affixed photographs on CGHS cards.

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI SURESH PRABHU):

(a) No, Sir, as no such complaint has been received from any CGHS beneficiary in this regard.

(b) Yes, Sir. However, the cost of family photograph is nominal.

(c) CGHS is a heavily subsidised Government scheme and its services are not covered under the Consumer Protection Act. Hence, it is not a violation of the said Act.

(d) In view of (a) above, the question does not arise.

Affixing of Family Photograph on CGHS Cards

2029. SHRI O.P. KOHLI: Will the Minister of HEALTH AND FAMILY WELFARE be

pleased to state:

(a) whether Government have made it compulsory for all the CGHS beneficiaries to fix the photographs of all their family members on their CGHS Token Cards; and

(b) if so, the reasons necessitating such cumbersome provision which is quite expensive for the salaried class people?

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI SURESH PRABHU):

(a) Yes, Sir. However, children below the age of five years have been exempted from it.

(b) The cost of the family photograph is nominal and it has been introduced to prevent the misuse of CGHS cards by non-CGHS beneficiaries etc.

Schemes for Leprosy Patients

2030. SHRI RAHAS BIHARI BARIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the increasing incidents of leprosy in the country;

(b) if so, the steps taken to provide proper treatment for the leprosy, eradication of leprosy and rehabilitation of leprosy patients after they are fully cured; and

(c) the details of the schemes prepared thereon for Ninth Plan?

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI SURESH PRABHU):

(a) to (c) There is no increase in incidence of leprosy in the country.

However, steps have been taken by the Ministry of Health to provide MDT to all leprosy patients free of cost with the objective of achieving elimination of leprosy as a public health problem by reducing the care load to less than one per 10,000 by 2000 A.D. The Ministry of Welfare have a scheme for providing assistance to voluntary organisations for rehabilitations of leprosy cured patients.

During the 9th Plan period this Ministry will continue to implement the National Leprosy Eradication Programme as done during the 8th Plan with an objective to further reduce morbidity due to leprosy.