

(c) Methodwise family planning performance during 1995-96 and 1996-97 is as follows.

(In thousand acceptors)

F.P. Methods	1995-96	1996-97
Sterilisation	4419.6	3816.5
IUD Insertions	6849.8	5712.5
Condom Users	17290.4	17111.3
Oral Pill Users	5065.6	5167.6

(d) Technical and financial assistance has been received during the last five years (from 1992-93 to 1996-97) for the Family Welfare Programme from various international agencies which are mainly, World Bank, UNFPA, UNICEF, USAIDWHO, ODA, DANIDA, NORAD. The total assistance amounts to about Rs. 3555 crores during this period.

Goal of 'Health For All' By 2000 AD

1744. SHRI SANJAY NIRUPAM:
SHRI MUKESH R. PATEL:

Will the PRIME MINISTER be pleased to state:

(a) what are Government's steps to achieve the goal of "Health For All" by 2000 AD, according to National Health Policy;

(b) the details thereof; and

(c) the details of funds allocated to achieve this goal, programme-wise

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY) (a) and (b) The goals set out in the National Health Policy, 1983 are sought to be achieved through a number of programmes being implemented for the control of diseases and extension of immunization cover particularly to women and children. "Health for All" is universal goal and the State Government are primarily responsible for the extension of primary health care and implementation of the public health programmes and strategies aimed at controlling morbidity and mortality.

A comprehensive network of 132727 sub-centres, 21853 primary health centres and 2424 community health centres have been established throughout the country.

Externally assistance has been availed by the Central Government for supporting the National programmes of Malaria, TB, Leprosy and Blindness.

The National AIDS Control Organisation has been established with the Responsibility for building awareness about safe blood and blood products and safe-sex with a view to preventing the spread of AIDS. The modernisation of Blood Banks and the training of doctors and hospital workers has been undertaken.

While implementing the National Family Welfare Programmes priority has been accorded to the health of needs of women and children.

The Indian Systems of Medicine are sought to be integrated to give with the existing infrastructure medical cover to patients in a manner which suits their individual needs and dispositions.

The undergraduate medical curriculum has been revised to make it more relevant to present day needs.

Health promotion has been given a renewed thrust through the provision of specific budgets for information, education and communication for major programmes.

(c) The allocation of funds for the major National Health Programmes during 1997-98 are as under:—

(Rs. in crores)

National Family Welfare Programmes	1829.35
ISM & Homocopathy	35.30
National AIDS Control Programme	100.00
National Leprosy Eradication Programme	75.00
National Tuberculosis Control Programme	90.00

National Programme for Control of Blindness 70.00

National Malaria Eradication Programme 200.00

However, no specific funds are earmarked for achievement of the goals of Health for All which are dependent on various factors including nutrition, literacy, safe drinking water, sanitation etc. The implementation of health and family welfare programme are carried out through resources allocated to the States directly by the Planning Commission. The Central Government has launched several National Programmes to augment the work being done by the States.

Treatment of AIDS Patients

1745. SHRI RAHASBIHARI BARIK: Will the PRIME MINISTER be pleased to state:

(a) whether Government have detected any HIV positive cases in Delhi and other Northern State during the last one year;

(b) if so, the details thereof; and

(c) the arrangements made for proper treatment of those cases?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes, Sir.

(b) The number of HIV positives detected in Delhi and other Northern States as reported to National AIDS Control Organisation during last one year are as follows:

S. No.	State	HIV+ves
1.	Delhi	223
2.	Punjab/Chandigarh	61
3.	Haryana	69
4.	Himachal Pradesh	21
5.	Jammu & Kashmir	14
6.	Rajasthan	163
7.	Uttar Pradesh	136

(c) All HIV Positives and AIDS cases are treated like other Patients in Government Hospitals without any discrimination, including the Indoor facilities by adopting universal bio-safety precautions. Government of India have identified 36 State Physician Responsible for AIDS Management, for diagnosis and treatment of referred AIDS cases. Both government and Private Physicians are being trained in the diagnosis and Clinical management of AIDS cases.

Treatment of blood cancer through metal therapy

1746. SHRI S.M. KRISHNA: Will the PRIME MINISTER be pleased to state:

(a) whether treatment of blood cancer in Ayurvedic system through metal therapy is available in the country; if so, the details thereof;

(b) what are the details of the formulation for treatment;

(c) whether it is a fact that a request from one Shri Bhalendu Vaidya for recognition of his formulation for metal therapy is pending in Ministry of Health and Family Welfare for the last ten years;

(d) whether two central teams have studied and analysed the feasibility of cancer treatment through Vaidya's formulation, if so, what were the findings of these teams; and

(e) what are the bottlenecks in recognising Vaidya's formulation and by when it would be recognised?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (e) Information is being collected and will be laid on the table of the House.

Denying admissions to serious patients in hospitals

1747. SHRI S.M. KRISHNA: Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that hospitals in Delhi, including private hospitals, are denying admission to serious patients,