

THE MINISTER OF CIVIL AVIATION (SHRI CM. IBRAHIM): (a) No, Sir. (b) and (c) Do not arise.

**Non-Punctuality of evening flights of Indian Airlines**

1506. SHRI YERRA NARAYANASWAMY: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Indian Airlines monitor the punctuality of its flights on a daily basis;

(b) whether it is a fact the evening flights from Delhi to Hydera ad have never maintained punctuality in 1995-% and during the period upto June, 1996;

(c) if so, what are the reasons for the chronic delays of this particular flight;

(d) whether Government would ensure that constant and chronic delays are not harming the reputation of Indian Airlines; and

(e) if so, the details thereof?

THE MINISTER OF CIVIL AVIATION (SHRI CM. IBRAHIM): (a) Yes, Sir.

(b) to (e) No, Sir. During the year 1995-96 and 1996-97 (Upto June, 19%) over 75% and 68% respectively of the evening flights from Delhi to Hyderabad left on time. The remaining flights were delayed/cancelled due to adverse weather airport restrictions, technical snags etc.

**Profits of ITDC**

1507. DR. D. VENKATESHWAR RAO: Will the Minister of TOURISM be pleased to state:

(a) whether ITDC during 1995-% has achieved highest profit;

(b) if so, whether tourist traffic increased during the said period;

(c) if so, to what extent;

(d) whether ITDC conveyed to Government that shortage of hotel rooms affected increase in trousim;

(e) if so, whether any concrete steps were taken to provide hotel rooms to the foreign tourists; and

(f) what were the other facilities provided to the tourist?

THE MINISTER OF PARLIAMENTARY AFFAIRS AND THE MINISTER OF TOURISM (SHRI SRIKANTA JENA): (a) Yes, Sir. During 1995-96, ITDC has earned profit (before tax) of Rs. 65.19 crores (Provisional).

(b) and (c) Yes, Sir. The tourist arrivals in the country during 1995-% were 2.19 million and registered a growth of 14.8 per cent over the previous year.

(d) to (f) There are shortages of hotel rooms in the metro-politan cities particularly in the peak season. A large number of high quality hotels are being added every year to cater to the needs of increasing number of tourists. These hotels are coming up mainly in the private sector and the Government is providing the necessary support facilities and incentives.

The other facilities being provided to the tourists include the setting up of restaurant, wayside amenities, recreation facilities, tourist reception and information services and public conveniences, by the State/UT Governments, with Central Govt. assistance.

**Replacement of Eye-Ratina by Dr. R.P. Centre for Ophthalmic Sciences (AIIMS)**

1508. SHRIMATI MALTI SHARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Dr. R.P. Centre for Ophthalmic Sciences (AIIMS), New Delhi had called the "Top Priority List" children for replacement of eye-ratina in the month of December, 1995;

(b) if so, the details thereof;

(c) the number of children whose eye-ratina have been replaced and the number of children whose cases have been refused for replacement of the ground of defectiveness;

(d) whether it is a fact that the child whose SI. No. was 2153 (Top Priority List) could not be considered on the basis of damage of eye-sight; and

(e) what are the reasons and whether refused cases would be considered again?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) During the month of December, 1995, 20 children from 'Top Priority List' were called for final check up and admission for replacement of cornea and not for retina replacement.

(c) Total 7 children were operated for keratoplasty, who reported in response to call letters.

(d) The patient at S. No. 2153 was adequately evaluated.

(e) After evaluation, the surgery is not carried out if the patient is *not* found fit for surgery.

#### **New Approach for Implementation of Family Welfare Programme**

1509. SHRI RAHASBIHARI BARIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a new approach has been adopted for implementing family welfare programme;

(b) if so, the components of the new approach;

(c) whether Governemnt have also identified the reasons for the failure of family planning /welfare programme;

(d) if so, the details thereof; and

(e) the steps taken to ractify the error in order to make the family planning/ welfare programme a great success?

MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) Yes, Sir.

(b) The system of setting contraceptive targets from the top has been replaced by a system of decentralised participants palnning at the Primary Health Centre level. The Primary Health Centre level planning will take into account the needs of the community and is expected to lead to improvement in quality of services as well as greater acceptance by the people.

(c) and (d) The programme has brought down the crude birth rate from 41.2 per 1000 population during 1961—71 to 28.7 per 1000 population in 1994 and infant mortality rate from 139 per 1000 live births during 1972 to 74 per 1000 live birhts in 1994. However, there are wide state-wise variations in adoption of family planning programme which inter-alia de pends on factors like strong son prefer ence, low female literacy, low age at marriage and socio-economic conditions,

(e) The steps taken, inter-alia, include (i) Integratged Reproductive Child Health (RCH) package with emphasis on quality and clients' satisfaction (it) increased involvement of Non-Governmen-tal organisations (NGOs) (iii) Implementation of Family Wefare Programme on the basis of target-free approach effective from 1996-97 with emphasis on quality of care and clients' satisfaction making Family Planning Programme as a community programme (iv) externally aided projects in states having higher growth rate.

#### **Functioning of CGHS Dispensaries at Gole Market Chitrs Glpts Road and Psharganj**

1510. SHRI K.M. KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether working hours of C.G.H.S. Dispensaries in Delhi are from 7.30 a.m. to 1.30 p.m.;

(b) if so, whether nose of paramedical and clerical staff is available daily at 7.30 a.m. in dispensaries of Gole Market, Chitra Gupta Road, Minto Road and Paharganj;