

Vietnam, with the British Petroleum Standard Oil we are drilling for Oil and gas there. We are going through a very sensitive stage. There, it is not proper for me to share what we have achieved already there, but I would like to assure the hon. Members that besides Vietnam, I am looking towards Egypt, I am looking towards parts of South Africa and I am looking towards the C.I. States also to explore oil there. That is part of the strategy.

THE DEPUTY CHAIRMAN: I think, enough number of questions have been asked on this issue. ...*(interruptions)*... Like that, I have to call everybody, not only one person, because I have got five-six names. But I do not think that we can explore more oil if there is no oil in the well. ...*(Interruptions)*... I know that. I think we should go to another question because there are questions on other subjects also.

Medicos Going Abroad

*324. SHRI RAM RATAN RAM:
DR. SHRIKANT RAM-
CHANDRA JICHKAR*:

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

(a) the number of medical graduates who have left the country during the last three years;

(b) the number of medical graduates who have come back to India during the above period; and

(c) what steps are being taken to prevent the medical graduates from leaving the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) and (b) No reliable information is available.

* The Question was actually asked on the floor of the House by Dr. Shrikant Ramchandra Jichkar.

(c) Such steps include:—

- (i) better promotional avenues and allowances to doctors employed by the Central Government; providing modern equipment and research facilities in tertiary case hospitals;
- (ii) restrictions on going abroad for studies in medical disciplines where training facilities have already been developed in the country;
- (iii) No Obligation to Return to India Certificates (NORI) which is a pre-requisite to the process of migration to USA is granted by the Ministry of Health & Family Welfare in exceptional circumstances.

DR. SHRIKANT RAMCHANDRA JICHKAR: Madam, before asking my first supplementary, kindly allow me to ask the Minister whether he wants to correct this answer because the same hon. Minister, in reply to my own question, No. 5668 on 4th May, 1994, gave me the information, about which he says now that no reliable information is available. In reply to my same question, the Minister had given the number of medical graduates who had gone abroad and the number of medical graduates who had returned. So, I would like to ask the hon. Minister whether he wants to correct his answer.

THE DEPUTY CHAIRMAN: Actually, he gave the figure, but, perhaps, he is not satisfied. So, according to him, it is not very reliable.

DR. SHRIKANT RAMCHANDRA JICHKAR: At that time the angle on the question was different and now the perspectives is different.

DR. C. SILVERA: Madam, the figure got by the Member was given by the CSIR and I had given the number of doctors trained abroad and registered with CSIR in various countries and the number of those who have returned to the country during the last three years. I

have those figures with me but these are not the only doctors who have gone abroad but there are various other doctors also who have gone abroad. The number which the Member has referred to, was on the record of the CSIR.

THE DEPUTY CHAIRMAN: But everybody does not register with CSIR. That is why it is not a very reliable thing(interruptions)...

DR. SHRIKANT RAMCHANDRA JICHKAR: Sec, last time when I had asked the question, I had asked about doctors. This time, I had asked about doctors. This time, I have asked about the medical graduates. It means one and the same thing, just to find out whether the Government considers doctors and the medical graduates alike. Last time, I had asked about allopathic doctors; this time, about the medical graduates. Anyway, we have the information which the hon. Minister gave. The United Nations Conference on Trade and Development (UNCTAD) had made a study and prepared a report on the scientific and technical manpower migrating from the developing countries, including India, to the developed countries. Their finding was that out of the total number of people who go out through the Bombay airport—39.4% people go out through the Bombay airport—only 8.6% return. They have given what the reasons are, why the doctors go out of the country and what should be done. In view of the report of the UNCTAD, which is available with them—they have told us about it—I would like to know from the hon. Minister what steps—these are not the steps which the UNCTAD report has mentioned—the Government is taking to see that the brain drain is prevented.

THE DEPUTY CHAIRMAN: At least this Doctor did not go. So, you should be thankful to him. He is prepared to answer. He went and came back and he is with us.

DR. C. SILVERA: Madam, various measures have been taken by the

Government to prevent the brain drain in respect of doctors. One of the measures taken is the restriction imposed on the release of foreign exchange. It was done in 1962. According to a Cabinet decision, in 1965, some measures had been taken. One was stopping of ECFMG examination in India, which is one of the examinations in the United States. It is stopped. The second was restrictive issue of passports. The third was non-granting of permission in respect of eleven scarce specialities which were identified. The fourth was issuing of 'No Objection Certificate' in the case of 22 identified specialities subject to signing a bond of Rs. 50,000 to return. The fifth was restricted issue of "No Obligation to Return to India" certificate. Other measures are also taken for creating promotional avenues and better service conditions for the doctors in India.

DR. SHRIKANT RAMCHANDRA JICHKAR: Madm, I am satisfied with the Minister's reply. My second supplementary is this: When a team of the International Committee of the Red Cross visited Kashmir, the people of Kashmir placed before them a very peculiar problem to which I would like the hon. Minister to address himself because Kashmir rightly deserves some special treatment. The people of Kashmir told the committee that the non-Muslim doctors were migrating from the Valley and the Muslim doctors were making a beeline, in increasing number, for going to the Gulf countries. I would like to know whether the Government would like to consider giving special incentives to the Kashmiri doctors to see that more and more Kashmiri doctors remained in the Valley. How would the Minister like to react to this? There are very few doctors. The report says very few doctors have remained in the Valley.

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): Madam, it is a fact that due to insurgency and other

activities medical services in the Valley are also affected. The Government of India has taken note of all the developments there. Our Health Secretary and the Director-General of Health Services have had discussions with the medical personnel there to see that the best possible medical care is being given to the people of Kashmir.

SHRI JAGMOHAN: Sir, my point is that you ask of any Government doctor, who is friendly to you, who is a very creative and talented person, "Why do you migrate to the United States? Why don't you serve your own country?" The answer given even by a very well-meaning friend is, it is better to have brain-drain than to have the brain in the drain. The issue is that the work environment in our hospitals, medical institutions and research institutions is so frustrating that those gentlemen who want to stay here, who want to be creative and who are not attracted by the high salaries that they give, are compelled to migrate. My question is: What are the steps being taken by the Government to improve the work environment to end this type of frustrating atmosphere so that the national loss in training and education of doctors does not take place and at the same time, the gap between the developed and the developing countries so far as potential for further development and advancement is concerned, is not further widened? This is my question.

SHRI PABAN SINGH GHATOWAR: Madam, it is a fact that a lot of doctors are migrating to the foreign countries. Let me say frankly that the main attraction for most of them is money. The amount they pay to our doctors, our country cannot afford to pay. Madam, my senior colleague has already mentioned about the promotional avenues and other facilities. There were a lot of restrictions in the past. Recently, both the Houses of Parliament have congratulated Dr. Venugopal. It became

possible by passing the Bill on the transplantation of human organs. The Government of India, with its limited resources, has tried to give the research and other facilities to the doctors so that they can achieve the glory which the other doctors are achieving in the other developed countries of the world.

THE DEPUTY CHAIRMAN: It is not the question of money. He asked about the working conditions over here.

SHRI K.R. JAYADEVAPPA: Madam, the number of medical graduates leaving the country is increasing considerably year by year. What is the reason for this? Is there any attraction in foreign countries or there are no facilities available in our country? If this is not checked, the doctors will settle in the foreign countries. So, what is the reaction of the Minister?

THE DEPUTY CHAIRMAN: Same question.

SHRI PABAN SINGH GHATOWAR: Madam we are definitely one of the rich country in trained manpower in the world. It is always not good to restrict all those doctors who want to go abroad and work in other countries. They give a valuable foreign exchange to our country. At the same time, we have to look to our national interests also. As far as our record in the Employment Exchanges is concerned, that gives a clear picture that there are not many unemployed doctors in our country. We are trying to see that, according to the scheme, more and more doctors are appointed in our country.

SHRI JOHN F. FERNANDES: Madam, the contention of the Government is that the doctors going abroad constitutes not only brain-drain but also investment drain. There is no doubt that when these doctors go abroad, they themselves get trained in foreign countries and they also help in remittance of foreign exchange to the country. They go abroad because they have better opportunities and facilities overseas. At the same time, we have to see that the

Government spends about Rs. 4 lakhs to Rs. 8 lakhs on every doctor to train him. I would like to know from the hon. Minister whether they will see that an undertaking is taken at the time of admission that the after training will remain in the country for 10 years and if they want to leave the country, then they will have to refund the amount which is spent on their training, to the Government.

SHRI PABAN SINGH GHATOWAR: Madam, it is a good suggestion.

THE DEPUTY CHAIRMAN: I think, after this nothing is left in this question. Now, next question.

*325. [The Questioner (Dr. Naunihal Singh) was absent. For answer vide col. 36 *infra*.]

Indian in Countries of the European Union

*326. **SHRI V. RAJESHWAR RAO:**
**DR. SHRIKANT RAM-
CHANDRA JICHKAR:**

Will the Minister of EXTERNAL AFFAIRS be pleased to state:

(a) what is the number of Indians presently in the various countries of the European Union;

(b) whether Government are aware of the difficulties being faced by them pertaining to racial attacks; and

(c) what steps Government propose to take in this direction?

THE MINISTER OF STATE IN THE MINISTRY OF EXTERNAL AFFAIRS (SHRI SALMAN KHURSHEED): (a) to (c) A statement is laid on the Table of the House.

Statement

(a) to (c) The approximate number of persons of Indian origin in the countries of the European Union is as follows:

Belgium—7,000;	Denmark—1,800;
France—10,000;	Germany—40,500;
Greece—350;	Ireland—1,500;
Italy—15,000;	Luxembourg—200;
Netherlands—6,000;	Portugal—1,02,000;
Spain—8,000; and the U.K.—8,62,000.	

2. Government are aware of incidents of racial attacks and harassment in some of the countries of European Union.

3. Our Missions in the countries of the European Union remain in constant contact with the Indian origin community to assist them in every manner possible and to ensure the welfare of Indian nationals. Whenever any incident involving Indian nationals comes to light, our Missions take prompt action to pursue the matter with the local authorities for remedial action. Governments of countries in the European Union where there have been incidents of racially motivated attacks and harassment are themselves making efforts to improve race relations and to check such incidents through effective action by the concerned authorities.

DR. SHRIKANT RAMCHANDRA JICHKAR: Madam, the hon. Minister has said in the reply that our Missions in the countries of the European Union remain in constant contact with the Indian community and assist them. But the fact is that the staff of the Indian Missions abroad, particularly, the Missions in the United Kingdom, do not treat Indians properly. It is very difficult for Indians staying abroad to develop contact with or to approach the staff of the Indian Missions there. So, would the Government conduct a survey and elicit from the Indian community abroad—the Minister has given the figures and they are not too many—as to what they expect from the Missions? I want to know this because you have said that the Missions are doing such and such things. But what would the Indian community there want the Missions to do? Would the Minister conduct a survey and elicit an opinion on this?

SHRI SALMAN KHURSHEED: Madam, it is an excellent suggestion. I value the concern which the hon. Member has expressed. But, I would like to say that the purpose of diplomatic missions, apart from representing the country, is also to keep track of the