

tion for Coal India Ltd. (CIL) for two different levels of production in 1980-95, the terminal year of the Eighth plan. Subsequently in September, 1990 CIL had submitted a revised proposal for the Eighth Plan.

Preliminary discussions have been held with the Planning Commission but the Eighth Plan has not yet been finalised. The details of different proposals for Coal India Ltd. are given below:

Working Group		Proposal		Revised Proposal of CIL. (Sept. 90)	
Scenario I		Scenario II			
Investment- (1990-95) (Rs. crs. )-	Production (1994-95)	Investment (1990-95) (Rs. crs. )-	Production-in 1994-95-(mt)	Investment- 1990-95 (Rs crs. )	Production in 1994-95 (mt)
13946. 31	270. 86	11966. 44	261. 87	10499. 07	247. 00

(d) As a result of the revised proposal, CIL's coal production is likely to increase from 178. 62 million tonnes in 1989-90 to 247. 00 million tonnes in 1994-95.

#### Legislation to prevent smoking

584. SHRI B. K. HARIPRASAD: SHRI SHAMIM HASHMI:

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

(a) whether it is a fact that tobacco would eventually kill about half a billion of the world population today if current world wide smoking patterns persist;

(b) whether Government are taking any serious measures to stop this trend in India as it is already killing eight to ten lakh of Indians annually;

(c) why the State Governments barring a few are not taking serious legislative measures to control the use of tobacco;

(d) by when the Central Government propose to introduce a Bill containing comprehensive anti-smoking measures as stated by the Union Health Secretary at the Valedictory address during the International Symposium on 'Preventive cardiology and Cardiovascular Epidemiology' at AIIMS on the 14th January, 1991; and

(e) what are the salient features of the proposed Bill?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE AND DEPUTY MINISTER IN THE MINISTRY OF INDUSTRY (SHRI DASAI CHOWDHARY): (a) Tobacco would eventually kill about half a billion of the world population, if the current worldwide smoking pattern persists, are the findings of a WHO Consultative Group on Statistical aspects of tobacco related mortality held at Perth, Australia in April, 1990.

(b) and (c) In order to protect the non-smoking public, from the hazards of passive smoking, instructions have been issued to prohibit tobacco to start with, in a few selected places,

namely hospitals, dispensaries and other health care establishments, educational institutions, conference rooms, domestic airflights, airconditioned chaircars and airconditioned sleeper coaches in trains, suburban trains and air-conditioned buses. Besides, extensive health education measures through school health programmes, adult education programme and mass media are being undertaken to educate masses about harmful effect of smoking.

(d) and (e) The proposed legislation seek amendments to the existing legislation on cigarette, namely, The Cigarette (Regulation of Production, Supply and Distribution) Act, 1975 is under examination in consultation with Ministry of Law and other concerned authorities. The main features of the proposed legislation are as follows: —

—The existing statutory warning on cigarette packets/advertisements/hoarding that 'Cigarette smoking is injurious to health' will be expanded to include one or the other telling slogans mentioned below:

'Smoking can lead to Oral Cancer'

'Smoking can cause heart problems'

'Smoking may reduce your life span'

'Smoking can aggravate respiratory problems'

—Statutory warning will be prominently displayed on the cigarette packets.

—Prohibition of advertisements of cigarettes.

#### Hazardous Chemicals

585. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to

(a) whether it is a fact that as per ILO information (Vol. 25, No. 2 May,

1989) some 3500—8000 chemicals in the market are hazardous in nature out of which some 150—200 can cause cancer;

(b) whether a list of such chemicals has been compiled and is available in the Indian market and if so, the details thereof and the source of supply; and

(c) if such a list has not yet been compiled whether this will be done at the earliest and made available to the public on no loss no profit basis?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE AND DEPUTY MINISTER IN THE MINISTRY OF INDUSTRY (SHRI DASAI CHOW-DHARY): (a) to (c) The information is being collected and will be laid on the Table of the Sabha.

#### Deteriorating condition of Primary Health Centres in the Country

586. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to

(a) whether Government are aware of the depressing scenario and poor state of affairs of the country's Primary Health Centres which are expected to have changed the rural health scene in the country; and

(b) whether an independent monitoring and evaluation is proposed for revitalising these centres?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE AND DEPUTY MINISTER IN THE MINISTRY OF INDUSTRY (SHRI DASAI CHOW-DHARY): (a) Yes, Sir.

(b) Primary Health Centres all over the country are established under State Sector, Minimum Needs Programme and Staffing of Primary Health Centres and provision of medicines, equipment etc. for effective