

(d) if so, the details thereof and Government's action thereto?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) No. Though India's population has increased from 36 crore in 1951 to 102.87 crore in 2001, the country has witnessed significant decline in both fertility and mortality. The crude birth rate, which was recorded at 40.8 per 1000 in 1951, has declined to 23.1 in 2007, as per the estimates available from the Sample Registration System (SRS). The crude death rate, which was recorded at 25.1 per 1000 in 1951, has declined to 7.4 in 2007. Infant mortality rate has come down from 146 in 1951-61 to 55 in 2007. Total Fertility Rate (TFR) has come down from 6.0 in 1951 to 2.7 in 2007.

(c) and (d) Some States are lagging behind in achieving population stabilization. 5 States namely Assam, Gujarat, Jammu and Kashmir, Haryana, Orissa, are near to achieving the replacement level as they have attained TFR between 2.3 to 2.7. Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Rajasthan, Uttar Pradesh, may not be able to achieve the replacement level in the near future as these States have TFR from 3.1 to 3.9 as per SRS 2007.

The Government is committed to give focused attention to the demographically weak performing States through provisioning of all kinds of support including public awareness programme under NRHM, for which the States are free to project their priorities depending on local needs to further the task of population stabilization in the States specific Project Implementation Plans (PIPs).

Upgradation of small scale pharma units

3093. PROF. ALKA BALRAM KSHATRIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the investment, value-wise, that is required for infrastructure, machinery changes, etc., that a small scale pharmaceutical company set up before 2001 would have to spent for upgradation to schedule M;

(b) whether Government has failed to make budgetary provision for funds since 2001 leading to closure of small scale pharma units and vaccine units; and

(c) if so, the reaction of Government in light of 181st report of the Standing Committee on Subordinate Legislation in Rajya Sabha in February, 2009 to provide level playing field to the small scale pharma units?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) The Department of Pharmaceuticals has informed that as per available information, Ministry of Micro, Small and Medium Enterprises has a scheme for Technology Upgradation of Micro and Small Enterprises namely credit Linked Capital Subsidy Scheme (CLCSS) for approved 48 Sub-Sectors, including Pharmaceuticals Sub-Sector. Under this scheme 15% capital subsidy is provided upto a loan of Rs. 1.0 crore. Year-wise fund released under CLCSS for 48 various Sub-Sector including Pharmaceuticals Sub-Sector is as follows:—

Sl. No.	Year	Funds released (Rs. in crore)
1.	2000-2001	5.0
2.	2001-2002	0.1945
3.	2002-2003	3.45
4.	2003-2004	3.00
5.	2004-2005	5.41
6.	2005-2006	25.88
7.	2006-2007	73.637
8.	2007-2008	76.4
9.	2008-2009	108.888

Upto March, 2009, 126 Units have benefited under CLCSS and Rs. 554.37 lakh subsidy released to Drugs and Pharmaceuticals Micro and Small Enterprises.

(c) The Drugs and Cosmetics Act, 1940 which regulates the safety, efficacy and quality of drugs marketed in the country, does not distinguish between small scale or large scale Pharma units.

Purchase of medical equipments

3094. SHRI MANGALA KISAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the medical equipments, which can be procured by the concerned States under NRHM, equipment-wise alongwith the complete list;

(b) whether fiberoptic and video gastroscope and colonoscope for stomach disorders are permissible under NRHM;

(c) if not, what steps Government proposes take to include fiberoptic and video gastroscopes under NRHM;

(d) whether video colonoscopes are permitted under NRHM; and

(e) the details of steps being taken to allow such cancer screening equipment under NRHM at PHC/CHC level?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (e) NRHM provisions for all health facilities viz., Sub-Centre, Primary Health Centres, Community Health Centres and District Hospitals to reach the Indian Public Health Standards (IPHS) as per facility specific requirement which *inter-alia* includes medical equipment. The IPHS are available on the official website of this Ministry *i.e.* www.mohfw.nic.in.

Funds are released for health facilities in the State, as per their requirement reflected in the Annual State Programme Implementation Plan annually, which is appraised and approved by the National Programme Coordination Committee (NPCC) under NRHM.