## Adulteration of Kesari dal in Bengal grant

# 23J1. SHRI SHANKAR SINH VAGHELA:

### SHRI MUKHTIAR SINGH MALIK:

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

(a) whether it has come to the notice of Government that there has been considerable increase in the adulteration of fcesari dal in Bengal gram and sent to Southern State of the country;

(b) if so, what are the details thereof;

tc) whether any inquiry has since been made; and

(d) what steps are being taken by Government in this regard?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (MISS KUMUD BEN M. IOSHI). (a) to (c) This Ministry has no information regarding transportation of Kesari dal to the States of Karnataka, Kerala and Tamil Nadu and Union Territory of Pondichery and Lakshadweep. However, there are reports of transportation of Kesari dal to Srikakulum and Vijiiyanagaram in Andhra Pradesh through

Railway or road from Raipur, Madhya Pradesh.

(d) Sale of Kesari Dal or mixture of Kesari dal with any other pulses including Bengal gram is prohibited under the provision of Rule 44 of the Prevention of Food Adulteration Rules 1955. A notification for prohibiting the sale is to be issued by the State Governments. All States except Madhya Pradesh, Bihar and West Bengal have banned the sale of Kesari dai and its products. The State Governments have also been requested to keep strict vigil on sale of Kesari dal and its irse as adulterant in Bengal Gram.

232. [Transferred to llie 4ih May, 1»M]

# Coaiparatite ratio of funds spent on medicare in villages

233. DR. (SHRIMATI) NAJMA HEP TULLA; Will the Minister of HEALTH and FAMILY WELFARE be pleased to state;

(a) what peicentage of funds is being spent for medicare in villages;

(b) what percentage is being spent at district level; and

(c) what steps are proposed to be iak«n to remove the imbalance, if any?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI MOHSINA KIDWAI); (a) to (c) The expenditure on health is incurred for the Slate Programme as a whole and not village|Dislrict level-wise as such the village]District-wise percentage of expenditure is not collected. The priorities of the programmes are fixed by the State Governments. Primary Health care is being given priority. During the 6th Five Year Plan, emphasis has been shifted from development of city based curative services and super specialities to tackling rural heaith problems. A rural health care system based on a combination of preventive, promotive and curative hralth care services is being built up starting from the village as the base. In the 6th Five Year Plan (1980-85) nearly 17.8 per cent of the total Heaith Outlay is earmarked for Rural Health Programmes.

234. [Transferred io the Slh .May, 1984]

## Daily Wagon<sub>s</sub> Workers in Modern Bakeries Ltd.

235. SHRI RAM PUJAN PATEL\* Will the Minister of FOOD AND CIVIL SUPPLIES be pleased to state:

(a) whether employees 'working on daily wages basis in Modem Bakeries Ltd., Lawrence Road, New Delhi, ai« removed from service for 3-4 months before they complete 240 days and new recruhment is made in their place;