

Rs.53 Cr. However, the proposal for revised cost estimates for all the upgradation projects including NIMS, Hyderabad was placed before the Expenditure Finance Committee (EFC) on 23.9.2009 which *inter-alia* suggested that any additionality beyond the sanctioned budget for upgradation projects would be borne by the respective State Governments.

Manpower shortage in combating leprosy

4253. PROF. ALKA BALRAM KSHATRIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Central Governments has asked the State Governments to draw up action plans to overcome the shortage of manpower in dealing with leprosy disease;
- (b) if so, the details thereof;
- (c) whether in view of shortage of manpower in dealing with leprosy the number of cases of leprosy are increasing;
- (d) if so, the details thereof; and
- (e) what other concrete steps are proposed to be taken to eradicate leprosy disease from the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) and (b) No such action plan for dealing with the shortage of manpower, specifically for detection and treatment of leprosy is being drawn up. However, leprosy services for diagnosis and treatment are integrated in the general public health system and are available throughout the Country in all Primary Health Centres (PHCs), under the overall umbrella of National Rural Health Mission (NRHM). Capabilities of the medical officers and other health workers for leprosy diagnosis and treatment in the general health system, are being strengthened by regular training programmes under National Leprosy Eradication Programme (NLEP).

- (c) No.
- (d) Does not arise.
- (e) Eradication of leprosy means complete absence of the disease and the organism that causes it throughout the world which might take many more decades. Elimination of leprosy (*i.e.* prevalence rate of less than one case per 10,000 population) has already been achieved at national level in December 2005. However, following steps are being taken by government to further reduce the burden of leprosy—

- (i) Decentralized integrated leprosy services through General Health Care System.
- (ii) Training in leprosy to all General Health Services functionaries.
- (iii) Intensified Information, Education & Communication (IEC).
- (iv) Prevention of Disability & Medical Rehabilitation of leprosy affected persons and
- (v) Monitoring and supervision.

Death of children due to preventable diseases

4254. SHRIMATI KANIMOZHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether according to a World Vision report titled 'Child Health Now', it is estimated that nearly 5,000 children under five year of age die from preventable causes every day in the country;
- (b) the steps being taken to remedy the child mortality situation;
- (c) whether Government has a detailed, time-bound plan to meet the United Nations' Millennium Development Goal 4 to reduce under-5 and infant mortality rates;
- (d) if so, the details thereof; and
- (e) what is Government's expenditure towards programme targeted to improving child mortality rates?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) As per the World Vision Report titled 'Child Health Now' 2 million children die in India every year.

(b) Under the National Rural Health Mission (NRHM) (2005-2012), the Reproductive and Child Health Programme Phase II, comprehensively integrates interventions that improve child health and addresses factors contributing to morbidity and mortality.

The Interventions under the Child Health are as follows:-

- Integrated Management of Neonatal and Childhood Illness (IMNCI) and Pre-service Integrated Management of Neonatal and Childhood Illness.
- Facility Based Integrated Management of Neonatal and Childhood Illnesses (F-IMNCI).