

(e) the steps being taken to control depression?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE [DR. (SHRIMATI) RITA VERMA]: (a) Yes, Sir.

(b) Depression is one of the common mental ailments in Society and affects about 3-4% of the global population.

(c) Depression is caused by psycho-social factors like stress and trauma and also by biological factors like imbalance in levels of neuro-transmitters in the brain and hormones in the human body. It has been postulated that the radical shifts in society towards technology, changes in family and social supports and networks and commercialisation of existence, may be responsible for depression and other psychiatric disorders.

(d) Depression is a major cause of morbidity, not mortality. Depression may lead to the suicides; it may have adverse biologic effects on the immune system, blood clotting, blood pressure, blood vessels and heart rhythms. It is also a major cause of absenteeism at work and loss of productivity.

(e) Depression is a form of mental illness and facilities for treatment are available in a large number of tertiary hospitals both in the Government and Private Sector. To provide better provision of mental health services by developing community based mental health services integrated with existing primary health care services, a District Mental Health Programme has been launched by the Government under National Mental Health Programme in 1996-97, and is under implementation in 22 districts spread over 20 States in the country.

National Population Stabilisation Fund

2251. SHRI R.P. GOENKA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to set up a National Population Stabilisation Fund to achieve the purposes of the National Population Policy, which envisages stabilisation of population growth by 2020;

- (b) if so, the details of the proposals;
- (c) the specific thrust programmes drawn up to achieve the time bound targets, if any; and
- (d) the role assigned the NGOs and others in the scheme?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE [DR. (SHRIMATI) RITA VERMA]: (a) and (b) At the first meeting of the National Commission on Population, Prime Minister has announced creation of a Population Stabilisation Fund with initial contribution of Rs. 100 crore by Government of India. A call has been given to the corporate sector, voluntary organisations, NGOs etc. to contribute to the Fund. This will mitigate to a great extent the shortage of availability of funds in implementation of the population stabilisation programme which aims at stabilising population by 2045.

(c) The population stabilisation programme has now been substantially revamped and strengthened. A major development has been the adoption of the comprehensive, integrated and holistic programme of reproductive and child health, since October, 1997 which amalgamates all earlier initiatives like the maternal and child health, the universal immunisation Programme, and the child survival and safe motherhood. The RCH programme bridges gaps in the earlier programmes by focussing on neglected geographical sectors.

Government has adopted a National Population Policy in February, 2000 which provides for holistic approach for achieving population stabilisation in the country. The Policy affirms the commitment of government towards voluntary and informed choice and consent of citizens while availing of reproductive health care services, and continuation of the target free approach in administering family planning services. The Policy enumerates certain socio-demographic goals to be achieved by 2010 which will lead to achieving population stabilization by 2045. The Policy also prescribes for an Action Plan for implementing the strategic themes listed in the Policy.

(d) Supporting NGOs in the implementation of the National Family Welfare Programme has been a longstanding part of the

[11 August, 2000]

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Indian Programme. About 600 NGOs are currently receiving assistance. In order to decentralise the process and to give flexibility to NGOs in designing their own programmes including innovative programmes, a policy change has been implemented. Under this, the smaller NGOs actually implementing programmes will be entrusted to larger NGOs known as mother NGOs, for appraisal and sanction of projects, release of funds, training, supervision and monitoring/ evaluation. In addition, selected national NGOs are supported for implementing innovative projects. So far 65 Mother NGOs have been selected for this job.

To facilitate the attainment of the goals envisaged under the National Population Policy, an Empowered Action Group, will be set up which will be charged with the responsibility of preparing area-specific programmes, with special emphasis on States that have been lagging behind in containing population growth to manageable limits and will count for nearly half of country's population in the next two decades.

This Group will also concentrate on involving voluntary associations, community organisations and Panchayati Raj institutions in the national effort. It will explore, the possibility of expanding the scope of Social Marketing of contraceptives in a manner that makes them easily accessible even while raising awareness levels.

Prices/Quality of medicines at stores or CGHS

2252. SHRI ONWARD L. NONGTUDU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the amount spent on CGHS medicines of Allopathic, Ayurvedic, Homoeopathic and Unani Systems of Medicines in its store Depots;

(b) whether Government have found that medicines of Allopathic, Ayurvedic, Homoeopathic and Unani Systems are of low quality/potency than mentioned on the covers and bottles;

(c) whether their prices are becoming low and low for the last three years in the tenders; if so, the reasons therefor; and

(d) whether there is any Government machinery to ensure