

Incidence of Leprosy and Filaria in Orissa

501. SHRI B. C. MAHANTI : Will the Minister of HEALTH AND FAMILY PLANNING be pleased to state :

(a) whether it is a fact that the incidence of leprosy and filaria is the highest in Orissa and which other States have high incidence of such disease; and

(b) whether the Central Government propose to take any special measures to help the States concerned financially for the treatment, control and eradication of these two diseases ?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI A. K. M. ISHAQUE) :

(a) Yes, Orissa is one of the 16 States and Union Territories in the country where filariasis is recognised as a major health problem, the other States and Union Territories being Andhra Pradesh, Assam, Bihar, Gujarat, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Tamil Nadu, Uttar Pradesh, West Bengal, Andaman & Nicobar Islands, Lakshadweep, Pondicherry and Goa. Regarding Leprosy also Orissa is one of the high endemic States. The other endemic States and Union Territories for Leprosy are Tamil Nadu, Andhra Pradesh, West Bengal, Maharashtra, Bihar, Uttar Pradesh, Karnataka, Madhya Pradesh, Kerala, Gujarat, Assam, Nagaland, Pondicherry and Meghalaya.

(b) During the Fifth Plan under the National Filaria Control Programme, material and equipment are being supplied free of cost to these States. Under the National Leprosy Control Programme, the Government of India is meeting cent per cent expenditure on establishment of new Leprosy Control Units, Survey, Education, Treatment Centres, Upgradation of old leprosy control units, establishment of urban centres, training centres, Temporary hospitalization wards; appointment of non-medical supervisors, District/Zonal Leprosy Officers and purchase of vehicles drugs and equipments.

Development of Primary Health Care Centre

502. SHRI RABI RAY : Will the Minister of HEALTH AND FAMILY PLANNING be pleased to state :

(a) whether it is a fact that the Central Government have asked the State Governments to set up monitoring system to keep track of developments in regard to Primary Health Care Centre, sub-centre complexes crucial to rural medical programme and ensure proper utilisation of allocations ; and

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

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI A. K. M. ISHAQUE) :

(a) No.

(b) Question does not arise.

Houses for Harijans and Landless Labours

503. SHRI S. W. DHABE : Will the Minister of WORKS AND HOUSING be pleased to state :

(a) how many houses have been built for Harijans and landless labours in rural areas during 1974-75 ;

(b) how much amount has been spent for acquiring land for such houses during the last one year ; and

(c) whether Government have any comprehensive scheme in this regard ?

THE DEPUTY MINISTER IN THE MINISTRY OF WORKS AND HOUSING (SHRI DALBIR SINGH) : (a) to (c) A Scheme for provision of developed house-sites, free of cost, to landless families in Rural Areas, was introduced in October, 1971 in the Central Sector, as a part of the Minimum Needs Programme. The Scheme was transferred to the State Sector with effect from 1st April, 1974. There is no provision for construction of houses under this Scheme. The allottees of house-sites are expected to build houses there on with their own resources or with