

firmative and I am grateful to him for his suggestions.

SHRI KALYAN ROY: The hon. Minister has stated that another private company has also commenced its first voyage with 1247 tonnes of coal between Calcutta and Bangladesh on the 15th March, 1973. Would he be pleased to state what is the name of the private company and what are the terms on which they have transported this coal?

SHRI RAJ BAHADUR: The name of the private company is the Indian Shipping Company or something like that....

SHRI KALYAN ROY: He should be precise.

SHRI RAJ BAHADUR: It is the Indian Shipping Company and I have correctly spelt out the name. I only quoted from memory, but that is correct. It carries MMTC coal from Calcutta to Narayanganj.

SHRI KALYAN ROY: What are the terms?

SHRI RAJ BAHADUR: The Central Inland Water Transport Corporation in the public sector has not got the required fleet strength to carry all the cargo and so naturally we would like others also to come in. We are trying to carry cargo in our fleet as well.

DR. R. K. CHAKRABARTI: I find from the statement that about 1300 tonnes of timber has also moved from Assam to Bangladesh. In this connection may I ask the hon. Minister whether he is thinking of shipping Assam tea for export through the Calcutta port via Bangladesh instead of shipping through Kandla? It can use the river water transport system in Bangladesh and it can go through Calcutta port by steamer.

SHRI RAJ BAHADUR: That is a specific item of 50,000 tonnes of tea.

IMPACT OF FAMILY PLANNING PROGRAMMES

*579. **SHRI M. K. MOHTA:** Will the Minister of HEALTH AND FAMILY PLANNING be pleased to state:

(a) the impact of Government's family planning programmes executed upto now, on the population situation in the country;

(b) whether Government propose to take more vigorous measures to control population explosion; and

(c) what is the Government's future plan of action in this connection?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI KONDAJI BASAPPA): (a) It is estimated that as a result of the family planning programme, about 12.2 million births have been averted upto the end of 1972.

(b) Yes, Sir.

(c) A statement is laid on the Table of the Sabha.

STATEMENT

The following are the main elements in Government's plan for gearing up the family planning programme;

1. Strengthening of the infrastructure approved under the Programme.

2. High priority to be given to special programmes like the Post Partum programme and the intensive district programme.

3. Integration of maternal and child health family planning and general health programmes at all levels. Strengthening of schemes of immunisation and prophylaxis with a view to providing better health care for children.

4. Adoption of a new motivational strategy including new slogans:

which has as its approach, the health of the mother and the welfare of the child and the family and is directed more and more to individual and special groups.

5. Greater stress on evolving improved contraceptives technology including the use of indigenously evolved methods and devices.

6. Special attention to family planning work in States where progress has been slow.

7. Improvement in IUCD and sterilisation services by better selection after allaying public fears and apprehensions about these methods.

8. Intensive approach through large-scale mass vasectomy camps.

9. More intensive and improved training of various categories of personnel working in the family planning programme.

SHRI M. K. MOHTA: If one goes through the statement one will find that it is full of platitudes. It does not give any information at all. My question in part (c) is very specific: What is the Government's future plan of action in this connection? Para 5 of the statement says: Greater stress on evolving improved contraceptives. It does not mean anything at all. Then, again, para 7 says: Improvement in IUCD. I would like the hon. Minister to state very categorically and specifically what kind of contraceptives are being evolved by the Government. As far as IUCD is concerned, the general information that is appearing in the papers is that the whole programme has been scrapped. Is IUCD still a contraceptive which is being used by the Government or has it been given up? Has any other contraceptive taken its place or not? This information should be placed before the House.

SHRI KONDAJI BASAIPA: IOCD has not been given up. And oral pill named Cent Chromen and also another

one Cent Square have been under trial by the Research Institute at Lucknow. It is under examination and trial.

SHRI M. K. MOHTA: My second question is relating to para 8 of the statement: Intensive approach through large-scale mass vasectomy camps. May I ask the hon. Minister what is the Government's approach to these vasectomy camps? In the last 25 years only 12 million births have been prevented. It does not solve the problem at all. May I know whether any further financial allotment has been made for vasectomy camps and, if so, what are the details thereof?

SHRI R. K. KHADILKAR: So far as the camps are concerned, it is not a question of money. It is a question of approach. The hon. Member should realise that sterilization is one approach. IUCD is another. The spreading of the use of conventional contraceptives is a third. In the total picture of motivation at the family level the woman should be told that she would be less burdened and she would be enjoying greater freedom. So, that community and social incentive and motivation programme, constitute the final solution for this. It is bound to take some time. You cannot judge from these figures because they are just figures that we could collect. But the upper and the lower middle classes if have now taken to family planning silently; they do not advertise so much.

SHRI M. K. MOHTA: My question has been completely bypassed. The hon. Minister...

MR. CHAIRMAN: He has answered it.

SHRI M. K. MOHTA: The hon. Minister may have his own philosophy. I have no quarrel with him over that. But my question was: What was the financial allocation before and what is the financial allocation that you have now proposed for this?

SHRI R. K. KHADILKAR: So far as the financial allocation question is concerned, I have no figures. But as I said, there is no question of dearth of finance, it is only a question of getting people voluntarily for this programme.

SHRI THILLAI VILLALAN: Due to the faithful implementation of the family planning programme in the State of Tamil Nadu, the population there has been considerably reduced for the last 10 years. Originally, Tamil Nadu had got 41 seats for Parliament; then it has been reduced by two. Now, they are having only 39 seats. I would like to know from the hon. Minister whether any steps will be taken to fix the Parliamentary seats according to the population taken in the year 1961 or taken in the year 1971.

SHRI R. K. KHADILKAR: He should better address this question to the Law Ministry.

SHRI YASHPAL KAPUR: Is the hon. Minister aware that the States which have followed the family planning programme very vigorously till now are now afraid of doing so, are hesitant to do so, because they feel that their representation in the Lok Sabha will be reduced?

SHRI R. K. KHADILKAR: This is part of the other question. It is not correct that because of this our programme has slowed down. On the contrary, there is greater awareness now spreading, and people are coming forward. It is not a question linked up with representation here—so much population; so we must produce less children.

श्री जगदीश प्रसाद माथुर : यह जो आपका नसबंदी कार्यक्रम है, इसमें एक बड़ी शिकायत यह है कि जो नसबंदी कराता है उसको आप इनाम देते हैं, जो नसबंदी करने के लिए किसी को पकड़ कर लाता है उसको आप कुछ रुपया इनाम का देते

हैं और इस कारण से बहुत से स्थानों पर से इस प्रकार की शिकायतें आती हैं कि कहीं पर कम उम्र के लड़कों की और कहीं पर बूढ़ों की नसबंदी करा देते हैं। आप कहते हैं इसके लिए एल्योरेमेंट की, मनी की, कमी नहीं है। तो मनी की कमी नहीं है, तो इस नाते से जो उसका प्रयोग होता है उसमें दुरुपयोग भी होता है कि कई मामलों में जर्ब-दस्ती नसबंदी होती है। तो उसको रोकने का क्या आपके पास कोई उपाय है ?

SHRI R. K. KHADILKAR: So far as the vasectomy camps are concerned, as I said earlier, there is provision of money incentive and some complaints, a few complaints, not too many, have come to light where some pressure was used. As I said earlier, this economic motivation or incentive should not be given such a prominence, we will have to substitute it with a social motivation and community approach.

श्री सीताराम केसरी : अध्यक्ष जी, मैं आपके द्वारा स्वास्थ्य मंत्री महोदय से यह जानना चाहता हूँ कि उन्होंने अभी जो अपने वक्तव्य में यह कहा है कि सुधरी हुई गर्भ-निरोधक तकनीक तैयार करने में देश में तैयार किए गए उपकरण शामिल हैं और उन पर अधिकाधिक बल देंगे, इस सुधरी हुई गर्भ-निरोधक तकनीकी में कौन सी योजना है जो इसमें कामयाब हो रही है। पापुलेशन की रफ्तार तो तेजी से बढ़ रही है उसको रोकने में सुधरी हुई कौन सी नयी योजना उन्होंने बनाई है ?

SHRI R. K. KHADILKAR: Scientists are engaged in research on reproductive biology at Lucknow and other places in India. They are doing something. In the west also, this area is being investigated. It is not as if you take something and you will stop your pregnancy. There is no totally safe and harmless medicine available of that nature. But attempt is being made because the present pill has given some side effects. So

we want to have some medicine or some pill or something without side effects, a safe pill, that could be administered. Attempts are being made in that direction.

श्री ओउम् प्रकाश न्यागी : अध्यक्ष महोदय, मैं यह जानना चाहता हूँ कि क्या मंत्री महोदय को यह ज्ञान है कि 1971 की जनगणना में यह सिद्ध हुआ है कि कुछ प्रकार के वर्गों ने परिवार नियोजन को स्वीकार नहीं किया है और इसके परिणामस्वरूप जातियों अथवा वर्गों में आबादी की वृद्धि के अनुपात में बहुत बड़ा अन्तर रहता है और यही वजह है कि बहुत से वर्ग अपने दृष्टिकोण से इसका विरोध कर रहे हैं। मैं यह जानना चाहता हूँ कि क्या जनगणना पर नियंत्रण करने के लिये कोई ऐसा विधेयक लाने की आपकी राय है कि इतने बच्चे हो जाने के पश्चात् प्रत्येक व्यक्ति को नसबन्दी कराना होगा या स्त्री को गर्भ निरोध करना होगा अन्यथा सरकारी स्कूलों में और दूसरी जगह सुविधा नहीं दी जायेगी ? यदि ऐसा विचार है, तब तो ठीक है और यदि नहीं है, तो उसका क्या कारण है ?

SHRI R. K. KHADILKAR: So far as the first part of the question is concerned, no doubt there is some initial resistance in certain sections. But because of the economic situation and compulsions they can be persuaded and they are being persuaded. That resistance is now getting weaker and weaker because of the economic condition. So far as making it compulsory in some measure after two or three children is concerned such as sterilisation or vasectomy, it is a matter for serious consideration. If the hon'ble Member were to come forward with his party backing that they stand for compulsion in this field, I will give serious thought to it.

श्री नवल किशोर : श्रीमन्, क्या मंत्री महोदय को मालूम है कि अभी उत्तर प्रदेश

में फैमिली प्लानिंग के लिए बड़ा इंटेन्सिव कम्पेन हुआ था? उसमें यह हुआ कि जो बी० डी० ओज० गवर्नमेंट सर्वेन्ट्स और टीचर्स थे, उन सब के लिए कोटा बांध दिया गया था कि वे इतने लोगों को आपरेशन के लिए लायेंगे और श्री खाडिलकर साहब को ताजुद्द होगा कि उनसे भी ज्यादा उम्र के आदमियों का आपरेशन करा दिया गया।

श्री ओउम् मेहता : आप कैसे बच गये ?

श्री नवल किशोर : इसलिए मैं बच गया क्योंकि मिनिस्टर्स का नम्बर नहीं आया। मैं यह जानना चाहता हूँ कि वहाँ पर जो आपरेशन हुए, उसके बारे में मेरी इत्तिला है कि केवल 15-20 परसेन्ट जेनुइन आपरेशन हुए और करीब 85 परसेन्ट बोगस हुए। तो मैं यह जानना चाहता हूँ कि क्या आप इस चीज की जाच करायेंगे और क्या आप इस बात का आश्वासन देंगे कि आपकी उम्र के आदमियों की या ज्यादा उम्र के आदमियों की अथवा जो बैचलर्स हैं, उनको इस बारे में प्रोटेक्शन मिलेगा ?

SHRI R. K. KHADILKAR: So far as U.P. is concerned, the hon'ble Member will agree with me that this family planning programme did not spread so much as in other States. We are contemplating to have more intensive campaign about it there. So far as the evil that he has mentioned is concerned some cases, as I said earlier, have come to our notice because of the economic incentive. We are examining them. What has appeared in the Press is not totally correct. They are exaggerating because the conservative and orthodox section in this country would like to take that stand. We will counteract it. I may assure the hon'ble Member that whenever complaints have come to our notice, we investigated them. There is no compulsion of this nature as he mentioned.

SHRI K. C. PANDA: I had mentioned about a herb which is available in the Phulbani district of Orissa; the herb is called *Rakta Chitta Basu*.

Some sample of it was sent to the Chandigarh Institute of Research and it was found that it is efficacious with alcohol base and not with the aqua base. That herb is being used abundantly by the adivasis there. The hon'ble Minister had assured the House that he will let the House know about the results. May I know from the hon'ble Minister if any action has been taken to find out the results and for establishing a herbarium on the basis of the research?

SHRI R. K. KHADILKAR: So far as I am concerned, I am hearing it for the first time. But certainly I will assure him....

SHRI K. C. PANDA: It is on record in this House.

SHRI R. K. KHADILKAR: I will see what was passed on on the last occasion and I will give him information as to what progress has been made so far as processing this drug is concerned.

MR. CHAIRMAN: Next question.

DR. K. NAGAPPA ALVA: Sir, I am sorry you are ignoring me.

MR. CHAIRMAN: I am not ignoring you. I will call you on the next question.

DR. K. NAGAPPA ALVA: I am interested in this question. When I am interested more in this question, you ought to have allowed me.

MR. CHAIRMAN: There is no question of ignoring anyone. On the day when there are Health Ministry questions, I cannot call every doctor here on all the questions.

DR. K. NAGAPPA ALVA: Not every doctor. There are only two questions here I have got every right to ask.

MR. CHAIRMAN: No, please. Next question

CAPITATION FEE FOR ADMISSION TO MEDICAL COLLEGES

*580. SHRI DAHYABHAI V.

PATEL:

SHRI K. C. PANDA:†

SHRI M. K. MOHTA:

SHRI LOKANATH MISRA:

SHRI SUNDAR MANI:

PATEL:

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

(a) whether Government's attention has been invited to a statement made by the Mysore Minister for Health Mr. H. Siddaveerappa in the State Legislative Council on December 23, 1972, to the effect that some private medical colleges were charging capitation fee ranging from Rs. 50,000 to Rs. 1 lakh for admission to Medical Colleges; and

(b) if so, the reaction of Government in this regard?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY PLANNING (SHRI KONDAJI BASAPPA): (a) The statement has not formally come to Government's notice. It is, however a fact that some private medical colleges are charging high capitation fees for admission.

(b) It is proposed to undertake legislation on an all-India basis to prohibit opening of medical colleges by charging capitation fees.

SHRI K. C. PANDA: It is disgraceful that even after 25 years of independence and with so much of expenditure in the Health Ministry by the Central Government, we still hear about capitation fees for educating doctors especially just close to the Capital at Faridabad. There was a lot of discussion in the House about the taking of Rs. 20,000 to 50,000 for

†The question was actually asked on the floor of the House by Shri K. C. Panda.