

Ministry does not keep proper information with regard to how the funds are being effectively and promptly utilised for carrying out the projects under the Ministry of Health?

SHRI D. P. KARMAKAR: Sir, first the functioning in respect of these funds begins after our budget is formally passed. Then we tell the State Governments that so much amounts are available. In respect of those schemes in which they participate, most of the expenditure, except that which is incurred by the Government of India directly, is made by the State. Sometimes we have found that in the negotiations between the Health Ministry in the States and the Finance Ministry advantage is taken, and in some of the cases State Governments do not take advantage, of the facilities that are available by way of Central assistance. All these taken together contribute to the shortfall in expenditure.

So far as we are concerned, it has been always our anxiety. Last year we spent 98 per cent of the resources available to us directly. But we cannot help if there is delay in the States.

SHRI BHUPESH GUPTA: May I know, Sir, whether the Government consider it one of their functions that when allocations under the schemes are made to the States, they institute proper machinery for checking up that the funds are being properly used? It seems they have no such machinery at all and the matter is left to the State Governments.

SHRI D. P. KARMAKAR: That is not right, Sir. At the commencement of the year one of our officers is sent to the States to make the resources available to them. He asks them to make arrangements to spend them as early as possible. But unhappily it occurs sometimes, even in respect of schemes budgeted for, the State Governments are unable to draw the amounts, and . . .

Mr. CHAIRMAN: That will do. Next question.

श्री सहकारी नियमों तथा सम्मिलित
कृषि सहकारी समितियों के लिये कर्मचारियों
का शिक्षण

*५३. श्री राम सहाय : क्या सामुदायिक विकास तथा सहकार मंत्रालय की कृपा करेंगे कि राष्ट्रीय विस्तार मन्त्रालय के कर्मचारियों को सेवा सहकारी समितियों तथा सम्मिलित कृषि सहकारी समितियों के काम का समुचित ज्ञान हो, इसके लिये उनके प्रशिक्षण की कोई योजना क्या सरकार के विचाराधीन है ?

†[TRAINING OF WORKERS FOR SERVICE CO-OPERATIVE SOCIETIES AND COLLECTIVE FARMING CO-OPERATIVE SOCIETIES

*53. **SHRI RAM SAHAI:** Will the Minister of COMMUNITY DEVELOPMENT AND CO-OPERATION be pleased to state whether there is any scheme under Government's consideration for training the workers of the National Extension Service Blocks in the work of the Service Co-operative Societies and the Collective Farming Co-operative Societies?

सामुदायिक विकास तथा सहकार मंत्रालय
के संसदीय सचिव (श्री एस० डी० मिश्र) :
जी हाँ ।

†[THE PARLIAMENTARY SECRETARY TO THE MINISTER OF COMMUNITY DEVELOPMENT AND CO-OPERATION (SHRI S. D. MISRA): Yes, Sir.]

श्री राम सहाय : क्या माननीय मंत्री महोदय यह बताने की कृपा करेंगे कि विलेज-लेवेल वर्कर्स से लेकर ग्रामसेवक और ग्रामसेविका तक और बी० डी० ओ० इत्यादि सबके लिये ऐसी कोई व्यवस्था श्रीमन् ने की है ?

श्री एस० डी० मिश्र : जी हाँ ।

†[] English translation.

श्री राम सहाय : मैं यह जानना चाहूंगा कि यह व्यवस्था स्टेट गवर्नमेंट्स द्वारा की जा रही है या केन्द्रीय सरकार द्वारा भी की जा रही है ?

SHRI S. D. MISRA: It is done through the Central Government.

DR. RAGHUBIR SINH: Hindi, Sir.

श्री एस० डी० मिश्र : केन्द्रीय सरकार द्वारा की जा रही है ।

फैमिली प्लानिंग प्रोग्राम के अधीन क्लीनिकों का खोला जाना

***५४. श्री राम सहाय :** क्या स्वास्थ्य मंत्री यह बताने की कृपा करेंगे कि :

(क) मार्च, १९५९ तक द्वितीय पंच-वर्षीय योजना के अन्तर्गत फैमिली प्लानिंग प्रोग्राम के सिलसिले में जो ७५० क्लीनिक खोले जाने वाले थे—६०० ग्रामों में तथा १५० शहरों में—वह शहरों में टारगेट से ज्यादा क्यों खोले गये और गांवों में टारगेट के मुताबिक क्यों नहीं खोले गये ; और

(ख) गांवों में इन क्लीनिकों से ग्रामीण जनता ने सन्तोषप्रद लाभ उठाया है अथवा नहीं ?

†[OPENING OF CLINICS UNDER FAMILY PLANNING PROGRAMME

***54. SHRI RAM SAHAI:** Will the Minister of HEALTH be pleased to state:

(a) the reason why the number of clinics opened in the urban areas is much more than the target and the number of those opened in the rural areas is not according to the target of the total 750 clinics—600 rural and 150 urban—which were to be opened up to March, 1959 in connection with the Family Planning Programme

under the Second Five Year Plan; and

(b) whether the rural population has availed itself of these clinics satisfactorily or not?]

स्वास्थ्य मंत्री (श्री डी० पी० कर्मकर):

(क) आंध्र प्रदेश, आसाम, बम्बई, मध्य प्रदेश, मद्रास और उड़ीसा राज्यों ने गांवों में खोले जाने वाले क्लीनिक अपने निश्चित टारगेट से ज्यादा खोल दिये हैं । केरल राज्य ने टारगेट पूरा कर लिया है । दूसरे राज्यों में गांवों में खोले जाने वाले क्लीनिकों के टारगेट पूरा न होने का कारण यह है कि वहां पर्याप्त संख्या में अपेक्षित परिपक्वता, शिक्षा और अनुभव वाले कार्यकर्ताओं की अधिकतर कमी है ।

(ख) ग्रामीण जनता ने काफी हद तक परिवार नियोजन क्लीनिकों में दी गयी सुविधाओं से लाभ उठाया है ।

†[THE MINISTER OF HEALTH (SHRI D. P. KARMARKAR): (a) The States of Andhra Pradesh, Assam, Bombay, Madhya Pradesh, Madras and Orissa have exceeded the targets fixed for opening of rural clinics. The State of Kerala has achieved the target. Regarding other States, the reason for not achieving the targets for opening rural clinics is largely due to the absence of sufficient number of workers with the requisite, maturity, education and experience.

(b) The rural population have by and large availed of the facilities provided in the family planning clinics.]

SHRI D. A. MIRZA: May I know, Sir, the number of families in the rural areas or the number of families in the urban areas that have taken advantage of this scheme?

SHRI D. P. KARMARKAR: I should like to have notice about it.