

made there under do not have any provisions for fixation of salary of teaching faculty of medical colleges. However, salary for the faculty of government medical colleges is, being fixed by the respective State Governments.

Adolescent anaemia

1636. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that adolescent anaemia is fast overtaking the country;
- (b) if so, the details thereof with the reasons therefor;
- (c) whether it is proposed to launch any programme on a weekly basis to address this issue;
- (d) if so, the details thereof;
- (e) the gravity of this illness in the country-side with reasons therefor; and
- (f) whether it is proposed to launch this programme free of cost?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A.H. KHAN CHOUDHURY): (a) Anaemia is a long standing problem in India and the country has a high prevalence of anaemia amongst adolescents.

(b) The prevalence of anaemia in girls and in boys is high as per the reports of NFHS 3 (2005-06). According to NFHS 3 data, over 56% of adolescent girls and 30% boys are anaemic. Adolescent girls in particular are more vulnerable to anaemia due to the rapid growth of the body and loss of blood during menstruation.

According to NFHS-3 more than 39% adolescent girls (15-19 years) are mildly anaemic while 15% and 2% suffer from moderate and severe anaemia respectively.

(c) The Ministry of Health and Family Welfare has launched the Weekly Iron and Folic Acid (IFA) supplementation Programme.

(d) The Weekly Iron and Folic Acid Supplementation programme of the Ministry of Health and Family Welfare is estimated to cover approximately 13 Crore

beneficiaries and will meet the challenge of anaemia amongst adolescent girls and boys (10-19 years). As of now the programme has been rolled out in 18 States and remaining States and UTs are at different stages of preparedness for implementing the programme.

The programme is being implemented in both rural and urban areas and covers school going adolescent girls and boys in 6th to 12th class enrolled in Government/Government aided/municipal schools through the platform of School and out of school adolescent girls, through Anganwadi centers.

Modalities of implementation are as below:

- Administration of supervised Weekly Iron and folic Acid Supplements of 100mg elemental iron and 500ug Folic acid respectively to adolescent girls and boys in government schools and adolescent girls who are not in schools through Anganwadi centres.
- Screening of target groups for mild/moderate/severe anaemia and referring these cases to an appropriate health facility.
- Bi-annual de-worming (Albendazole 400mg), six months apart, for control of helminthes infestation.
- Information and counselling for improving dietary intake and for taking actions for prevention of intestinal worm infestation.

(e) It is estimated that more than 5 Crores adolescents are anaemic in India. Adolescents are at high risk of Iron Deficiency and anaemia due to accelerated growth and body mass building, poor dietary intake of iron and high rate of infection and worm infestation. In girls the situation of iron deficiency is further aggravated with higher demands for iron with onset of menstruation as well as the social problem of early marriage and adolescent pregnancy and conception.

(f) The programme is free of cost to the beneficiary.

Issuance of prescribed medicines

1637. SHRI DILIPBHAI PANDYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that some of the CGHS dispensaries in Delhi do not supply medicines to the patients which are prescribed as essential by the