

RAJYA SABHA

Tuesday, the 23rd April, 2013/3rd Vaisakha, 1935 (Saka)

The House met at eleven of the clock,

MR. CHAIRMAN in the Chair.

REFERENCE BY THE CHAIR

National Panchayati Raj Divas

MR. CHAIRMAN: Hon. Members, tomorrow, the 24th of April, 2013, is the National Panchayati Raj Divas. This day is observed to mark the passing of the Constitution (73rd Amendment) Act, 1992, which came into force with effect from 24th April, 1993. This Act institutionalized Panchayati Raj through the village, intermediate and district level Panchayats. The impact of the 73rd Amendment in rural India is very much visible today as it has devolved power to the people at the village level.

Let us on this occasion, extend our good wishes to the elected representatives of Panchayati Raj Institutions to further strengthen the democratic foundation of our country.

MR. CHAIRMAN: Question No. 401. ...*(Interruptions)*...

श्री नरेश अग्रवाल (उत्तर प्रदेश): माननीय सभापति जी ...*(व्यवधान)*...

श्री सभापति: बैठ जाइए। ...*(व्यवधान)*... Please sit down. ...*(Interruptions)*... Question No. 401. Let us proceed with the Question Hour. ...*(Interruptions)*... No posters, please. ...*(Interruptions)*... Don't come into the well. ...*(Interruptions)*... The House is adjourned till 12.00 hours.

The House then adjourned at two minutes past eleven of the clock.

The House re-assembled at twelve of the Clock,

MR. DEPUTY CHAIRMAN in the Chair.

WRITTEN ANSWERS TO STARRED QUESTIONS

Additional facilities for HIV treatment

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

(a) whether it is a fact that approximately more than three lakh patients in the country do not have access to HIV treatment while as per WHO report just 23 per cent patient receive antiretroviral therapy treatment;

(b) if so, the details thereof; and

(c) the action plan of Government to speed up creation of additional facilities and also spread proper awareness in the public to help them avail these facilities in order to control this menace?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) WHO, UNAIDS and UNICEF have brought out a report "Global HIV/AIDS Response, Epidemic update and health sector progress towards Universal Access 2011". The report mentions that 4,24,802 people were receiving Antiretroviral Therapy (ART), in India at the end of December, 2010, and the estimated ART coverage was between 30% to 38%. The coverage increased by 29% between 2009 and 2010.

All persons found HIV positive and registering at ART center are further evaluated for eligibility for ART based on clinical stage and/or CD4 count. Those found eligible are provided antiretroviral therapy (ART) free of cost. Currently 6,32,397 persons living with HIV (PLHIV) are receiving free ART through a network of 400 ART centers and 841 Link ART centers across the country.

(c) The facilities providing ART services have been expanded from 8 ART centers in 2004 to 400 ART centers and 841 Link ART centers at present. Based on the need, additional ART centers are sanctioned every year in the Annual Action Plan of each State. It is planned to increase such facilities to 600 ART centers and 1500 Link ART centers by 2017.

Multimedia campaigns are planned on mass media supported by outdoor media such as hoardings, bus panels, information kiosks, folk performances and exhibition vans to create awareness on HIV/AIDS and promoting services/facilities across the country. Innovative means have also been used to spread awareness such as the Red Ribbon Express train. At the interpersonal level, training and sensitization programmes for self-help Groups, Anganwadi workers, ASHAs, members of Panchayati Raj Institutions and other key stakeholders are also planned to spread awareness about treatment and other facilities. In addition, vulnerabilities and treatment needs of High Risk Groups including Commercial Sex Workers

(CSW), Men having Sex with Men (MSM), Injecting Drug Users (IDU) and also truck drivers and migrants are specifically addressed through behavior change communication programmes implemented as part of Targeted Intervention projects.

Increasing number of hypertension cases

*402. SHRI T.M. SELVAGANAPATHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that according to a WHO report, hypertension is a major contributor to avoidable deaths in India;

(b) whether it is also a fact that a very high percentage of Indians are in prehypertension stage;

(c) whether hypertension is a leading cause of hospitalization and out patient visits; and

(d) if so, whether Government is trying to accord high priority to meet this challenge?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) Hypertension is a major risk factor for a number of non-communicable diseases (NCDs) which account for a large proportion of all deaths in India.

(b) As per studies conducted in 2004, the prevalence of pre-hypertension is estimated in the range of 46% to 62% in urban areas and 41% to 54% in rural areas, with an overall prevalence rate of 43% to 58%.

(c) Hypertension can lead to diseases and complications which may necessitate visits to the hospitals including hospitalization.

(d) Yes, Sir. During the Eleventh Five Year Plan, in the year 2010, the Government has launched the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Disease and Stroke (NPCDCS).

PNG connections in Tamil Nadu

*403. SHRI A.A. JINNAH: Will the Minister of PETROLEUM AND NATURAL GAS be pleased to state: