

termination of pregnancy at a hospital established or maintained by Government or at a place approved by Government or a District Level Committee constituted by that Government.

Use of regional language in NEET

2086. SHRI RAMA CHANDRA KHUNTIA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) which are the languages allowed to be used by the students for the Medical entrance examination, NEET apart from Hindi and English;

(b) whether it is a fact that from among 100 medical seats at AIIMS—Odisha, only 15 students from Odisha have got admission whereas 63 students are selected from Kerala for the year 2013; and

(c) whether Government is considering to have 50 per cent reservation for the local students in medical entrance examination and allowing the regional language like Odisha to be used by the students for medical entrance examination (NEET)?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD) : (a) National Eligibility and Entrance Test (NEET) - 2013 for undergraduate medical courses was conducted by Central Board of Secondary Education (CBSE) in six regional languages, viz. Gujarati, Bengali, Tamil, Marathi, Telugu and Assamese in addition to Hindi and English languages. Further, in compliance with the directions of the Hon'ble Supreme Court of India, NEET-UG was also conducted in Urdu Language for admission to MBBS/BDS Courses in the Medical/Dental Colleges in the State of Maharashtra and Private Medical Colleges run with the approval of Medical Council of India (MCI)/Dental Council of India (DCI) under the Union Ministry of Health and Family Welfare Government of India.

(b) Admission to AIMS in 2013 was not done through NEET (UG). However, the entrance test was conducted by AIIMS, New Delhi for admission in undergraduate medical courses. Accordingly, 23 students from Odisha and 57 students from Kerala have got admission from among 100 medical seats at AIIMS, Bhubaneswar (Odisha).

(c) The Hon'ble Apex Court *vide* its judgement dated 18.07.2013 in NEET related cases quashed the implementation of NEET. The Central Government filed a petition before the Hon'ble Apex Court to review its decision. As such, the matter is sub-judice.

Emphasis on health in rural districts

2087. SHRI D.P. TRIPATHI : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

- (a) whether it is a fact that special emphasis is required on health in rural districts;
- (b) if so, whether there is any special scheme for rural districts; and
- (c) if so, the details thereof ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD) : (a) to (c) The health indicators like Infant Mortality Rate, Maternal Mortality Ratio, Total Fertility Rate, Malnutrition amongst children etc. of rural areas are poor in comparison to urban areas. Therefore, the National Rural Health Mission (NRHM) was launched in 2005 to support the States/UTs to provide accessible, affordable and quality health care to the rural population, especially the vulnerable 'groups. Public health being a state subject, under NRHM, financial support is provided to states to strengthen their healthcare delivery system based on the requirements projected by them in their Programme Implementation Plans. Support is provided for setting up or upgradation/renovation of public health facilities, augmentation of Human Resources, Drugs and Equipment etc. Support is also provided for various free services such as immunization, family planning services, maternal and child healthcare services including those under Janani Shishu Suraksha Karyakram, screening of children up to eighteen years for Disease, Deficiency, Defects and Developmental Delays including Disability and medical follow up including treatment up to tertiary level under Rashtriya Bal Swasthya Karyakram, Rashtriya Kishore Swasthya Karyakram for adolescent health, emergency patient transport and referral services, free diagnosis and treatment for communicable diseases like TB, Leprosy and Vector Borne diseases like Malaria, and HIV/AIDS.