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     Dr. Harsh Vardhan

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DEMANDS FOR EXCESS GRANTS, 2016-2017

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   (ii) Essential Commodities (Amendment) Bill, 2020
   (iii) Assisted Reproductive Technology (Regulation) Bill, 2020
   (iv) Bilateral Netting of Qualified Financial Contracts Bill, 2020
   (v) Farmers' Produce Trade and Commerce (Promotion and Facilitation) Bill, 2020
   (vi) Farmers (Empowerment and Protection) Agreement of Price Assurance and Farm Services Bill, 2020
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STATEMENT RE: FARMERS’ PRODUCE TRADE AND COMMERCE (PROMOTION AND FACILITATION) ORDINANCE, 2020

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(iii) Regarding establishment of a Skill Development University in Kalaburagi
     Dr. Umesh G. Jadav

(iv) Need to set up a rail coach factory in Tikamgarh district, Madhya Pradesh
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(xx) Regarding payment of dues to PSUs

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*ANNEXURE – I

Member-wise Index to Unstarred Questions

*ANNEXURE – II

Ministry-wise Index to Unstarred Questions

* Available in Master copy of the Debate, placed in Library.
ALPHABETICAL LIST OF MEMBERS OF SEVENTEENTH LOK SABHA

Abdullah, Dr. Farooq (Srinagar)

Adhikari(Dev), Shri Deepak (Ghatal)

Adhikari, Shri Dibyendu (Tamluk)

Adhikari, Shri Sisir Kumar (Kanthi)

Agrawal, Shri Rajendra (Meerut)

Ahluwalia, Shri S.S. (Bardhaman-Durgapur)

Ahmed, Shrimati Sajda (Uluberia)

Ajgalley, Shri Guharam (Janjgir-Champa)

Ajmal, Shri M. Badruddin (Dhubri)

Ali, Kunwar Danish (Amroha)

Amarappa, Shri Karadi Sanganna (Koppal)

Ambareesh, Shrimati Sumalatha (Mandya)

Anand, Shri D.M. Kathir (Vellore)

Angadi, Shri Suresh C. (Belgaum)

Annadurai, Shri C. N. (Tiruvannamalai)

Ansari, Shri Afzal (Ghazipur)

Antony, Shri Anto (Pathanamthitta)

Anuradha, Shrimati Chinta (Amalapuram)

Ariff, Adv. A. M. (Alappuzha)
Aujla, Shri Gurjeet Singh (Amritsar)
Azad, Shrimati Sangeeta (Lalganj)
Baalru, Shri T.R. (Sriperumbudur)
Bachegowda, Shri B.N. (Chikkballapur)
Badal, Shri Sukhbir Singh (Firozpur)
Badal, Shrimati Harsimrat Kaur (Bathinda)
Baghel, Prof. S.P. Singh (Agra)
Baghel, Shri Vijay (Durg)
Baheria, Shri Subhash Chandra (Bhilwara)
Baij, Shri Deepak (Bastar)
Balyan, Dr. Sanjeev (Muzaffarnagar)
Bandyopadhyay, Shri Sudip (Kolkata Uttar)
Banerjee, Shri Abhishek (Diamond Harbour)
Banerjee, Shri Kalyan (Sreerampur)
Banerjee, Shri Prasun (Howrah)
Bapat, Shri Girish Bhalchandra (Pune)
Barla, Shri John (Alipurduars)
Barne, Shri Shrirang Appa (Maval)
Barq, Dr. Shafiqur Rahman (Sambhal)
Baruah, Shri Pradan (Lakhimpur)
Basavaraj, Shri G. S. (Tumkur)
Basheer, Shri E. T. Mohammed (Ponnani)
Behanan, Shri Benny (Chalakudy)
Beniwal, Shri Hanuman (Nagaur)
Bey, Shri Horen Sing (Autonomous District)
Bhabhor, Shri Jasvantsinh Sumanbhai (Dahod)
Bhagat, Shri Sudarshan (Lohardaga)
Bhamre, Dr. Subhash Ramrao (Dhule)
Bharat, Shri Margani (Rajahmundry)
Bhargava, Shri Ramakant (Vidisha)
Bhatia, Shri Sanjay (Karnal)
Bhatt, Adv. Ajay (Nainital-Udham Singh Nagar)
Bhatt, Shrimati Ranjanben (Vadodara)
Bholanath ‘B.P. Saroj’, Shri (Machhlishahr)
'Bhole', Shri Devendra Singh (Akbarpur)
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Bidhuri, Shri Ramesh (South Delhi)
Bind, Shri Ramesh (Bhadohi)
Birla, Shri Om (Kota)
Bisen, Dr. Dhal Singh (Balaghat)
Bisoiy, Shrimati Pramila (Aska)
Bista, Shri Raju (Darjeeling)
Bohra, Shri Ramcharan (Jaipur)

Bordoloi, Shri Pradyut (Nowgong)

Borlakunta, Dr. Venkatesh Netha (Peddapalle)

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Chakraborty, Sushri Mimi (Jadavpur)

Chandel, Kunwar Pushpendra Singh (Hamirpur)

Chandra Sekhar, Shri Bellana (Vizianagaram)

Chandra, Shri Girish (Nagina)

Chatterjee, Shrimati Locket (Hooghly)

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Chaudhary, Shri Pankaj (Maharajganj)

Chaudhary, Shri Santokh Singh (Jalandhar)

Chaudhuri, Sushri Debasree (Raiganj)

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Chauhan, Shri Nandkumar Singh (Khandwa)

Chavda, Shri Vinod Lakhamshi (Kachchh)

Chazhikadan, Shri Thomas (Kottayam)

Chellakumar, Dr. A. (Krishnagiri)

Chidambaram, Shri Karti P. (Sivaganga)

Chikhlikar, Shri Prataprao Patil (Nanded)

Chinraj, Shri A.K.P. (Namakkal)
Choubey, Shri Ashwini Kumar (Buxar)
Choudhary, Shri Bhagirath (Ajmer)
Choudhary, Shri Chandra Prakash (Giridih)
Choudhary, Shri Kailash (Barmer)
Choudhary, Shri Pradeep Kumar (Kairana)
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Chowdhury, Shri Adhir Ranjan (Baharampur)
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Dadarao, Shri Danve Raosaheb (Jalna)
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Darbar, Shri Chattar Singh (Dhar)
Das, Shri Pallab Lochan (Tezpur)
Dastidar, Dr. Kakoli Ghosh (Barasat)
Deb, Shri Nitesh Ganga (Sambalpur)
Delkar, Shri Mohan S. (Dadra & Nagar Haveli)
Deol, Shri Sunny (Gurdaspur)
Devarayalu, Shri Lavu Srikrishna (Narasaraopet)
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Devi, Shrimati Rama (Sheohar)
Devi, Shrimati Veena (Vaishali)
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Dhotre, Shri Sanjay Shamrao (Akola)
Diler, Shri Rajveer (Hathras)
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Eden, Shri Hibi (Ernakulam)
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Galla, Shri Jayadev (Guntur)
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Gandhi, Shri Feroze Varun (Pilibhit)
Gandhi, Shri Rahul (Wayanad)
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Gandhi, Shrimati Sonia (Raebareli)
Ganeshamurthi, Shri A. (Erode)
Gangwar, Shri Santosh Kumar (Bareilly)
Gao, Shri Tapir (Arunachal East)
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Gavit, Dr. Heena Vijaykumar (Nandurbar)
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Gogoi, Shri Topon Kumar (Jorhat)
Goswami, Shri Dulal Chandra (Katihar)
Gowda, Shri D.V. Sadananda (Bangalore North)
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Kumar, Shri Vijay (Gaya)
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Mahato, Shri Jyotirmay Singh (Purulia)
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Mal, Shri Asit Kumar (Bolpur)
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Mallick, Dr. Rajashree (Jagatsinghpur)
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Mandal, Shrimati Manjulata (Bhadrapur)
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Mann, Shri Bhagwant (Sangrur)
Maran, Shri Dayanidhi (Chennai Central)
Masoodi, Shri Hasnain (Anantnag)
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Meena, Shri Arjunlal (Udaipur)
Meena, Shrimati Jaskaur (Dausa)
Meghwal, Shri Arjun Ram (Bikaner)
Mendhe, Shri Sunil Baburao (Bhandara-Gondiya)
Mishra, Shri Janardan (Rewa)
Misra, Shri Pinaki (Puri)
Modi, Shri Narendra (Varanasi)
Mohan, Shri P. C. (Bangalore Central)
Mohanty, Shri Anubhav (Kendrapara)
Moitra, Sushri Mahua (Krishnanagar)
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Mondal, Shrimati Pratima (Jaynagar)
Munda, Shri Arjun (Khunti)
Munde, Dr. Pritam Gopinathrao (Beed)
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Munjapara, Dr. (Prof.) Mahendra (Surendranagar)
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Murmu, Kumari Chandrani (Keonjhar)
Murmu, Shri Khagen (Maldaha Uttar)
Nagar, Shri Malook (Bijnor)
Nagar, Shri Rodmal (Rajgarh)
Naik, Shri Raja Amareshwara (Raichur)
Naik, Shri Shripad Yesso (North Goa)
Namgyal, Shri Jamyang Tsering (Ladakh)
Natarajan, Shri P.R. (Coimbatore)
Nath, Shri Balak (Alwar)
Nath, Shri Nakul K. (Chhindwara)
Navaskani, Shri K. (Ramanathapuram)
Nete, Shri Ashok Mahadeorao (Gadchiroli-Chimur)
Nimbalkar, Shri Ranjeetsinha Hindurao Naik- (Madha)
Nishad, Shri Ajay (Muzaffarpur)
Nishad, Shri Praveen Kumar (Sant Kabir Nagar)
Nishank, Dr. Ramesh Pokhriyal (Hardwar)
Oja, Shrimati Queen (Gauhati)
Oram, Shri Jual (Sundargarh)
Owaisi, Shri Asaduddin (Hyderabad)
Paarivendhar, Dr. T. R. (Perambalur)
Pachauri, Shri Satyadev (Kanpur)
Pal, Shri Jagdambika (Domariyaganj)
Pal, Shri Krishan (Faridabad)
Pala, Shri Vincent H. (Shillong)
Palanimanickam, Shri S.S. (Thanjavur)
Panda, Shri Basanta Kumar (Kalahandi)
Pandey, Dr. Mahendra Nath (Chandauli)
Pandey, Shri Ritesh (Ambedkar Nagar)
Pandey, Shri Santosh (Rajnandgaon)
Paras, Shri Pashupati Kumar (Hajipur)
Parkash, Shri Som(Hoshiarpur)
Parthiban, Shri S.R. (Salem)
Pasunoori, Shri Dayakar (Warangal)
Paswan, Shri Chhedi (Sasaram)
Paswan, Shri Chirag Kumar (Jamui )
Paswan, Shri Kamlesh (Bansgaon)
Patel (Bakabhai), Shri Mitesh (Anand)
Patel, Dr. K.C. (Valsad )
Patel, Shri Devaji (Jalore)
Patel, Shri Gajendra Umrao Singh (Khargone)
Patel, Shri Hasmukhbhai S.(Ahmedabad East)
Patel, Shri Lalubhai B. (Daman & Diu)
Patel, Shri Parbatbhai Savabhai (Banaskantha)
Patel, Shri Prahalad Singh (Damoh)
Patel, Shri R.K. Singh (Banda)
Patel, Shrimati Anupriya (Mirzapur)
Patel, Shrimati Keshari Devi (Phulpur)
Patel, Shrimati Sharda Anil (Mahesana)
Pathak, Shri Subrat (Kannauj)
Pathak, Shrimati Riti (Sidhi)
Patil, Shri B.B. (Zahirabad)
Patil, Shri C. R. (Navsari)
Patil, Shri Hemant (Hingoli)
Patil, Shri Kapil Moreshwar (Bhiwandi)
Patil, Shri Sanjay Kaka (Sangli)
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Patil, Shri Unmesh Bhaiyyasaheb (Jalgaon)
Pawar, Dr. Bharati Pravin (Dindori)
Pfoze, Dr. Lorho (Outer Manipur)
Pintu, Shri Sunil Kumar (Samarhi)
Poddar, Shrimati Aparupa (Arambagh)
Pon, Shri Gautham Sigamani (Kallakurichi)
Pothuganti, Shri Ramulu (Nagarkurnool)
Prakash, Adv. Adoor (Attingal)
Prakash, Shri Jai (Hardoi)
Pramanik, Shri Nisith (Coochbehar)
Prasad, Shri Chandeshwar (Jahanabad)
Prasad, Shri Ravi Shankar (Patna Sahib)
Prasad, Shri V. Srinivas (Chamarajanagar)
Prathapan, Shri T. N. (Thrissur)
Premachandran, Shri N.K. (Kollam)
Pujari, Shri Suresh (Bargarh)
Raghavan, Shri M.K. (Kozhikode)
Raghavendra, Shri B.Y. (Shimoga)
Rahaman, Shri Khalilur (Jangipur)
Rai, Shri Nityanand (Ujiarpur)
Raj, Shri Prince (Samastipur)
Raja, Shri A. (Nilgiris)
Rajenimbalkar, Shri Om Pavan (Osmanabad)
Rajoria, Dr. Manoj (Karauli–Dholpur)
Rajput, Shri Mukesh (Farrukhabad)
Raju, Shri Raghu Rama Krishna (Narsapuram)
Ram, Shri Vishnu Dayal (Palamu)
Ramalingam, Shri S. (Mayiladuthurai)
Ramesh, Shri T. R. V. S. (Cuddalore)
Rana, Shrimati Navneet Ravi (Amravati)
Rangaiah, Shri Talari (Anantapur)
Ranjan, Dr. R. K. (Inner Manipur)
Rao, Shri Nama Nageswara (Khammam)
Rao, Shri Balli Durga Prasad (Tirupati)
Rao, Shri Soyam Bapu (Adilabad)
Rathod, Shri Dipsinh Shankarsinh (Sabarkantha)
Rathod, Shri Ratansinh Magansinh (Panchmahal)
Rathore, Col. (Retd) Rajyavardhan (Jaipur Rural)
Rathva, Shrimati Gitaben V.(Chhota Udaipur)
Raut, Shri Vinayak Bhaurao (Ratnagiri–Sindhudurg)
Ravikumar, Dr. D. (Viluppuram)
Rawat, Shri Ashok Kumar (Misrikh)
Rawat, Shri Tirath Singh (Garhwal)
Rawat, Shri Upendra Singh (Barabanki)
Ray, Prof. Sougata (Dum Dum)
Ray, Shrimati Sandhya (Bhind)
Reddeppa, Shri N. (Chittoor)
Reddy, Shri Manne Srinivas (Mahbubnagar)
Reddy, Dr. G. Ranjith (Chevella)
Reddy, Shri Adala Prabhakara (Nellore)
Reddy, Shri Anumula Revanth (Malkajgiri)
Reddy, Shri G. Kishan (Secunderabad)
Reddy, Shri Komati Reddy Venkat (Bhongir)
Reddy, Shri Kotha Prabhakar (Medak)
Reddy, Shri Magunta Sreenivasulu (Ongole)
Reddy, Shri P.V. Midhun (Rajampet)
Reddy, Shri Pocha Brahmananda (Nandyal)
Reddy, Shri Uttam Kumar (Nalgonda)
Reddy, Shri Y. S. Avinash (Kadapa)
Rehman, Shri Haji Fazlur (Saharanpur)
Revanna, Shri Prajwal (Hassan)
Rijiju, Shri Kiren (Arunachal West)
Roy (Banerjee), Shrimati Satabdi (Birbhum)
Roy, Dr. Jayanta Kumar (Jalpaiguri)
Roy, Dr. Rajdeep (Silchar)
Roy, Shrimati Mala (Kolkata Dakshin)
Rudy, Shri Rajiv Pratap (Saran)
Sadique, Shri Mohammad (Faridkot)
Sagar, Shri Arun Kumar (Shahjahanpur)
Sahoo, Shri Mahesh (Dhenkanal)
Sahu, Shri Chandra Sekhar (Berhampur)
Sahu, Shri Chunnilal (Mahasamund)
Sai, Shrimati Gomati (Raigarh)
Saikia, Shri Dilip (Mangaldoi)
Saini, Shri Nayab Singh (Kurukshetra)
Samanta, Prof. Achyutananda (Kandhamal)
Sangma, Kumari Agatha K. (Tura)
Sao, Shri Arun (Bilaspur)
Sarangi, Shri Pratap Chandra (Balasore)
Sarangi, Shrimati Aparajita (Bhubaneswar)
Sarania, Shri Naba Kumar (Kokrajhar)
Saraswati, Shri Sumedhanand (Sikar)
Sardinha, Shri Francisco (South Goa)
Sarkar, Dr. Subhas (Bankura)
Sarkar, Shri Jagannath (Ranaghat)
Saruta, Shrimati Renuka Singh (Surguja)
Satyanarayana, Shri M. V. V. (Visakhapatnam)
Satyavathi, Dr. Beesetti Venkata (Anakapalle)
Sawant, Shri Arvind (Mumbai South)
Selvam, Shri G. (Kancheepuram)
Selvaraj, Shri M. (Nagapattinam)
Senthilkumar S., Shri DNV (Dharmapuri)
Seth, Shri Sanjay (Ranchi)
Sethi, Shrimati Sarmistha (Jajpur)
Shah, Shri Amit (Gandhinagar)
Shah, Shrimati Mala Rajya Laxmi (Tehri Garhwal)
Shanmuga Sundaram, Shri K. (Pollachi)
Sharma, Dr. Arvind Kumar (Rohtak)
Sharma, Dr. Mahesh (Gautam Buddha Nagar)
Sharma, Shri Anurag (Jhansi)
Sharma, Shri Jugal Kishore (Jammu)
Sharma, Shri Kuldeep Rai (Andaman & Nicobar Islands)
Sharma, Shri Ram Swaroop (Mandi)
Sharma, Shri Vishnu Datt (Khajuraho)
Shejwalkar, Shri Vivek Narayan (Gwalior)
Shekhawat, Shri Gajendra Singh (Jodhpur)
Shetty, Shri Gopal (Mumbai North)
Shewale, Shri Rahul Ramesh (Mumbai South-Central)
Shinde, Dr. Shrikant Eknath (Kalyan)
Shrangare, Shri Sudhakar Tukaram (Latur)
Shyal, Dr. Bharatiben D. (Bhavnagar)
Siddeshwar , Shri G.M. (Davanagere)
Sigriwal, Shri Janardan Singh (Maharajganj)
Simha, Shri Prathap (Mysore)
Singari, Dr. Sanjeev Kumar (Kurnool)
Singh 'Lalan', Shri Rajiv Ranjan (Munghyr)
Singh (Raju Bhaiya), Shri Rajveer (Etah)
Singh Deo, Shrimati Sangeeta Kumari (Bolangir)

Singh, Gen. (Retd.) Dr V. K. (Ghaziabad)

Singh, Dr. Amar (Fatehgarh Sahib)

Singh, Dr. Jitendra (Udhampur)

Singh, Dr. Satya Pal (Baghpat)

Singh, Rao Inderjit (Gurgaon)

Singh, Shri Arjun (Barrackpur)

Singh, Shri Atul Kumar *alias* Atul Rai (Ghosi)

Singh, Shri Bhola (Bulandshahr)

Singh, Shri Brijbhushan Sharan (Kaiserganj)

Singh, Shri Brijendra (Hisar)

Singh, Shri Chandan (Nawada)

Singh, Shri Dharambir (Bhiwani-Mahendragarh)

Singh, Shri Dushyant (Jhalawar-Baran)

Singh, Shri Ganesh (Satna)

Singh, Shri Giriraj (Begusarai)

Singh, Shri Kirti Vardhan (Gonda)

Singh, Shri Lallu (Faizabad)

Singh, Shri Mahabali (Karakat)

Singh, Shri Pashupati Nath (Dhanbad)

Singh, Shri Pradeep Kumar (Araria)
Singh, Shri R. K. (Arrah)

Singh, Shri Radha Mohan (Purvi Champaran)

Singh, Shri Raj Nath (Lucknow)

Singh, Shri Rajbahadur (Sagar)

Singh, Shri Rakesh (Jabalpur)

Singh, Shri Ravneet (Ludhiana)

Singh, Shri Sunil Kumar (Chatra)

Singh, Shri Sushil Kumar (Aurangabad)

Singh, Shri Uday Pratap (Hoshangabad)

Singh, Shri Virendra (Ballia)

Singh, Shrimati Himadri (Shahdol)

Singh, Shrimati Kavita (Siwan)

Sinha, Shri Jayant (Hazaribagh)

Solanki, Dr. (Prof.) Kirit Premjibhai (Ahmedabad West)

Solanky, Shri Mahendra Singh (Dewas)

Soni, Shri Sunil Kumar (Raipur)

Sonkar, Shri Vinod Kumar (Kaushambi)

Soren, Shri Sunil (Dumka)

Sreekandan, Shri V. K. (Palakkad)

Srinivas, Shri Kesineni (Vijayawada)

Subba, Shri Indra Hang (Sikkim)
Subbarayan, Shri K. (Tiruppur)

Sudhakaran, Shri K. (Kannur)

Sule, Shrimati Supriya Sadanand (Baramati)

Suman, Dr. Alok Kumar (Gopalganj)

Supriyo, Shri Babul (Asansol)

Suresh, Shri D.K. (Bangalore Rural)

Suresh, Shri Kodikunnil (Mavelikkara)

Suresh, Shri Nandigam (Bapatla)

Surya, Shri Tejasvi (Bangalore South)

Swamiji, Dr. Jai Sidheshwar Shivacharya (Solapur)

Swamy, Shri A. Narayana (Chitradurga)

Tadas, Shri Ramdas (Wardha)

Tamta, Shri Ajay (Almora)

Tatkare, Shri Sunil Dattatray (Raigad)

Teli, Shri Rameshwar (Dibrugarh)

Teni, Shri Ajay Misra (Kheri)

Tewari, Shri Manish (Anandpur Sahib)

Thakur, Shri Gopal Jee (Darbhanga)

Thakur, Sadhvi Pragya Singh (Bhopal)

Thakur, Shri Anurag Singh (Hamirpur)

Thakur, Shri Shantanu (Bangaon)
Thangapandian, Dr. T. Sumathy (A) Thamizhachi (Chennai South)

Tharoor, Dr. Shashi (Thiruvananthapuram)

Thirumuaavalavan, Dr. Thol (Chidambaram)

Thirunavukkarasar, Shri Su. (Tiruchirappalli)

Tiwari, Shri Manoj (North East Delhi)

Tomar, Shri Narendra Singh (Morena)

Tripathi, Dr. Ramapati Ram (Deoria)

Tripura, Shri Rebati (Tripura East)

Tudu, Er. Bishweswar (Mayurbhanj)

Tumane, Shri Krupal Balaji (Ramtek)

Udasi, Shri S. C. (Haveri)

Uikey, Shri Durga Das (Betul)

Ulaka, Shri Saptagiri Sankar (Koraput)

Unnithan, Shri Rajmohan (Kasaragod)

Vaithilingam, Shri Ve. (Puducherry)

Vallabhaneni, Shri Balashowry (Machilipatnam)

Vardhan, Dr. Harsh (Chandni Chowk)

Vasava, Shri Mansukhbhai Dhanjibhai (Bharuch)

Vasava, Shri Parbhubhai Nagarbhai (Bardoli)

Veerawamy, Dr. Kalanidhi (Chennai North)

Velusamy, Shri P. (Dindigul)
Venkatesan, Shri S. (Madurai)
Verma, Shri Bhanu Pratap Singh (Jalaun)
Verma, Shri Parvesh Sahib Singh (West Delhi)
Verma, Shri Rajesh (Sitapur)
Verma, Shri Ramshiromani (Shrawasti)
Verma, Shrimati Rekha Arun (Dhaurahra)
Vichare, Shri Rajan Baburao (Thane)
Vikhe Patil, Dr. Sujay (Ahmednagar)
Vishnu Prasad, Dr. M. K. (Arani)
Yadav, Shri Akhilesh (Azamgarh)
Yadav, Shri Ashok Kumar (Madhubani)
Yadav, Shri Dinesh Chandra (Madhepura)
Yadav, Shri Giridhari (Banka)
Yadav, Shri Krishnapalsingh (Guna)
Yadav, Shri Mulayam Singh (Mainpuri)
Yadav, Shri Ram Kripal (Patliputra)
Yadav, Shri Shyam Singh (Jaunpur)
Yepthomi, Shri Tokheho (Nagaland)
OFFICERS OF LOK SABHA

THE SPEAKER

Shri Om Birla

PANEL OF CHAIRPERSONS

Shrimati Rama Devi
Dr. (Prof.) Kirit Premjibhai Solanki
Shri Rajendra Agrawal
Shrimati Meenakashi Lekhi
Shri Kodikunnil Suresh
Shri A. Raja
Shri P.V. Midhun Reddy
Shri Bhartruhari Mahtab
Shri N.K. Premachandran
Dr. Kakoli Ghosh Dastidar

SECRETARY GENERAL

Shrimati Snehlata Shrivastava
COUNCIL OF MINISTERS

CABINET MINISTERS

Shri Narendra Modi  The Prime Minister and also in-charge of:
(i) Ministry of Personnel, Public Grievances and Pensions;
(ii) Department of Atomic Energy;
(iii) Department of Space; and
All important Policy issues and all other portfolios not allocated to any Minister.

Shri Raj Nath Singh  The Minister of Defence

Shri Amit Shah  The Minister of Home Affairs

Shri Nitin Jairam Gadkari  The Minister of Road Transport and Highways and Minister of Micro, Small and Medium Enterprises

Shri D.V. Sadananda Gowda  The Minister of Chemicals and Fertilizers

Shrimati Nirmala Sitharaman  The Minister of Finance and Minister of Corporate Affairs

Shri Ramvilas Paswan  The Minister of Consumer Affairs, Food and Public Distribution
<table>
<thead>
<tr>
<th>Minister Name</th>
<th>Ministry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shri Narendra Singh Tomar</td>
<td>The Minister of Agriculture and Farmers Welfare; Minister of Rural Development and Minister of Panchayati Raj</td>
</tr>
<tr>
<td>Shri Ravi Shankar Prasad</td>
<td>The Minister of Law and Justice; Minister of Communications and Minister of Electronics and Information Technology</td>
</tr>
<tr>
<td>Shrimati Harsimrat Kaur Badal</td>
<td>The Minister of Food Processing Industries</td>
</tr>
<tr>
<td>Shri Thaawar Chand Gehlot</td>
<td>The Minister of Social Justice and Empowerment</td>
</tr>
<tr>
<td>Dr. Subrahmanyam Jaishankar</td>
<td>The Minister of External Affairs</td>
</tr>
<tr>
<td>Dr. Ramesh Pokhriyal Nishank</td>
<td>The Minister of Education</td>
</tr>
<tr>
<td>Shri Arjun Munda</td>
<td>The Minister of Tribal Affairs</td>
</tr>
<tr>
<td>Shrimati Smriti Zubin Irani</td>
<td>The Minister of Women and Child Development and Minister of Textiles</td>
</tr>
<tr>
<td>Dr. Harsh Vardhan</td>
<td>The Minister of Health and Family Welfare; Minister of Science and Technology, and Minister of Earth Sciences</td>
</tr>
<tr>
<td>Shri Prakash Javadekar</td>
<td>The Minister of Environment, Forest and Climate Change; Minister of Information and Broadcasting and Minister of Heavy Industries and Public Enterprises</td>
</tr>
<tr>
<td>Name</td>
<td>Ministry</td>
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</tr>
<tr>
<td>Shri Piyush Goyal</td>
<td>The Minister of Railways and Minister of Commerce and Industry</td>
</tr>
<tr>
<td>Shri Dharmendra Pradhan</td>
<td>The Minister of Petroleum and Natural Gas and Minister of Steel</td>
</tr>
<tr>
<td>Shri Mukhtar Abbas Naqvi</td>
<td>The Minister of Minority Affairs</td>
</tr>
<tr>
<td>Shri Pralhad Joshi</td>
<td>The Minister of Parliamentary Affairs; Minister of Coal and Minister of Mines</td>
</tr>
<tr>
<td>Dr. Mahendra Nath Pandey</td>
<td>The Minister of Skill Development and Entrepreneurship</td>
</tr>
<tr>
<td>Shri Giriraj Singh</td>
<td>The Minister of Fisheries, Animal Husbandry and Dairying</td>
</tr>
<tr>
<td>Shri Gajendra Singh Shekhawat</td>
<td>The Minister of Jal Shakti</td>
</tr>
</tbody>
</table>
## MINISTERS OF STATE (INDEPENDENT CHARGE)

<table>
<thead>
<tr>
<th>Name</th>
<th>Ministry and Additional Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shri Santosh Kumar Gangwar</td>
<td>The Minister of State of the Ministry of Labour and Employment</td>
</tr>
<tr>
<td>Rao Inderjit Singh</td>
<td>The Minister of State of the Ministry of Statistics and Programme Implementation and Minister of State of the Ministry of Planning</td>
</tr>
<tr>
<td>Shri Shripad Yesso Naik</td>
<td>The Minister of State of the Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) and Minister of State in the Ministry of Defence</td>
</tr>
<tr>
<td>Dr. Jitendra Singh</td>
<td>The Minister of State of the Ministry of Development of North Eastern Region; Minister of State in the Prime Minister's Office; Minister of State in the Ministry of Personnel, Public Grievances and Pensions; Minister of State in the Department of Atomic Energy and Minister of State in the Department of Space</td>
</tr>
<tr>
<td>Shri Kiren Rijiju</td>
<td>The Minister of State of the Ministry of Youth Affairs and Sports and Minister of State in the Ministry of Minority Affairs</td>
</tr>
<tr>
<td>Name</td>
<td>Role</td>
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</tr>
<tr>
<td>Shri Prahlad Singh Patel</td>
<td>The Minister of State of the Ministry of Culture and Minister of State of the Ministry of Tourism</td>
</tr>
<tr>
<td>Shri R. K. Singh</td>
<td>The Minister of State of the Ministry of Power; Minister of State of the Ministry of New and Renewable Energy and Minister of State in the Ministry of Skill Development and Entrepreneurship</td>
</tr>
<tr>
<td>Shri Hardeep Singh Puri</td>
<td>The Minister of State of the Ministry of Housing and Urban Affairs; Minister of State of the Ministry of Civil Aviation and Minister of State in the Ministry of Commerce and Industry</td>
</tr>
<tr>
<td>Shri Mansukh L. Mandaviya</td>
<td>The Minister of State of the Ministry of Shipping and Minister of State in the Ministry of Chemicals and Fertilizers</td>
</tr>
<tr>
<td>Name</td>
<td>Ministry</td>
</tr>
<tr>
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</tr>
<tr>
<td>Shri Faggan Singh Kulaste</td>
<td>The Minister of State in the Ministry of Steel</td>
</tr>
<tr>
<td>Shri Ashwini Kumar Choubey</td>
<td>The Minister of State in the Ministry of Health and Family Welfare</td>
</tr>
<tr>
<td>Shri Arjun Ram Meghwal</td>
<td>The Minister of State in the Ministry of Parliamentary Affairs and</td>
</tr>
<tr>
<td></td>
<td>Minister of State in the Ministry of Heavy Industries and Public</td>
</tr>
<tr>
<td></td>
<td>Enterprises</td>
</tr>
<tr>
<td>Gen. (Retd.) Dr. V.K. Singh</td>
<td>The Minister of State in the Ministry of Road Transport and Highways</td>
</tr>
<tr>
<td>Shri Krishan Pal</td>
<td>The Minister of State in the Ministry of Social Justice and Empowerment</td>
</tr>
<tr>
<td>Shri Danve Raosaheb Dadarao</td>
<td>The Minister of State in the Ministry of Consumer Affairs, Food and</td>
</tr>
<tr>
<td></td>
<td>Public Distribution</td>
</tr>
<tr>
<td>Shri G. Kishan Reddy</td>
<td>The Minister of State in the Ministry of Home Affairs</td>
</tr>
<tr>
<td>Shri Parshottam Rupala</td>
<td>The Minister of State in the Ministry of Agriculture and Farmers Welfare</td>
</tr>
<tr>
<td>Shri Ramdas Athawale</td>
<td>The Minister of State in the Ministry of Social Justice and Empowerment</td>
</tr>
</tbody>
</table>
Sadhvi Niranjan Jyoti  The Minister of State in the Ministry of Rural Development

Shri Babul Supriyo  The Minister of State in the Ministry of Environment, Forest and Climate Change

Dr. Sanjeev Kumar Balyan  The Minister of State in the Ministry of Fisheries, Animal Husbandry and Dairying

Shri Sanjay Shamrao Dhotre  The Minister of State in the Ministry of Education; Minister of State in the Ministry of Communications and Minister of State in the Ministry of Electronics and Information Technology

Shri Anurag Singh Thakur  The Minister of State in the Ministry of Finance and Minister of State in the Ministry of Corporate Affairs

Shri Suresh C. Angadi  The Minister of State in the Ministry of Railways

Shri Nityanand Rai  The Minister of State in the Ministry of Home Affairs

Shri Rattan Lal Kataria  The Minister of State in the Ministry of Jal Shakti and Minister of State in the Ministry of Social Justice and Empowerment
Shri V. Muraleedharan  The Minister of State in the Ministry of External Affairs and Minister of State in the Ministry of Parliamentary Affairs

Shrimati Renuka Singh Saruta  The Minister of State in the Ministry of Tribal Affairs

Shri Som Parkash  The Minister of State in the Ministry of Commerce and Industry

Shri Rameshwar Teli  The Minister of State in the Ministry of Food Processing Industries

Shri Pratap Chandra Sarangi  The Minister of State in the Ministry of Micro, Small and Medium Enterprises and Minister of State in the Ministry of Fisheries, Animal Husbandry and Dairying

Shri Kailash Choudhary  The Minister of State in the Ministry of Agriculture and Farmers Welfare

Sushri Debasree Chaudhuri  The Minister of State in the Ministry of Women and Child Development
Monday, September 14, 2020/ Bhadrapada 23, 1942(Saka)

The Lok Sabha met at Nine of the Clock.

[HON. SPEAKER in the Chair]
NATIONAL ANTHEM

(The National Anthem was played)

09.02 hrs

OBITUARY REFERENCES

माननीय अध्यक्ष: माननीय सदस्यगण, मुझे सभा को भारत के पूर्व राष्ट्रपति और भारत रत्न, श्री प्रणब मुखर्जी के दुःखद निधन के बारे में सूचित करना है।

"भारत रत्न" श्री प्रणब मुखर्जी, जिन्हें हम आदर से ‘प्रणब दा’ के नाम से संबोधित करते थे, देश में वर्तमान युग के महानतम राजनेताओं में से एक थे। मात्र 34 वर्ष की अवस्था में उच्च सदन के सदस्य बने पूर्व राष्ट्रपति भारत रत्न प्रणब मुखर्जी सच्चे अर्थों में लोकतंत्र की मूल भावना के उपासक थे।

वे एक प्रभावी वक्ता, कुशल प्रशासक और सफल राजनेता थे। संसदीय परम्पराओं और इतिहास के सम्बन्ध में उनका ज्ञान और अनुभव अविश्वसनीय था। विभिन्न पदों पर रहते हुए राष्ट्र सेवाका उनका पाँच दशकों से भी अधिक का अनुभव रहा।

वे एक लोकप्रिय नेता थे जो अपनी बुद्धिमत्ता, विद्वता और राजनेतिक कौशल के साथ-साथ एक उत्कृष्ट वक्ता के रूप में भी जाने जाते थे। प्रत्येक राजनीतिक दल में उनका सम्मान और आदर था।

सदन में होने वाली बहसों को वे बहुत महत्व देते थे। संसद के केंद्रीय कक्ष में अपने विदाई भाषण के दौरान उन्होंने सभी पार्टियों के विशिष्ट वक्ताओं का नाम लेकर कहा था कि उनके भाषणों ने उनके व्यक्तित्व को गढ़ने का काम किया।
उनका विचार था कि “भारत का संविधान मात्र एक कानूनी दर्तावज्ज नहीं है, बल्कि देश के सामाजिक, आर्थिक परिवर्तन के लिए मैनेजमेंट के समान है।”

अपने लम्बे राजनीतिक जीवनकाल में स्व. प्रणब मुखर्जी जी ने देश के राजनीतिक घटनाक्रम का अवलोकन ही नहीं किया, बल्कि उसमें सक्रिय भूमिका भी निभाई।

कालांतर में अपने दीर्घ अनुभवों और विशाल ज्ञान को उन्होंने पुस्तकों के माध्यम से हमारे साथ साझा किया। वे पुस्तकें भरलमान भारत के राजनीतिक और आर्थिक इतिहास के दर्तावज्ज हैं।

लोकतंत्र, संविधान और राजनीति को लेकर साझा किए गए उनके विचार आने वाले समय में हमारा मार्गदर्शन करेंगे।

श्री प्रणब मुखर्जी का निधन नई दिल्ली में 31 अगस्त, 2020 को 84 वर्ष की आयु में हुआ।

माननीय सदयगण, मुझे सभा को अपने साथी श्री एच. वसंतकुमार, विख्यात गायक पंडित जसराज तथा 13 पूर्व सदस्यों की दुखद मृत्यु के बारे में भी सूचित करना है।

श्री एच. वसंतकुमार तमिलनाडु के कन्याकुमारी संसदीय निर्वाचन क्षेत्र से वर्तमान सदस्य थे।

श्री एच. वसंतकुमार रसायन और उर्वर संबंधी संसदीय स्थायी समिति के सदस्य थे।

इससे पूर्व, वह दो कार्यकाल के लिए तमिलनाडू विधान सभा के सदस्य भी रहे।

श्री एच. वसंतकुमार का निधन तमिलनाडू के चेन्नई में 28 अगस्त, 2020 को 70 वर्ष की आयु में हुआ।

पंडित जसराज जी एक सुप्रसिद्ध शास्त्रीय गायक और भारत के लम्बे प्रतिष्ठित सांस्कृतिक दूतों में से एक थे। पंडित जसराज ने हिन्दुस्तानी शास्त्रीय संगीत के अपने स्वर के माध्यम से पूरे विश्व में पहुँचाये के लिए अपना जीवन समर्पित कर दिया।

पंडित जसराज को हिन्दुस्तानी शास्त्रीय संगीत में उनके योगदान के लिए, वर्ष 1975 में पद्म श्री, वर्ष 1990 में पद्म भूषण तथा वर्ष 2000 में पद्म विभूषण पुरस्कार दिया गया और साथ ही भारत सरकार ने उन्हें संगीत नाटक अकादमी पुरस्कार से भी विभूषित किया।
पंडित जसराज का निधन 90 वर्ष की आयु में संयुक्त राज्य अमेरिका के न्यू जर्सी में 17 अगस्त, 2020 को हुआ।

श्री गुरदास सिंह बादल पंजाब के फजिल्का संसदीय निर्वाचन क्षेत्र से 5वीं लोक सभा के सदस्य थे।

श्री गुरदास सिंह बादल वर्ष 1967 से 1969 तक पंजाब विधान परिषद के सदस्य थे।

श्री गुरदास सिंह बादल का निधन पंजाब के मोहाली में 15 मई, 2020 को 88 वर्ष की आयु में हुआ।

डॉ. नेपाल सिंह सोलहवीं लोक सभा के सदस्य थे, जो उत्तर प्रदेश के रामपुर संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे। वे नियम समिति, मानव संसाधन विकास संबंधी समिति और अन्य पिछड़े वर्ग के कल्याण संबंधी समिति के सदस्य रहे।

इससे पूर्व, डॉ. नेपाल सिंह उत्तर प्रदेश विधान परिषद में पांच कार्यकाल के लिए सदस्य थे और उन्होंने उत्तर प्रदेश सरकार में माध्यमिक शिक्षा और भाषा मंत्री के रूप में कार्य किया। वे उत्तर प्रदेश विधान परिषद में विपक्ष के नेता थे।

डॉ. नेपाल सिंह का निधन उत्तर प्रदेश के मुरादाबाद में 22 मई, 2020 को 79 वर्ष की आयु में हुआ।

श्री अजीत जोगी 12वीं लोक सभा के सदस्य थे जिन्होंने मध्य प्रदेश के रायगढ़ संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व किया तथा 14वीं लोक सभा में छत्तीसगढ़ के महासंघ संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व किया।

श्री अजीत जोगी दो कार्यकाल के लिए राज्य सभा के सदस्य रहे तथा राज्य सभा की उप-सभापति तालिका के सदस्य थे।

श्री जोगी विज्ञान और प्रौद्योगिकी संबंधी समिति तथा पर्यावरण और वन संबंधी समिति के सभापति थे तथा कई संसदीय समितियों के सदस्य भी रहे।
श्री अजीत जोगी छीसगढ़ विधान सभा के वर्तमान सदस्य थे तथा वे वर्ष 2000 से 2003 तक नवनिर्मित राज्य छीसगढ़ के पहले मुख्यमंत्री थे। वह चार कार्यकाल के लिए छीसगढ़ विधानसभा के सदस्य भी रहे।

श्री अजीत जोगी का निधन छीसगढ़ के रायपुर में 29 मई, 2020 को 74 वर्ष की आयु में हुआ।

श्री पी. नामयाल सातवी, आठवी और सातवी लोक सभा के सदस्य थे जिन्होंने लद्दाख संघ राज्य क्षेत्र के लद्दाख संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व किया।

वह आठवी लोक सभा के दौरान भूतल परिवहन और संसदीय कार्य मंत्रालय में उप-मंत्री तथा रचनात्मक और पेट्रो-रचनात्मक मंत्रालय तथा संसदीय कार्य मंत्रालय में राज्य मंत्री थे। वह प्राक्रिक समिति तथा सरकारी आश्वासनों संबंधी समिति के सदस्य थे।

इससे पहले, वह तीन कार्यकाल के लिए पूर्व जमू और कश्मीर विधान परिषद के सदस्य थे तथा उन्होंने वर्ष 2007 में परिषद के कार्यवाहक सभापति के रूप में भी कार्य किया।

श्री पी. नामयाल का निधन लद्दाख संघ राज्य क्षेत्र के लेह में 1 जून, 2020 को 82 वर्ष की आयु में हुआ।

श्री पारसनाथ यादव 12वीं और 14वीं लोक सभा के सदस्य थे जो उत्तर प्रदेश के जौनपुर संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे।

वह सरकारी उपक्रमों संबंधी समिति तथा श्रम संबंधी समिति के भी सदस्य थे। श्री यादव उत्तर प्रदेश विधान सभा के वर्तमान सदस्य थे तथा वह इससे पूर्व पंच कार्यकाल के लिए उत्तर प्रदेश विधान सभा के सदस्य रहे। वह उत्तर प्रदेश सरकार में लोक उद्यम तथा अतिरिक्त ऊर्जा सेवा मंत्री और शिक्षा मंत्री थे।

श्री पारसनाथ यादव का निधन उत्तर प्रदेश के जौनपुर में 12 जून, 2020 को 71 वर्ष की आयु में हुआ।
श्री माधवराव पािटल 12वीं लोक सभा के सदस्य थे जो महाराष्ट्र के नासिक संसदीय
निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे। श्री माधवराव पािटल वाणिज्य संबंधी समिति के सदस्य
थे।

श्री माधवराव पािटल का निधन महाराष्ट्र के नासिक में 14 जून, 2020 को 80 वर्ष की
आयु में हुआ।

श्री हरभाऊ माधव जावले, 14वीं और 15वीं लोक सभा के सदस्य थे जो महाराष्ट्र के
जलगांव संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे। वह सामाजिक न्याय और अधिकारिता
संबंधी समिति, जल संसाधन संबंधी समिति और रेल संबंधी समिति के सदस्य थे। इससे पूर्व श्री
जावले वर्ष 1999 से 2004 तक महाराष्ट्र विधान सभा के सदस्य रहे।

श्री हरभाऊ माधव जावले का निधन महाराष्ट्र के मुंबई में 16 जून, 2020 को 66 वर्ष की
आयु में हुआ।

श्रीमती सरोज दूबे उत्तर प्रदेश के इलाहाबाद संसदीय निर्वाचन क्षेत्र से वर्ष 1991 से
1996 तक दसवीं लोक सभा की सदस्य थी। वह वर्ष 1998 से 2004 तक राज्य सभा की सदस्य
भी रहीं। श्रीमती दूबे सरकारी आश्रयाला संबंधी समिति, विज्ञान और प्रोत्साहनी संबंधी समिति,
पर्यावरण और वन संबंधी समिति और सरकारी उपक्रमों संबंधी समिति की सदस्य भी थीं।

श्रीमती सरोज दूबे का निधन नई दिल्ली में 21 जून, 2020 को 81 वर्ष की आयु में हुआ।

श्री लालजी टंडन मध्य प्रदेश के राज्यपाल के पद पर आसीन थे तथा प्रदेश के लोक सभा
के सदस्य भी थे। वह प्राकृतिक समिति तथा रेल संबंधी संसदीय स्थायी समिति के सदस्य थे।
इससे पूर्व, श्री लालजी टंडन वर्ष 2018 में बिहार के राज्यपाल रहे।

श्री टंडन दो कार्यकाल के लिए उत्तर प्रदेश विधान परिषद के सदस्य थे तथा तीन
कार्यकाल के लिए उत्तर प्रदेश विधान सभा के सदस्य थे। श्री लालजी टंडन वर्ष 1997 से 2003
tक उत्तर प्रदेश सरकार के विभिन्न विभागों के राज्य मंत्री थे। वह उत्तर प्रदेश विधान परिषद में
सभा के नेता था। उत्तर प्रदेश विधान सभा में प्रथम के नेता थे।
श्री लालजी टंडन का निधन उत्तर प्रदेश के लखनऊ में 21 जुलाई, 2020 को 85 वर्ष की आयु में हुआ।

श्रीमती कमल रानी 11वीं और 12वीं लोक सभा की सदस्य थीं जो उत्तर प्रदेश के घाटमपुर संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करती थीं और वह उत्तर प्रदेश सरकार में तकनीकी शिक्षा मंत्री रहीं। श्रीमती कमल रानी श्रम और कल्याण, उद्योग, महिला सशक्तीकरण और राजभाषा संबंधी संसदीय स्थायी समितियों की सदस्य रहीं।

श्रीमती कमल रानी का निधन उत्तर प्रदेश में 2 अगस्त, 2020 को 62 वर्ष की आयु में हुआ।

श्री चेतन चौहान 10वीं और 12वीं लोक सभा के सदस्य थे जो उत्तर प्रदेश के अमृतपुर संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे। श्री चौहान वित्त संबंधी समिति के सदस्य रहे। श्री चेतन चौहान उत्तर प्रदेश विधान सभा के बर्तमान सदस्य थे और उत्तर प्रदेश सरकार में युवा और खेल मंत्री थे।

एक प्रसिद्ध क्रिकेट खिलाड़ी एवं अर्जुन पुरस्कार विजेता, श्री चेतन चौहान का निधन उत्तर प्रदेश के लखनऊ में 16 अगस्त, 2020 को 73 वर्ष की आयु में हुआ।

श्री सुरेंद्र प्रकाश गोयल 14वीं लोक सभा के सदस्य थे जो उत्तर प्रदेश के हापुड़ संसदीय निर्वाचन क्षेत्र का प्रतिनिधित्व करते थे। श्री सुरेंद्र प्रकाश गोयल शहरी विकास एवं एमपीलैड्स संबंधी समितियों के सदस्य थे। वह उत्तर प्रदेश विधान सभा के सदस्य भी रहे।

श्री सुरेंद्र प्रकाश गोयल का निधन नई दिल्ली में 14 अगस्त, 2020 को 74 वर्ष की आयु में हुआ।

डॉ. रघुवंश प्रसाद सिंह बिहार के वैशाली संसदीय निर्वाचन क्षेत्र से म्यारहवीं से पन्नहवीं लोक सभा के सदस्य थे। उन्होंने भारत सरकार में केंद्रीय ग्रामीण विकास मंत्री तथा केंद्रीय पशुपालन और डेवरी तथा खाद्य और उपभोक्ता मामले राज्य मंत्री (स्वतंत्र प्रभार) के रूप में कार्य किया। उक्त कृषि संसद के सदस्य, डॉ. रघुवंश प्रसाद सिंह ने खाद्य, नागरिक आपूर्ति और सार्वजनिक
वितरण संबंधी संसदीय समिति के समापति के रूप में तथा अनेक संसदीय समितियों के सदस्य के रूप में अपनी सेवाएं दीं। उन्होंने पन्डितवीं लोक सभा में समापति तात्कालिका के सदस्य के रूप में भी कार्य किया।

डॉ. रघुवंश प्रसाद सिंह 1977 से 1990 तक चार कार्यकाल के लिए बिहार विधान सभा के तथा 1991 से 1995 तक बिहार विधान परिषद के सदस्य रहे। उन्होंने बिहार विधान परिषद के समापति के रूप में तथा बिहार विधान सभा के उपाध्यक्ष के रूप में भी अपनी सेवाएं दीं। वह बिहार सरकार में विद्युत और उर्जा, राहत और पुनर्वास तथा राजभाषा विभाग के मंत्री रहे।

डॉ. रघुवंश प्रसाद सिंह का निधन 13 सितंबर, 2020 को नई दिल्ली में 74 वर्ष की आयु में हुआ।

यह सभा भारत के पूर्व राष्ट्रपति श्री प्रणब मुखर्जी, हमारे एक साथी श्री एच. वसंतकुमार, विख्यात गायक पंडित जससार और 13 पूर्व सदस्यों की मृत्यु पर गहरा शोक व्यक्त करती है और शोक संतत परिवारों के प्रति अपनी संवेदना प्रकट करती है।

यह सभा देश की एकता और अखंडता की रक्षा में बीरगति को प्राप्त हुए सशस्त्र सेना, अर्थव्यवस्थाकार बलों के सभी बीर सैनिकों और पुलिसबल के बहादुर जवानों को भी श्रद्धांजलि अर्पित करती है।

अंत में, सदन सभी कोरोना योद्धाओं, जिनमें डॉक्टर, नर्स, स्वास्थ्यकर्मी, सफाइकर्मी, पुलिसकर्मी तथा बड़ी संख्या में स्वयंसेवक भी सम्मिलित हैं, को भी श्रद्धांजलि अर्पित करता है जिन्होंने अपने कर्तव्यों का सम्पूर्ण निर्वाहन करते हुए अपने आपको बलिदान कर दिया।

इन सभी पुण्यतामाओं को हमारा नमन है।

अब यह सभा इन दिवंगत आत्माओं के समान में कुछ देर मन खड़ी रहेगी।

(The Members then stood in silence for a short while.)
09.17 hrs

*The Lok Sabha then adjourned till Ten Minutes past Ten of the Clock.*
10.17 hrs

*The Lok Sabha reassembled Seventeen Minutes past Ten of the Clock.*

(Hon. Speaker in the Chair)

**ANNOUNCEMENTS BY THE SPEAKER**

(i) Seating arrangement during COVID-19

**माननीय अध्यक्ष:** माननीय सदस्यगण, असाधारण परिस्थितियों के बीच आयोजित किए जा रहे इस मानसून सत्र में मैं आप सभी का स्वागत करता हूँ। संसद के इतिहास में संभवतः यह पहली बार है, जब लोक सभा के सदस्य राज्य सभा और राज्य सभा के सदस्य लोक सभा कक्ष में बैठ रहे हैं। इतना ही नहीं, जिन दीर्घाओं से देश की जनता संसद के इतिहास में संभवतः यह पहली बार है, जब नजदीक बैठने की व्यवस्था की गई है। वैसे से हम सदस्य के बीच की दूरी कम हो और उन्हें नजदीक लाने के प्रयास किए जाएं, लेकिन, इस बार हम राज्य अपास में दूरी बनाए स्थनने के लिए यह व्यवस्था की गई है। माननीय सदस्यगण, वर्तमान सत्र में बैठने की व्यवस्था के संबंध में आपको हुई असुविधाओं से मैं अवगत हुआ हूँ।

मैं इस संबंध में इतना ही कहना चाहता हूँ कि इस बार सदन असाधारण परिस्थितियों में हो रहा है। हमने सुरक्षा के व्यापक इंतजाम भी किए हैं, लेकिन इसके बावजूद यह सदन ठीक से संचालित हो, उसके लिए हम आप सभी के सहयोग से प्रयास कर रहे हैं। इसीलिए हमने सभी दलों के नेताओं की सीटों का आवंटन उनकी संख्या के अनुपात में किया है। मैं सभी माननीय मंत्रीगणों और माननीय सदस्यगणों से आश्र करता हूँ कि हमने जिन सीटों पर संख्या लिखी है, वह सामाजिक दूरी और गाइडलाइन की पालना के तहत लिखी है। आप उसकी पालना कर मुझे सहयोग करें। हमने यह भी कोशिश की है कि संसदीय कार्यों में डिजिटाइजेशन का उपयोग हो इसलिए हमने एक ऐप बनाया है, जिसमें माननीय सदस्य अपनी उपस्थिति दर्ज करवा सकते हैं।

उनके द्वारा ऑनलाइन प्रश्न और अन्य सूचनाएं भी भेजी जा रही हैं और उनके उत्तर भी ऑनलाइन
प्रास किए जा रहे हैं। ऐसी कई व्यक्तियाँ और प्रबंध हैं जो पहली बार किए गए हैं। यह सब असाधारण परिस्थितियों के कारण ही किए गए हैं। सेप्टेंबर प्रोटोकॉल्स के चलते संभव है कि आपको कुछ असुविधा उठानी पड़े, लेकिन यह सब आपकी सुरक्षा के लिए और हम सभी की सुरक्षा के लिए आवश्यक था।

माननीय सदस्यगण, भारत दुनिया का सबसे बड़ा कार्यशील लोकतंत्र है। हमारी संसद 130 करोड़ जनता का प्रतिनिधित्व करती है। हमारी संसद जनता की आशाओं व आकांक्षाओं की प्रतीक है। हमारी ओर से भी नागरिकों के बीच यह संदेश जाना चाहिए कि भारत की जनता की प्रगति, उत्कृष्ट और उन्हें हर प्रकार से सुरक्षित रखने के लिए पूरा सदन एकमत है। पिछले कुछ समय में कोरोना के कारण उपजी परिस्थितियों का सामना करने में देश की जनता ने अद्वित एकता और संघठन शक्ति का परिचय दिया है। कोरोना योद्धाओं ने संक्रमण को नियंत्रित करने के प्रयासों में उत्कृष्ट योगदान दिया है। सांसदगण ने भी चुनौतीपूर्ण परिस्थितियों में अपने-अपने क्षेत्रों में जनसेवक के रूप में दायित्व निभाए हैं और वंचित अभावग्रस्त वर्ग सहित अधिकतम लोगों तक राहत पहुँचाने में मदद की है। इस दौरान संसद में एक कंट्रोल रूम स्थापित किया गया, जिसके माध्यम से राहत कार्यों में सहयोग किया गया तथा विभिन्न राज्यों की विधान सभाओं से समन्वय स्थापित कर सांसदों, जनप्रतिनिधियों एवं आम जन के बीच एक कड़ी के रूप में कार्य किया गया।

इसके लिए आप सभी साधुवाद के पात्र हैं।

मेरा विश्वास है कि केंद्र व राज्य सरकारों के सामूहिक प्रयासों, सभी दलों के नेताओं की सहभागिता, कोरोना योद्धाओं के समर्पण योगदान और व्यापक जन-सहयोग से हम कोरोना महामारी पर शीघ्र ही विजय प्राप्त कर लेंगे। साथियों, लोकतंत्र तथा समृद्ध होगा जब सकारात्मक भाव के साथ हम जनहित के लिए राष्ट्रीय विषयों पर अपना विचार प्रस्तुत करें। पश्चात्तर विपश्चात्तर हमारे लोकतंत्र की जीवनता प्रदान करते हैं। सत्र के दौरान इसी उद्देश्य से हमारे द्वारा आम जनता से जुड़े विषयों पर चर्चा कर समाज हित व देश हित के अंतिम लक्ष्य की प्राप्ति की ओर अग्रसर रहने, ऐसा मेरा विश्वास है और आप सबसे आग्रह भी है। इस बार हमारे पास समय काफी कम है, ऐसे में
हमारा दायित्व बनता है कि हम सदन के समक्ष संक्षिप्त और सारागम्यता से बात रखें। लोकसभा की भावनाओं को मजबूत बनाना तथा संवैधानिक मूल्यों में अभिवृद्धि करना तथा उसके संकल्प के साथ काम करना हम सभी का दायित्व है। आज का दिन पूरे देश में हिंदी दिवस के रूप में भी मनाया जाता है। इस अवसर पर समस्त राष्ट्र को सदन की ओर से शुभकामनाएं। विविधता से भरे अपने देश में सभी भारतीय भाषाओं की उन्नति सुनिश्चित हो, हम सभी इसके लिए प्रयास करें, मेरी यही मनोकामना है।

अंत में, मैं आप सबका पुनः स्वागत करता हूं और सदन की कार्यवाही के संचालन में आपसे पूर्व की भांति सहयोग की आशा रखता हूं। मुझे पूरा विश्वास है कि हम सब एक साथ मिलकर इन कठिन परिस्थितियों में अपने उद्देश्य और संवैधानिक दायित्वों को निभाएंगे और इस सत्र की सुखद स्पर्शितियां रखेंगी। मुझे आशा है कि आपके सहयोग से हम देश में एक नया संदेश दे पाएंगे कि इन विपरीत परिस्थितियों में माननीय सदस्यों ने देशहत और राष्ट्रहत में काम किया।

माननीय सदस्यगण, मैं आपसे एक और आग्रह करूंगा, हालांकि आप सबके लिए बहुत कठिन है, लेकिन इस कोविड-19 के कारण और इसके संक्रमण के बारे में कई विश्वस्त्रों की सलाह के आधार पर हमने यह फैसला किया है कि हम माननीय सदस्यों को बैठक कर बोलने की अनुमति दें। इस आदेश के लिए कई माननीय सदस्यों को बहुत परेशानी है, लेकिन इसके अलावा हमारे पास कोई उपाय नहीं है।

दूसरा विषय, मैं आपसे पुनः आग्रह करता हूं। माननीय सदस्यगण, हमने सीटों के आवंटन के मामले में सभी दलों के नेताओं को उनकी संख्या के आधार पर सीटों का आवंटन किया है। सभी दलों के नेता अपने-अपने दल के सदस्यों के लिए, उनकी जैसी अपेक्षा हो, बैठने की व्यक्तिगत सुनिश्चित करेंगे। किसी नाम की सीट का आवंटन हम इसलिए नहीं कर पाएं, क्योंकि हम चाहते हैं कि सभी माननीय सदस्यों को सही जगह पर, सही स्थान पर बोलने का अवसर हो। इसके लिए मुझे सभी दलों के माननीय नेताओं सहयोग देंगे।
माननीय सदस्यगण, जैसा आपको विदित है कि सामाजिक दूरी के अनुपालन तथा माननीय सदस्यों की सुरक्षा सुनिश्चित करने के लिए लोक सभा की कार्यवाही के दौरान लोक सभा के कुछ माननीय सदस्यों के राज्य सभा चैंबर में बैठने की व्यवस्था की गई है। लोक सभा के प्रक्रिया एवं कार्य-संचालन नियमों के तहत नियम 2 के अंतर्गत में निर्देश देता है कि इस सत्र में लोक सभा की कार्यवाही के दौरान सभा के परिसर का तात्पर्य राज्य सभा चैंबर, लॉबी तथा इसकी दौराण से भी है। इस सत्र के दौरान राज्य सभा की कार्यवाही के समय राज्य सभा के कुछ सदस्य लोक सभा चैंबर में बैठें। इस सन्दर्भ में आपका ध्यान प्रक्रिया एवं कार्य-संचालन नियमों के नियम 384 की ओर आकृत करना चाहता हूँ, जो यह प्रावधान करता है कि सभा के भवन का उपयोग सभा की बैठकों के अतिरिक्त किसी अन्य प्रयोजन के लिए नहीं किया जाएगा।

अतः मेरा सुझाव है कि नियम 384 को शिथिल कर दिया जाए ताकि राज्य सभा की कार्यवाही के दौरान राज्य सभा के कुछ सदस्य लोक सभा चैंबर में बैठ सकें। मेरी समझ में यह भी अपने आप में इतिहास होगा कि राज्य सभा के कई माननीय सदस्यों को इस बार लोक सभा के चैंबर में, जो कभी सपना देखा करते थे, यहां बैठकर बोलने का मौका मिलेगा। मुझे लगता है कि आप मेरे इस प्रस्ताव से सहमत होंगे।

अनेक माननीय सदस्य: जी, हां।

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माननीय अध्यक्ष : माननीय सदस्यगण, सामान्य परिस्थिति में अध्यक्ष द्वारा प्रश्नों के लिए तथा गैर-सरकारी कार्यों के लिए नियत दिवसों की सूचना माननीय सदस्यों को समन जारी करने के साथ दी जाती थी। सरकार के अनुरोध पर विचार करते हुए, इस बात को ध्यान में रखते हुए कि लोक सभा प्रतिदिन केवल चार घण्टे के लिए बैठती, मैंने प्रक्रिया एवं कार्य-संचालन नियमों के नियम 389 के अंतर्गत अपने विवेक का उपयोग करते हुए इस सत्र के लिए समन जारी किए जाने के ये निर्देश दिए थे कि प्रश्नों के लिए और गैर-सरकारी कार्य के लिए कोई दिन नियत न किया जाए। बाद में ऐसे अत्याधुनिक प्रश्नों के लिए दिन आवश्यक नहीं हैं, जिसकी सूचना आपको बुलेटिन के माध्यम से मिल चुकी है। अतः मैं माननीय संसदीय कार्य मंत्री जी से अनुरोध करता हूँ कि वे अत्याधुनिक प्रश्नों और गैर-सरकारी कार्य के बारे में अपना प्रस्ताव प्रस्तुत करें।

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...(व्यवधान)

माननीय अध्यक्ष : एक बार उनको प्रस्ताव प्रस्तुत करने दें।

...(व्यवधान)
MOTION RE: *BUSINESS OF THE HOUSE

THE MINISTER OF PARLIAMENTARY AFFAIRS, MINISTER OF COAL AND
MINISTER OF MINES (SHRI PRALHAD JOSHI): I beg to move:

"Keeping in view that the current Session of Lok Sabha is being
held in extraordinary circumstances prevailing due to COVID-19
pandemic requiring maintenance of social distancing and keeping
the movement of Government officials and others within the
Parliament precincts to the bare minimum, this House resolves
that *Starred Questions and Private Members’ Business may not
be brought before the House for transaction during the Session,
and all relevant Rules on these subjects in the Rules of Procedure
and Conduct of Business in Lok Sabha may stand suspended to
that extent."

*Please refer to pp.62 to 638 for written answers to Unstarred Questions.
SHRI ADHIR RANJAN CHOWDHURY (BAHARAMPUR): The argument and the rationale that have been dished out by the hon. Minister of Parliamentary Affairs with regard to the revocation of the Question Hour, I think, is far from convincing.

Question Hour is recognised as the essence of parliamentary democracy. Not only that, Question Hour could be interpreted as the soul of the House. It is not just now. The First Legislative Council set up under the Charter Act of 1853 was primarily meant for making laws and regulations. The Charter Act did not define the powers of the Legislative Council, but the Council showed some degree of independence by asking questions and discussing the propriety of the measures of the executive Government.

Question Hour means making executive answerable. Executive accountable होते हैं। बात क्या है कि जो आम लोगों की समस्या है, आम लोगों के सामने पेश करने के लिए यह हमारे लिए सबसे बड़ा मौका है। So, it is a Golden Hour. Question Hour is simply the Golden Hour of the House. But on the excuse of ‘extraordinary situation’, you are saying that Question Hour will not be there....(व्यवधान) सर, मुझे बोलने दीजिए। सर, यहा जो बात कही जा रही है, यह बात बिल्कुल अजीब-सी लग रही है,
क्योंकि हम सदन चलाते हैं। हमें सदन चलाने में कोई दिक्कत नहीं है, लेकिन आपको सिर्फ एक ही जगह दिक्कत होती है, वह प्रश्न काल है। क्योंकि ब्रिटिश जमाने में सदन चल रहा है और आप आजादी के 73 साल बाद प्रश्न काल को हटा कर लोक तंत्र का गला घोटने का काम कर रहे हैं। हमारा यह सरकार के खिलाफ सबसे बड़ा मुद्दा है।

माननीय अध्यक्ष: श्री असादुद्दीन ओवेसी जी, आपका प्रस्ताव है। आपकी भावनाएं...

SHRI ASADUDDIN OWAISI (HYDERABAD): Sir, the Question Hour and the Private Members’ Business are cornerstones of our democracy. They are very much essential for the existence of Parliamentary democracy. The Question Hour and the Private Members’ Business are also part of theory of separation of powers. The hon. Minister has the dishonourable distinction. By moving such a Motion, he is weakening the theory of separation of powers, which is part of the basic structure of our Constitution.

I urge you, Mr. Speaker, not to allow the executive to encroach on the territory of the legislature. It is a shameful day if the Question Hour and the Private Members’ Business are not taken up.

Lastly, on behalf of my Party I am asking for a Division. There should be a Division on this.

माननीय अध्यक्ष: श्री मनोष तिवारी जी।

…(व्यवधान)

माननीय अध्यक्ष: अभी में आपको नियम बता दूंगा।
SHRI MANISH TEWARI (ANANDPUR SAHIB): Sir, we are very cognizant of the extraordinary circumstances in which this Parliament Session has been convened. We also deeply appreciate the arrangements which have been made in order to make this Session possible.

However, Mr. Speaker, Sir, while recognising that under rule 32 of the Rules of Procedure and Conduct of Business of Lok Sabha, you have the authority to suspend the Question Hour, I would like to draw your attention to page 473 of Kaul and Shakdher and read just one paragraph which is extremely important.

SHRI MANISH TEWARI: Speaker Sir, I am just pointing out with great respect, that Kaul and Shakdher says in page 473: “In very exceptional cases, Question Hour may be dispensed with for making available more time to other business or to take up some other urgent business, only if the House unanimously agrees.” …(Interruptions). Mr. Speaker, Sir, the qualification is that the House must unanimously agree because this is the only time when the Opposition holds the Government accountable …(Interruptions)

SHRI KALYAN BANERJEE (SREERAMPUR): Sir, we appreciate that in the present prevailing situation, Parliament has been commenced and it will
continue for 18 days. But Sir, we should remember, at the same time, that the Question Hour is also an integral part of the basic structure of the parliamentary procedure and we cannot destroy that part.

Sir, today, if the Government is having their pressure for passing the bills, we are also having our views to express ...(Interruptions)

माननीय अध्यक्ष : किसी पर किसी का दबाव नहीं है। सदन चलना चाहिए, सभी इस पर एकमत हैं।

SHRI KALYAN BANERJEE: Sir, this is the only time when we get the answers from the hon. Ministers. Therefore, kindly do not take away this advantage from us. Sir, really it will take away the entire glamour, 50 per cent glamour of the running of the Parliament. People also want to hear the answers from the Ministers. This is the glamour. They wait for that. They want to see this. That is being taken away.

माननीय अध्यक्ष : माननीय प्रधान जोशी जी, आप बोलिए।

...(व्यवधान)

SHRI PRALHAD JOSHI: Sir, I would very humbly submit that before arriving at this decision, our hon. Deputy Leader of Lok Sabha and also Raksha Mantri of the country, myself and my colleagues in the Parliament, Shri Muraleedharan and Shri Arjun Meghwal, have spoken to almost all leaders of the various parties.

I would also like to clarify that in this extraordinary situation, your kind self agreed to the proposal to run the Session for 18 sittings. I would like
to ask very humbly to the various leaders who questioned the suspension of Question Hour.

Sir, all Assemblies including Punjab, West Bengal, Rajasthan, Andhra Pradesh, Kerala ...(Interruptions) When you were speaking, we have listened. Kindly listen to me ...(Interruptions). They have run the session for two days or one day and they have passed 20-25 Bills, whereas the Government of India, under the leadership of Modiji, decided to run the Session for 18 days and have discussion on all the bills...(Interruptions)

Secondly, Sir, the people are saying that this is basic structure of Parliament. In 1975, the entire country knows what had happened and the history is the witness for that.

Thirdly, Sir, I have already said that in 1962, Question Hour was suspended; ...(Interruptions) in 1975, it was suspended; in 1976, it was suspended ...(Interruptions)

माननीय अध्यक्ष: माननीय मंत्री जी, मैं व्यवस्था दे रहा हूं।

SHRI PRALHAD JOSHI: In the last five years, after Shri Narendra Modi ji got resounding victory twice, nearly 60 per cent of the Question Hour time in Rajya Sabha and 40 per cent of the Question Hour time in Lok Sabha were wasted in spite of having resounding victory and mandate of the people. ...(Interruptions)

Keeping this in view, I would urge with all humbleness at my command that this is an extraordinary situation. When Assemblies are not ready to meet even for a single day, we, with around 800 to 850 MPs, are meeting here under your guidance. I would appeal to them that there are so many ways to
माननीय अध्यक्ष: माननीय रक्षा मंत्री जी, सभी दलों के नेताओं से आपकी चर्चा हुई थी, आप एक बार आया कर दें।

...(व्यवधान)

रक्षा मंत्री (श्री राज नाथ सिंह): माननीय अध्यक्ष महोदय, जैसा कि संसदीय कार्य मंत्री ने सदन को अवगत कराया है, उन्होंने और उनके दो अन्य सहयोगियों- श्री अर्जुन राम मेघवाल और श्री मुरलीदर संसदीय ख्वाभ मंत्री ने अधिकारियों के युग लीडर्स के साथ बातचीत की है और भद्रता से लोगों से मैंने भी बातचीत की है कि इस बार हम लोगों को असाधारण परिस्थितियों में संसद की कार्यवाही करनी पड़ रही है। इसमें आप सभी का सहयोग चाहिए क्योंकि सदन केवल चार घंटे के लिए ही चलेगा। इसलिए मैंने अनुरोध किया था कि इसमें क्वेश्चन ऑवर न हो।...(व्यवधान) बल्कि आघे घंटे का जीरो ऑवर हो। यदि किसी को कोई प्रश्न पूछना हो, अपनी किसी आशंका का समाधान करना हो, तो वे उस आघे घंटे में कर सकते हैं। अधिकांश राजनीतिक पार्टी के जो नेताओं हैं, उन्होंने अपनी सहमति दी थी और उससे आपको अवगत कराया गया था। तत्पश्चात आपने यह फैसला किया था कि जो संसद की कार्यवाही चलेगी, उसमें क्वेश्चन ऑवर नहीं होगा। मैंने सभी सम्मानित सदस्यों से...(व्यवधान) मैं सभी सम्मानित सदस्यों से अनुरोध करना चाहता हूँ।...(व्यवधान)

माननीय अध्यक्ष: No. मैं आप सभी को बोलने का मौका देता हूँ। जब माननीय रक्षा मंत्री जी और सदन के उप नेता बोल रहे हों, तो कोई माननीय सदस्य डिस्ट्रेंस्स नहीं करें।

...(व्यवधान)

श्री राज नाथ सिंह: मैं सभी सम्मानित सदस्यों से विन्द्र अनुरोध करना चाहता हूँ कि असाधारण परिस्थितियों में यह संसद का सत्र प्रारंभ हो रहा है, इसमें हमें आपका सहयोग चाहिए। इसके साथ ही, मैं इस बात की जानकारी भी आपको देना चाहता हूँ कि अनस्टार्ड क्वेश्चन के माध्यम से
जो कुछ भी आप पूछना चाहते हैं, पूछ सकते हैं। मंत्रिगण आपको उसकी जानकारी देंगे। यदि अनस्टार्ड क्वेश्चन की रिप्लाई से आप संतुष्ट नहीं होते, तो आप चाहें तो जीरो आवर के दौरान भी उसका क्वेश्चनरिप्लाई संबंधित मंत्री से पूछ सकते हैं। इसलिए मैं आप सभी लोगों से विनम्रतापूर्वक अनुरोध करता हूँ कि कृपया संसद की कार्यवाही चलाने में अपना पूरा सहयोग दें। ...(व्यवधान)

श्री अधीर रंजन चौधरी: श्री राजनाथ सिंह जी ने अनस्टार्ड क्वेश्चन के बारे में कहा। हर दिन 230 अनस्टार्ड क्वेश्चन होते हैं। अगर आप चाहें, तो इसके साथ 25 क्वेश्चन और जोड़ सकते हैं। इस तरह से, 230+25 अनस्टार्ड कर सकते हैं, लेकिन स्टार्ड क्वेश्चन में आप 20 क्वेश्चन नहीं कर सकते हैं। यह आप कैसे समझाएंगे? किसी को इंफॉर्म करने का मतलब कंफर्म करना नहीं है। आपने जरूर इंफॉर्म किया है। लेकिन इंफॉर्म और कंफर्म एक ही चीज़ नहीं है। ...(व्यवधान)

माननीय अध्यक्ष: No.

माननीय सदस्यगण, प्रशिक्षकाल के विषय में...

...(व्यवधान)

SHRI ASADUDDIN OWAI SI: Sir, we demand Division. ...(Interruptions)

श्री राजनाथ सिंह: माननीय अध्यक्ष महोदय, मैं सदन को यह भी जानकारी देना चाहूँगा कि इस संबंध में श्री अधीर रंजन चौधरी जी से हमारी बात हुई थी और उन्होंने अपनी सहमिति दी थी। ...(व्यवधान)

माननीय अध्यक्ष: माननीय सदस्यगण, प्रशिक्षकाल के विषय में मैंने आपकी बात को ध्यानपूर्वक सुना है। मैंने आपकी भावनाओं को भी समझ लिया है। परन्तु, वैज्ञानिक संकट की इस घड़ी में मैं आपसे अपेक्षा करता हूँ कि आप परिस्थितियों को समझते हुए सदन के सुचारू रूप से संचालन में सहयोग करेंगे।
मैं पुनः दोहराता हूँ। मैंने आपकी भावनाओं को समझते हुए, मैं आपको आश्वासन देता हूँ कि लोक सभा के नियम एवं प्रक्रिया के व्यक्ति नियमों तथा अन्य साधनों में, मैं आपको पर्याप्त समय और पर्याप्त अवसर देंगा।

सरकार भी अपनी भावनाएं व्यक्त की हैं कि आपको अन्य साधनों के माध्यम से पर्याप्त समय और पर्याप्त अवसर मिलेगा।

माननीय सदस्य श्री ओवेसी जी, आपने माननीय संसदीय मंत्री जी द्वारा प्रस्तुत प्रस्ताव पर संशोधन की सूचना दी है। माननीय मंत्री जी के प्रस्ताव का मुख्य उद्देश्य यह है कि इस सत्र के दौरान तारांकित प्रश्न तथा गैर सरकारी कार्य न किया जाए। आपके संशोधन का उद्देश्य है कि तारांकित प्रश्नों तथा गैर सरकारी कार्यों को लिया जाए। माननीय सदस्य आप द्वारा प्रस्तुत संशोधन प्रक्रिया नियमों के नियम - 344 (2) के अंतर्गत मान्य नहीं हैं। अतः आपका संशोधन स्वीकार नहीं किया गया है।

माननीय मनीष तिवारी जी, आपने भी इस मामले में नोटिस दिया है। आपने जिन-जिन नियमों का हवाला दिया है, उन सारे नियमों के तहत मैं मानता हूँ कि आपके नियम इस संसदीय कार्य संचालन के तहत नहीं हैं और मैं चाहूँगा कि आप विद्वान अधिवक्ता हैं, पूरी नियम-प्रक्रिया को पढ़ ले। अंतिम नियम-प्रक्रिया तो माननीय अध्यक्ष ही है। आपने नियम 398 तो पढ़ रखा होगा।

...(व्यवधान)

माननीय अध्यक्ष: प्रश्न यह है:

“इस बात को ध्यान में रखते हुए कि लोक सभा का वर्तमान सत्र कोविड-19 वैश्विक महामारी के कारण असाधारण परिस्थितियों में संचालित किया जा रहा है, जिसके लिए सुरक्षित दूरी बनाये रखने एवं संसद परिसर के भीतर सरकारी
अधिकारियों एवं अन्य की आवाजाही को कम-से-कम रखे जाने की आवश्यकता है, यह सभा संकल्प करती है कि तारांकित प्रश्नों और गैर-सरकारी सदस्यों के कार्य को सत्र के दौरान सभा के कार्य के लिए सभा के समक्ष न लाया जाये, लोक सभा के प्रक्रिया तथा कार्य-संचालन नियमों में इन विषयों संबंधी सुसंगत नियमों को ऐतत्त्विक उस सीमा तक निलंबित किया जाये।।"

प्रस्ताव स्वीकृत हुआ।
माननीय अध्यक्ष: माननीय सदस्यगण, मुझे कुछ माननीय सदस्यों द्वारा कुछ विषयों पर स्थगन प्रस्ताव की सूचनाएं प्राप्त हुई हैं। मैंने किसी भी स्थगन प्रस्ताव की किसी भी सूचना के लिए अनुमति प्रदान नहीं की है।

श्री अधीर रंजन चौधरी (बहरामपुर): सर, कुछ बोलने दीजिए।

माननीय अध्यक्ष: अभी आपको मौका देंगे।

...(व्यवधान)

10.47 hrs

ANNOUNCEMENT BY THE SPEAKER ... Contd.

(iii) Papers to be laid on the Table

माननीय अध्यक्ष: माननीय सदस्यगण, मुझे सूचित करना है कि माननीय संसदीय कार्य मंत्री से मुझे एक अनुरोध प्राप्त हुआ है, जिसमें उन्होंने निवेदन किया है कि वर्तमान कोविड-19 की स्थिति के कारण उन्हें या संसदीय कार्य राज्य मंत्री को 17वीं लोक सभा के चौथे सत्र के दौरान कार्य सूची में सभा पटल पर रखे जाने वाले शीर्ष के अंतर्गत सूचीबद्ध किए गए पत्रों को सभी मंत्रियों की ओर से सभा पटल पर रखने की अनुमति प्रदान की जाए। मैंने उनके अनुरोध को स्वीकार कर लिया है।
PAPERS LAID ON THE TABLE

माननीय अध्यक्ष: आइटम नं. 3 और 4 – श्री अजुन राम मेघवाल।
संसदीय कार्य मंत्रालय में राज्य मंत्री तथा भारी उद्योग और लोक उद्यम मंत्रालय में राज्य मंत्री (श्री अजुन राम मेघवाल): अध्यक्ष महोदय, श्रीमती निर्मला सीतारमण की ओर से मैं बैठकारी विनियमन (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 12) के प्रस्थापन द्वारा तत्काल विधान बनाने के कारणों को दर्शाने वाला एक व्याख्यात्मक विवरण (हिन्दी तथा अंग्रेजी संस्करण) सभा पटल पर रखता हूँ।

[Placed in Library, See No. LT 2465/17/20]
श्री अजुन राम मेघवाल: अध्यक्ष महोदय, मैं आपकी अनुमति से संविधान के अनुच्छेद 123 (2) (क) के अंतर्गत निम्नलिखित अध्यादेशों की एक-एक प्रति (हिन्दी तथा अंग्रेजी संस्करण) सभा पटल पर रखता हूँ:

(1) राष्ट्रपति द्वारा 31 मार्च, 2020 को प्रश्नापेश कराराम और अन्य विषय (कलिपय उपबंधों में छूट देना) अध्यादेश, 2020 (2020 का संख्यांक 2)।

[Placed in Library, See No. LT 2466/17/20]

(2) राष्ट्रपति द्वारा 7 अप्रैल, 2020 को प्रश्नापेश संसद सदस्य वेतन, भत्ता और पेशन (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 3)।

[Placed in Library, See No. LT 2467/17/20]

(3) राष्ट्रपति द्वारा 9 अप्रैल, 2020 को प्रश्नापेश मंत्रियों के संबलम और भत्ते (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 4)।

[Placed in Library, See No. LT 2468/17/20]
(4) राष्ट्रपति द्वारा 22 अप्रैल, 2020 को प्रख्यापित महामारी (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 5)।

[Placed in Library, See No. LT 2469/17/20]

(5) राष्ट्रपति द्वारा 24 अप्रैल, 2020 को प्रख्यापित होम्योपैथी केन्द्रीय परिषद (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 6)।

[Placed in Library, See No. LT 2470/17/20]

(6) राष्ट्रपति द्वारा 24 अप्रैल, 2020 को प्रख्यापित भारतीय चिकित्सा केन्द्रीय परिषद (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 7)।

[Placed in Library, See No. LT 2471/17/20]

(7) राष्ट्रपति द्वारा 5 जून, 2020 को प्रख्यापित आवश्यक वस्तु (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 8)।

[Placed in Library, See No. LT 2472/17/20]

(8) राष्ट्रपति द्वारा 5 जून, 2020 को प्रख्यापित दिवाला और शोधन अक्षमता संहिता (संशोधन) अध्यादेश, 2020 (2020 का संख्यांक 9)।

[Placed in Library, See No. LT 2473/17/20]

(9) राष्ट्रपति द्वारा 5 जून, 2020 को प्रख्यापित कृषक उपज व्यापार और वाणिज्य (संवर्धन और सरलीकरण) अध्यादेश, 2020 (2020 का संख्यांक 10)।

[Placed in Library, See No. LT 2474/17/20]

(10) राष्ट्रपति द्वारा 5 जून, 2020 को प्रख्यापित कृषक (सशक्तीकरण और संशोधन) कीमत आश्वासन और कृषि सेवा पर करार अध्यादेश, 2020 (2020 का संख्यांक 11)।

[Placed in Library, See No. LT 2475/17/20]
(11) राष्ट्रपति द्वारा 26 जून, 2020 को प्रथ्यापित बैंककारी विनियमन (संशोधन) अध्यादेश,
2020 (2020 का संख्यांक 12)।

[Placed in Library, See No. LT 2476/17/20]
10.49 hrs

*WRITTEN ANSWERS TO QUESTIONS
(Q. No.1 to 230)

(page 73-638)

*Available in Master copy of the Debate placed in Library.
SHRI T. R. BAALU (SRIPERUMBUDUR): Sir, with great anguish and pain, I would like to draw the kind attention of this august House, and also the Government of India about the said plight of 12 students who have committed suicide, all from rural background, because of NEET examinations.

Sir, they have passed 10+2 State Board Examination but the NEET Examination is conducted only on the basis of CBSE Syllabus. So, within a month, after 10+2 results, the students have to take NEET Examination. They are clueless about it. They do not know anything about the CBSE Syllabus. The students are helpless and are committing suicide. They are future doctors that have committed suicide. They have passed 10+2 in the State Board Examination. The Government of India has created a National Medical Commission for NEET Examination which has to be conducted throughout India. A Dalit girl student from Ariyalur has committed suicide. There are twelve such incidents, Anita from Ariyalur, Subhasri from Tiruchi, Vidhusti from Theni, Pradeepa from Viluppuram, Kirthana from Viluppuram, Vayushree from Thanjavur, Manisha from Viluppuram, Subhasti from Coimbatore, Vigneshwar from Ariyalur, Jyothi from Madurai and Piya from Dharmapuri.

माननीय अध्यक्ष : माननीय सदस्य, आप डिटेल में नाम अंकित न करें। आप विषय पर बोलें।
SHRI T. R. BAALU: All the students have committed suicide because of the syllabus. They are not conversant with the CBSE syllabus. They have studied only the State Board syllabus. The examination is being conducted in another syllabus. What is the way out? They are simply committing suicide...(Interruptions)

HON. SPEAKER: Please conclude.

श्री डी.एन.वी. सेंथिलकुमार एस. को श्री टी.आर. बालू द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

श्री अधीर रंजन चौधरी (बहरामपुर): सर, मैं आपके जरिए सरकार का ध्यानाकर्षित करना चाहता हूं। ...(व्यवधान) सर, मैं आपके जरिए इस सरकार का और खासकर हमारे देश के रक्षा मंत्री जी का ध्यान आकर्षित कराना चाहता हूँ कि...(व्यवधान) कई महीने से हिन्दुस्तान के सारे लोग भारी तनाव में हैं, क्योंकि हमारी सीमा में चीन ...(व्यवधान)

माननीय अध्यक्ष : माननीय सदस्य, विज्ञान एडवाइजरी कमेटी में चर्चा करने के बाद इस पर चर्चा होगी।

श्री अधीर रंजन चौधरी : सर, एक मिनट बोलने दीजिए। राज नाथ सिंह जी भी राजी हैं। सर, आज भी खबर छपी है...(व्यवधान)
ADV. DEAN KURIAKOSE (IDUKKI): Sir, I seek the kind attention of the hon. Prime Minister regarding the biggest landslide in my constituency of Idukki which happened on 6th August at Munnar, Pettimudi. Seventy people have lost their lives. Four persons are yet to recover. I salute all the rescue workers and whoever has participated throughout. I urge upon the Government to announce a comprehensive package. This landslide was the biggest one that happened in the plantation area. All the victims are plantation workers and they belong to SC community. Some discrimination cropped up in the announcement of compensation package by the State Government.

HON. SPEAKER: Please conclude. Only one minute is allowed.

ADV. DEAN KURIAKOSE: I am concluding, Sir.

Only Rs. 5 lakh compensation was announced by the State Government. At the same time ...(Interruptions)
महाराजा रणजीत सिंह जी ने जम्मू के जामिया मिया किशोर सिंह जामबाल जी, जो महाराजा गुलाब सिंह जी के पिता थे, उनको दी थी। सन 1822 में उन्होंने खुद अपने हाथों से महाराजा गुलाब सिंह जी का जम्मू के राजा के रूप में राजतिलक किया था। महोदय, पिछले 200 सालों से जम्मू और उसके आस-पास के इलाकों में पंजाबी जुबान का बोलबाला है। जम्मू और कश्मीर में पंजाबी की कई उपबोधीयां बोली जाती हैं। सन् 1847 में जब भारत का विभाजन हुआ था, तब पाकिस्तान से जो लोग विस्थापित होकर आए थे, उनमें से अधिकतर लोग जो जम्मू-कश्मीर में बसे थे, वे पंजाबी बोलते थे। यह बहुत ही दुर्भायपूर्ण बात है कि 2 सितंबर, 2020 को सरकार ने जम्मू-कश्मीर ऑफिशियल लैबेजेज़ को मंजूरी दी है। उसमें सिर्फ उर्दू, कश्मीरी, डोगरी, हिन्दी और अंग्रेजी को अधिकृत जबानों के तौर पर शामिल किया गया है।

अध्यक्ष जी, मैं आपके माध्यम से सरकार से यह आग्रह करना चाहता हूँ कि इस विषय में पंजाबी जुबान को शामिल किया जाए। केन्द्र शासित प्रदेश जम्मू-कश्मीर में जिस तरह का वितरण, जिस तरह का दिस्क्रिमिनेशन पंजाबी जुबान के साथ किया जा रहा है, इसे बंद किया जाए। अध्यक्ष जी, यह बहुत ही संवेदनशील मुद्दा है। मैं आपसे यह निवेदन करना चाहता हूँ कि आप सरकार को…

माननीय अध्यक्ष : श्री रवि किशन जी।

…(व्यवधान)

माननीय अध्यक्ष : श्री संजय सेठ जी।

…(व्यवधान)

श्री संजय सेठ (राँची) : अध्यक्ष जी, जुहार। मैं झारखंड में आदिवासी समुदाय के धर्मतर्क के मुद्दे पर अपना प्रश्न रखना चाहता हूँ। मैं सभी धर्मों की इजजत करता हूँ। सर्वधर्म महान हैं। किन्तु वर्तमान समय में झारखंड के कई क्षेत्रों में धर्मतर्क बढ़ने और लोभ-लालच देने जैसे मामले सामने आए हैं। वहां चर्चा का प्रभाव तेजी से बढ़ा है। सिमडेगा जैसे छोटे से जिले में चीबीस के अधिक चर्चा हैं। यहां 300 से भी अधिक चर्चा सिफर सिमडेगा शहर में हैं। यह बताने के लिए पर्याप्त है कि
झारखंड में किस कदर धर्मांतरण का प्रभाव बढ़ रहा है और मिशनरियों द्वारा भोले-भाले आदिवासियों को अपने चंगूल में फंसाया जा रहा है। इसाई मिशनरियों की संस्था निर्मल हृदय के द्वारा बच्चों की खरीद-बिक्री का मामला काफी पहले ही सामने आया है। इसमें वर्ष 2018 में अचानक से एक बड़ा खुलासा हुआ। सैकड़ों की संख्या में नवजात शिशुओं की खरीद-बिक्री का मामला सामने आया है। गोद लेने के नाम पर नवजात बच्चों की खरीद-बिक्री होती है। अस्वीकार्य आदिवासी लड़कियों को मां बनाया जाता है। यह दुर्भाग्यपूर्ण है कि इसमें ज्यादातर आदिवासी समुदाय से होती है।

इन मामलों में मुकदमे भी हुए हैं, कई गिरफ्तारियां भी हुई हैं, तत्कालिन भाजपा सरकार ने इसकी जांच के निर्देश भी दिए थे। परंतु नई सरकार के गठन के साथ ही यह मामला ठंडे बस्ते में चला गया है। इतना ही नहीं धर्मांतरण और चर्च का बढ़ता प्रभाव आदिवासियों को कई रूपों में विकसित कर रहा है। निर्मल हृदय संस्था का एक मामला सामने है। महोदय, आपसे यह आग्रह करना चाहता हूँ कि इसकी जांच की जाए और मामले का खुलासा किया जाए। अगर लॉकडाउन की बात करने, तो पूरे देश में लोग सेवाभाव से काम कर रहे हैं।

माननीय अध्यक्ष: माननीय सदस्य, प्लीज़।

...(व्यवधान)

माननीय सदस्य: माननीय सदस्यगण, मैं यह आग्रह करता हूँ कि शून्य काल की जो स्थिति है, उसमें से दो-तीन वक्ताओं के नाम में एक साथ बोल दूंगा, ताकि क्रम वाइज़ वक्ता तैयार रहें। कुछ वक्ता यहां पर हैं, कुछ वक्ता दर्शक दीघा में हैं, कुछ राज्य सभा में हैं, वे वक्ता तैयार रहें।

अब श्री रवि किशन जी बोलेंगे। उनके बाद भानु प्रताप सिंह वर्मा और उनके बाद श्रीमती सुप्रिया सुले जी बोलेंगी।

रवि किशन जी।
श्री रवि किशन (गोरखपुर): अध्यक्ष जी, शून्य काल में मुझे बोलने का अवसर प्रदान करने के लिए मैं आपका आभार प्रकट करता हूं। आज में सदन का ध्यान देश की एक बहुत बड़ी समस्या की तरफ दिलाना चाहता हूं। हम सब जानते हैं कि ड्रग ट्रैफिकिंग, ड्रग एडिक्शन की समस्या बढ़ती जा रही है। हानिकारक दवाओं के सेवन के माध्यम से देश की युवा पीढ़ी को बराबर करने की साजिश रची जा रही है। मुझे दुख के साथ कहना पड़ रहा है कि इस साजिश में हमारे पड़ोसी मुल्कों का हाथ है। प्रति वर्ष चीन और पाकिस्तान के सातवे देश में भारी मात्रा में नशे की दवाओं की तस्करी होती है और वे पंजाब के रास्ते और नेपाल के रास्ते से मंगाई जाती है। नशे की दवाओं के लिए फिल्म इंडस्ट्री के इसके एडिक्शन करवाने में इसके पड़ोसी देश के रास्ते भी पंजाब और पाकिस्तान के रास्ते से मंगाई जाती है। नशे की इंडियार्स इंडिया के लोगों का रोल मॉडल जाता है। आपके से के सरकार से माफ़ कर्ता हूं, अपनी सरकार से माफ़ कर्ता हूं, जिस ने हिसाब से आज हम लोग एकदम इनको बाहर तरफ पकड़ रहें हैं, तो यह संख्या काफी की जाए, दोषियों को जल्द पकड़ जाए, उन्हें उचित सजा दी जाए, तथा पड़ोसी देशों की जो साजिश है, युवा पीढ़ी को बराबर करने की, उस पर रोक लगाई जाए।

धन्यवाद।

माननीय अध्यक्ष: श्री सुधीर गुप्ता, श्री सी.पी. जोशी, डॉ. निशिकांत दुबे, डॉ. मनोज जोशी, श्री कमलेश पासवान, डॉ. (प्रो.) किरित प्रेमजीभाई सोलंकी, श्री देवजी पटेल एवं कुंवर रुढ़िवर सिंह चन्देल कोशी रवि किशन द्वारा उठाए गए विषय का साथ संबंध करने की अनुमति प्रदान की जाती है।

माननीय सदस्यगण, मैं पीछे वाले माननीय सदस्यों से आयात करता कि वे सामाजिक दूसरी के नियम को पालना करें। मैं पुनः सदन में सभी माननीय सदस्यों से आपेक्षा करता हूं कि वे सभी माननीय सदस्य सामाजिक दूसरी की गाइडलाइन की पालना करें। मुझे खुशी है कि आज संसद
सत्र के पहले दिन बड़ी संख्या के अंदर माननीय सदस्य अपने दायित्व को निभाने आए हैं, इसके लिए में सभी सदस्यों का पुनः धन्यवाद देता हूँ।

श्री भानु प्रताप वर्मा।

श्री भानु प्रताप सिंह वर्मा (जालौन): माननीय अध्यक्ष महोदय, आपने मुझे शून्य प्रहर में बोलने का अवसर दिया है, उसके लिए में आपका आभार व्यक्त करता हूँ।

महोदय, कोरोना के शुरुआती दिनों में, लॉकडाउन के दौरान रेलगाड़ियों का परिचालन बंद कर दिया गया था। मेरे संसदीय क्षेत्र में कोच शटल का परिचालन भी बंद कर दिया गया था। हमारा लोक सभा क्षेत्र, उत्तर-मध्य रेलवे के झांसी डिवीजन के अंतर्गत आता है, यहां से कोच से एक-एक शटल चलाई जाती है, वह इस समय बंद है। वहां का आरक्षण काउंटर भी बंद कर दिया गया था। में केन्द्र सरकार से अनुरोध करना चाहता हूँ कि जो शटल बंद कर दी गई है, उस कारण से वहां के क्षेत्रवासियों को बेहद परेशानी हो रही है। अन्य गाड़ियों का परिचालन शुरू कर दिया गया है। अतः आप से अनुरोध है कि इस शटल को भी प्रारंभ किया जाए और वहां के आरक्षण काउंटर को भी चालू कराया जाए।

धन्यवाद।

माननीय अध्यक्ष: श्री सी.पी. जोशी एवं कूँवर पुषण्ड्र सिंह चन्देल को श्री भानु प्रताप सिंह वर्मा द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है। में टेबल-ऑफिस से आग्रह करेंगा कि अगले वक्ता को सूचित कर दिया जाए।

श्रीमती सुप्रिया सुले।

SHRIMATI SUPRIYA SADANAND SULE (BARAMATI): Thank you, Sir. While I speak here in these challenging times, even if we do not have the Question Hour, I am very happy to see that the hon. Finance Minister is present here.

I think, the biggest challenge right now in the country is the state of the economy and the unemployment. The State that I come from is probably
fighting the toughest battle of the pandemic. We are having many many challenges on the economic front and our State has been immensely following up with the Central Government to get more help in reviving the economy of our State and getting some projects going. So, I urge the hon. Finance Minister to look into this matter.

I think, on the first day, what we should have debated today in Parliament is the state of the economy, the pandemic and the issue of unemployment.

This is a global scenario. I do understand that we are not the only country going through it. I think that should be the priority of the Government and I do not see this Government at the Centre talking extensively either about the economy or unemployment challenges. I would like to highlight and request that we should put it on priority. Let us leave all other issues aside and first talk about the rising unemployment issue in this country, and the state of economy, and how the Government is going to fix it.

माननीय अध्यक्ष : श्री डी.एन.वी. सेंधिलकुमार एस. और डॉ. मनोज राजोरिया को श्रीमती सुप्रिया सदानंद सुले द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

श्री अजय मिश्रा टेनी (खीरी) : माननीय अध्यक्ष जी, लड़कियों की उच्च शिक्षा की दर में काफी कमी है। सामाजिक जरूरत बढ़ने व शिक्षा के महत्व को देखते हुए लड़कियों उच्च शिक्षा ग्रहण करना चाहती हैं। अखिल भारतीय शिक्षा संस्थान 2019 की रिपोर्ट के अनुसार उच्चतर शिक्षा में लड़कियों का नामांकन मात्र 26.4 प्रतिशत है। इसका प्रमुख कारण यह है कि 4000 विश्वविद्यालय हैं, लेकिन हमारे देश में लड़कियों के लिए मात्र 16 विश्वविद्यालय हैं। इसके कई कारण हैं, जिसमें कम उम्र में विवाह और खास कर ग्रामीण क्षेत्रों में सुरक्षा आदि भी उसके प्रमुख कारण हैं।
मैं इसमें देखा है कि लगभग 25 प्रतिशत उच्च शिक्षा में महिलाओं का नामांकन होने के कारण हमारे देश का जो सकल प्रदर्शन है, उस पर व्यापक रूप से नकारात्मक प्रभाव पड़ रहा है। मैं इससे पूर्व प्राइवेट एंड पब्लिक बिल में भी इसकी मांग की थी। मैं आपके माध्यम से सरकार से मांग करना चाहता हूं, माननीय शिक्षा मंत्री जी भी यहाँ पर उपस्थित हैं। मैं यह चाहता हूँ कि हमारे देश के प्रत्येक विकास खंड में लड़कियों की उच्च शिक्षा दर में नामांकन बढ़ाने हेतु महाविद्यालयों की स्थापना की जाए तथा बालिकाओं की प्राथमिक शिक्षा में शत-प्रतिशत नामांकन सहित महिलाओं की उच्च शिक्षा हेतु व्यावहारिक व जरूरी प्रावधान किए जाएं।

माननीय शिक्षा मंत्री जी अगर इस पर कुछ उत्तर देना चाहें, माननीय शिक्षा मंत्री जी उपस्थित हैं, अगर उत्तर देना चाहें तो दे दें।

माननीय अध्यक्ष : डॉ. मनोज राजोरया को श्री अजय मिश्र टेनी द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

मैं माननीय सदस्यों से आग्रह कर रहा हूँ कि साउंड वालों को देखने में दिक्कत आ रही है, इसलिए अपने बटन को बोलने से पहले ओन कर दें।

श्रीमती अनुप्रिया पटेल।

श्रीमती अनुप्रिया पटेल (मिर्जापुर): माननीय अध्यक्ष जी, यूनेस्को की रिपोर्ट के अनुसार 151 देशों में कोविड आपदा काल के दौरान करोड़ों स्कूली बच्चों की शिक्षा प्रभावित हुई है और भारत उनमें से एक है। स्कूल बंद रखने की बाध्यता के चलते ऑनलाइन शिक्षा पद्धति को अपनाया गया, जहाँ सम्पन्न और गरीब परिवारों के बीच एक लगभग गेप की बड़ी समस्या उत्पन्न हुई। जहाँ एक और सम्पन्न परिवारों के बच्चों के पास स्मार्ट फोन से लेकर लैपटॉप, डेस्कटॉप, टैबलेट और एक हाई स्पीड इंटरनेट वाइ-फाई कनेक्शन, टीवी जैसी सारी सुविधाएं उपलब्ध हैं, वहीं गरीब, ग्रामीण क्षेत्रों में रहने वाले गरीब बच्चों के पास इन सारी सुविधाओं का अभाव है। उनके पास लैपटॉप और
डेस्कटॉप तो दूर की बात है, एक बेसिक स्मार्ट फोन और हाई स्पीड इंटरनेट, यहाँ तक कि अनइंटरमेटेड पॉवर सप्लाई की सुविधा भी नहीं है।

भारत सरकार ने हालांकि देश में डिजिटल इंफ्रास्ट्रक्चर की बढ़ाने का बहुत प्रयास किया है और हमारे शिक्षा मंत्रालय ने भी ऑनलाइन पोर्टल और डायरेक्ट टू होम टेलीविजन चैनल्स के माध्यम से कई सारे ऐजुकेशनल चैनल्स की शुरुआत की है। लेकिन फिर भी अभी गरीब बच्चों के लिए लैपटॉप, टीवी, रेडियो, टैबलेट आदि ये सारी सुविधाएं बहुत दूर की बात हैं। इसलिए मेरा आपके माध्यम से सरकार से आग्रह है कि ग्रामीण और दूरस्थ क्षेत्रों में रहने वाले गरीब बच्चों के लिए इस कोरोना आपदा काल के समय ऑनलाइन शिक्षा को बढ़ावा देने के लिए कम से कम एक बेसिक स्मार्ट फोन और एक डेटा प्लान उपलब्ध कराने की योजना पर सरकार विचार करे।

धन्यवाद।

माननीय अध्यक्ष: कृपया पुष्पेन्द्र सिंह बन्देल को श्रीमती अनुमिता पटेल द्वारा उठाए गए विषय के साथ संबंधित करने की अनुमति प्रदान की जाती है।

SHRI MOHAMMED FAIZAL P.P. (LAKSHADWEEP): Hon. Speaker, Sir, thank you for allowing me to speak in Zero Hour. Perhaps, Lakshadweep is the only area in the world which is now free from COVID. We have taken so many precautionary measures to get this achievement. But the point which I am going to raise today is that we have taken back nearly 3000 students from across the country to Lakshadweep. The problem which we now face is that the academic year has started and all the universities and colleges have started online classes. As far as Lakshadweep is concerned, I have taken up this issue in Parliament to improve the internet connectivity. The students are going through enormous mental tension as to what their future is and how the Government is planning to carry out this academic year. BSNL is the only
service provider in Lakshadweep. Government of India has given the permission for expanding the bandwidth to 1.72 GB in March 2020. They were supposed to complete the work by August 2020. So far, it has not happened physically in Lakshadweep.

All the students are in a big distress. Their parents are also in a big distress. I would urge the Government to look into the matter as the students are future of our country.

*SHRI K. NAVASKANI (RAMANATHAPURAM):* Hon. Speaker Sir, Vanakkam. In my Ramanathapuram constituency, crop insurance claims made by farmers during the year 2018-19 were not settled in almost 117 villages of Ramanathapuram district. These applications are pending for settlement. As many as 6901 applications of farmers having land of more than 5 acres are pending for settlement. Insurance companies say that the delay in payment of settlement of dues is due to ascertaining irregularities, if any, found in the claims. The District administration of Ramanathapuram, the Tamil Nadu Government, the Union Government and the Ministry of Agriculture have rejected the proposal by the Insurance companies for releasing only 25 percent of the insurance amount to those 117 villages. They have instructed the insurance companies to release 100 percent of the insured amount. I therefore urge that the Union Government should intervene immediately in this matter so as to ensure release of full settlement of crop insurance claims by

*English translation of the Speech originally delivered in Tamil.*
the Insurance companies to all the 6901 applications of farmers owning more than 5 acres of land in the 117 villages of Ramanathapuram district of Tamil Nadu. Ramanathapuram is a drought affected district. It is very challenging for the farmers to engage in agricultural activities in this district. Farmers are in distress due to difficulties faced by them because of drought and other factors. Non-settlement of crop insurance claims is further aggravating their problems. I therefore urge upon the Union Government to instruct the Agriculture Insurance Company of India to immediately settle the crop insurance claims made by farmers of 117 villages of Ramanathapuram district. Thank you.
SHRI MARGANI BHARAT (RAJAHMUNDRY): Thank you Speaker, Sir, for giving me the opportunity to speak in the Zero Hour. My submission is related to the urban affairs. I would request the Government to declare my constituency Rajahmundry as a Smart City.

The rapid growth of almost all cities in the country is inherently unsustainable because many lack core infrastructure like drinking water, solid waste management, shelter, and health facilities, to name a few. To address this problem, the Government of India has started the Smart Cities Mission in the year 2015 and identified 100 cities to be developed as Smart Cities to harness the technology and innovative methods, and to improve the infrastructure and service to such cities to make them smart.

My constituency, that is, Rajahmundry, is located on the banks of River Godavari. As per the survey, it is ranked amongst the oldest cities in the Indian sub-continent. It is called the cultural capital and the ‘Born City’ of Andhra Pradesh. The poet Adikavi Nannaya was born here and gave Telugu script to the country. Being an ancient city, built in 11\textsuperscript{th} Century, Rajahmundry has all the qualities relating to tourism, culture, education, and health centres, etc.
Recently, under the leadership of our hon. Chief Minister, Shri Y. S. Jaganmohan Reddy Garu, the Rajahmundry Municipal Corporation has given a notification for merging of 21 Panchayats. So, Rajahmundry is going to get a ‘greater’ tag.

Hence, I would request the Government of India to identify Rajahmundry as one of the smart cities. Kakinada has already been declared as a smart city. If Rajahmundry is declared as a smart city, both cities can be developed as twin cities like Hyderabad and Secunderabad, which will push the economic activity and will help to achieve the goals set under the Look East Policy of the Government of India.

श्री रविन्द्र कुशवाहा (सलेमपुर): महोदय, मैं अपने संसदीय क्षेत्र सलेमपुर और बलिया के बारे में बताना चाहता हूं। हमारा बलिया जिला उत्तर प्रदेश के अंतिम छोर पर उत्तर प्रदेश और बिहार के बॉर्डर पर है। बलिया में स्वास्थ्य के संबंध में कोई भी अच्छी सुविधा नहीं है। जब वहां के लोग बीमार होते हैं तो गम्भीर बीमारी की स्थिति में उन्हें वहां से 200 किलोमीटर दूर बनास, 200 किलोमीटर दूर पटना या 200 किलोमीटर दूर गोरखपुर जाना पड़ता है। इसलिए माननीय स्वास्थ्य मंत्री जी से हमारी मांग है कि बलिया जिले में सिकन्दरपुर विधान सभा के पूरे ग्राम सभा में 37 एकड़ जमीन मेडिकल कॉलेज के नाम से आरक्षित है। उस जमीन पर मेडिकल कॉलेज की स्थापना की जाए ताकि बलिया जिले के लोगों को उच्च स्तरीय स्वास्थ्य सुविधा उपलब्ध हो सके।

माननीय अध्यक्ष: कुंवर पुष्पेन्द्र सिंह चन्देल को श्री रविन्द्र कुशवाहा द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।
SHRI V.K. SREEKANDAN (PALAKKAD): Hon. Speaker, Sir, the people of Kerala living and stranded, in large numbers, in metropolitan cities like Bengaluru, Chennai, Delhi, Hyderabad, and Mumbai, are unable to come to Kerala and vice-versa due to cancellation of trains. Therefore, the regular and popular trains, which were cancelled from this place, may please be restored.

Secondly, the Thiruvananthapuram – Madurai Amritha Express was cancelled due to lockdown. This was the only train available from Palakkad -- that is, my Parliamentary constituency -- to Trivandrum and Madurai. For the benefit of office goers and short-distance commuters -- who have been badly affected in terms of earning their livelihood due to cancellation of MEMU services -- the services of MEMU trains should be resumed again.

I urge upon the hon. Minister of Railways to look into these three points urgently.
प्रतिपक्ष, सबको बोलने का अवसर दे रहे हैं, तो जब भी भविष्य में कोविड-19 की चर्चा होगी तो इसके लिए भी इस सदन को याद किया जाएगा।

ऐसे दिन आपने सत्र का पहला दिन शुरू किया है जब पूरे देश में हिंदी दिवस मनाया जाता है। आज 14 सितंबर है। यह भी अपने आपमें कुछ संयोग है कि आपने इस सदन को आज ‘हिंदी दिवस’ के दिन शुरू किया है। आज आपने एक बड़ी बात कही कि भारत की जो अन्य भाषाएँ हैं, उन्हें भी सम्मृद्ध किया जाए, उनकी उन्नति के लिए काम किया जाए।

अध्यक्ष जी, इससे बेहतर अवसर नहीं हो सकता, जब में भारत की ऐसी तीन भाषाओं के बारे में कहूं, जो केवल भारत में ही नहीं, बल्कि पूरी दुनिया में बोली जाती है। आज 16 देशों में लगभग 20 करोड़ लोग भोजपुरी बोलते हैं, चाहे वह मॉरीशस हो, त्रिनिदाड एवं टोबैगो हो या गुयाना हो।

आज जब आपकी भाषा राजस्थानी को नेपाल की संविधान सभा मान्यता देती हो, जब भूटान भोटी को मान्यता देती हो तो यकीनन देश के 130 करोड़ लोगों के लिए यह गौरव की बात है कि भारत की तीन भाषाओं को आज अंतर्राष्ट्रीय स्तर पर मान्यता मिली है।

महोदय, आज हमारे शिश्ना मंत्री जी और संसदीय कार्य मंत्री जी मौजूद हैं। मैं आपके कहने पर चाहता हूं कि यह सबसे उचित अवसर होगा कि भोजपुरी, राजस्थानी और भोटी को संविधान की आठवीं अनुसूची में शामिल किया जाए। मॉरीशस की चर्चा पर गीत-गवेशन को यूनेस्को से एक विश्व सांस्कृतिक पहचान की दर्जा मिली है। इसके भारत की संसद भी सम्मानित करेगी। बहुत-बहुत धन्यवाद।

माननीय अध्यक्ष : श्री मलूक नागर, श्री प्रताप सिम्हा, श्री गोपाल शेडी, श्रीमती रेखा वर्मा, कुंवर पुष्पेन्द्र सिंह चन्देल, डा. निशिकांत दुबे तथा श्री सी.पी.जोशी को श्री जगदम्बिका पाल द्वारा उताए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

श्री कोथा प्रभाकर रेड्डी (मेडक): सर, आपने मुझे जीरो ऑवर में बोलने का मौका दिया, इसके लिए मैं आपका धन्यवाद करता हूं।
सर, में नवोदय स्कूल के बारे में चर्चा करना चाहता हूँ। पिछले छह सालों से हम तेलंगाना में नवोदय स्कूल के बारे में कई बार बोल चुके हैं। इसके लिए हमारे सी.एम. साहब भी कई बार माननीय प्रधानमंत्री जी से परसंतती रिक्वेट कर चुके हैं। हमारा तेलंगाना एक नया स्टेट है। हिंदुस्तान के हर राज्य में जिलों के अंतर नवोदय स्कूल्स सेवकाने किए गये हैं। तेलंगाना राज्य एक नया स्टेट है, इसीलिए हम लोग एजुकेशन सिस्टम के पीछे पड़े हुए हैं। हमारे राज्य के अंदर प्राइम मिनिस्टर जी ने भी इसके लिए प्रामिक किया है। हम लोग इस इश्यू को हाजिर में भी कई बार उठा चुके हैं। हम सभी एमचीज़ ने भी कई बार प्राइम मिनिस्टर साहब और मंत्री जी को चिंतित लिखी हैं 

हिंदुस्तान के कई राज्यों में नवोदय स्कूल्स हैं, लेकिन तेलंगाना के 22 डिस्ट्रिक्ट्स में आज तक नवोदय स्कूल्स सेवकाने नहीं हुए हैं।

सर, मेरी आपके माध्यम से माननीय मंत्री जी से रिक्वेट है कि हमारे तेलंगाना के 22 डिस्ट्रिक्ट्स में नवोदय स्कूल कल्त जल्द के जल्द सेवकाने करने जाए। हमारे राष्ट्रमंत्री जी ने भी कहा है कि हमारे पास इंस्ट्रक्टर रेडी है, इसके लिए मजीन भी रेडी है हम हर चीज देने के लिए रेडी हैं। तेलंगाना में नवोदय स्कूल को जल्द जल्द सेवकाने करने के लिए हमारी रिक्वेट है। यह रिक्वेट हम पिछले छह सालों से कर रहे हैं, लेकिन यह आज तक सेवकाने नहीं हुआ। इसके बारे में हमारे सी.एम साहब ने पहरों भी चिंतित लिखी है। हमारी रिक्वेट है कि इसको जल्दी से जल्दी सेवकाने क्या जाए।

श्री श्रीरंग आप्पा बार्णे (मावल): अध्यक्ष महोदय, देशभर में कोरोना की महामायी दिन-प्रतिदिन बढ़ती जा रही है। वैसे तो पूरा विश्व इसका सामना कर रहा है, लेकिन में सदन का ध्यान आकृष्ट करना चाहता हूँ कि महाराष्ट्र में सबसे ज्यादा कोरोना के रोगी हैं। महाराष्ट्र सरकार इस बीमारी का सामना कर रही है, लेकिन केन्द्र सरकार को जितनी सहायता महाराष्ट्र सरकार की जरूरी चाहिए, वह उतनी नहीं कर पा रही है। केन्द्र सरकार द्वारा जी.एसटी की जितनी रकम महाराष्ट्र की राज्य सरकार को देनी चाहिए, वह रकम केन्द्र सरकार ने अभी तक नहीं दी है। महाराष्ट्र सरकार सबसे
यादा टेक्स के रूप में केन्द्र सरकार को भुगतान करती है। आज केन्द्र सरकार से जितनी मांग महाराष्ट्र सरकार कर रही है, उतनी मांग पूरी नहीं हो पाई है।

माननीय अध्यक्ष जी, मैं आपके माध्यम से केन्द्र सरकार से बिनती करता हूँ कि इस बीमारी का सामना करने के लिए महाराष्ट्र सरकार को ज्यादा से ज्यादा सहयोग दी जाए। महाराष्ट्र सरकार को जीएसटी का जितना भुगतान करना है, उतना भुगतान जल्दी से जल्दी महाराष्ट्र सरकार को देने की कोशिश की जाए।

धन्यवाद।

माननीय अध्यक्ष: श्री मलूक नागर, श्री अरविंद सावंत तथा श्री सुनील दत्तात्रय तटकरे को श्री श्रीरंग आप्पा बारें द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

SHRI SUNIL DATTATRAY TATKARE (RAIGAD): Sir, I thank you for allowing me to raise a matter of national interest.

As you are aware, the Life Insurance Corporation of India, which was created through an Act of Parliament with an initial capital of Rs.5 crore, today stands tall with assets worth more than Rs.32 lakh crore. My heart rips to see the reports that the Government has initiated the process of selling 25 per cent of its stake in LIC.

The Department of Investment and Public Asset Management (DIPAM) under the ambit of the Finance Ministry has issued a request for proposal regarding engagement of Pre-transaction Advisors for assisting DIPAM in the process related to IPO of LIC.

Since the expansion has taken place through funds collected from policyholders, LIC has functioned more like a Mutual Benefit Society. Post Corona pandemic when the country is reeling under an economic meltdown, the policyholders, agents, and the loyal workforce of LIC who have tirelessly
contributed towards development of a financial institution of this magnitude and stature, have been opposing the proposed sale of a portion of Government holding for valid and justifiable reasons.

Hon. Speaker, Sir, through you, I would like to urge the Government that LIC must remain 100 per cent under Government of India’s control. I would like to stress again that sale of equity of LIC will severely impact the economy and vulnerable sections of Indian society and the social objective of providing insurance to the weaker sections will receive a severe setback. I hope the suggestions will be taken in a positive frame of mind and considered accordingly.

माननीय अध्यक्ष : श्री डी.एन.वी. सेठिलकुमार एस., श्री श्रीरंग आप्पा बाबू और श्री अरविद सावंत को श्री सुनील दत्तात्रेय तत्त्वके द्वारा उठाए गए विषय के साथ संबंध करने की अनुमति प्रदान की जाती है।

श्री बसंत कुमार पंडा (कालाहाड़ी) : माननीय अध्यक्ष महोदय, आपने आज सत्र के पहले दिन शून्य काल में मुझे बोलने का मौका दिया, इसके लिए बहुत-बहुत धन्यवाद। मैं आपके माध्यम से माननीय उपक्रम मंत्री जी से आग्रह करना चाहूंगा। मैं देश के दो एसिपरेशनल जिले कालाहाड़ी और नुआपड़ा से आता हं। मेरे लोक सभा क्षेत्र में शुआमूल रामपुर है, रामपुर ब्लॉक है, लांजीगढ़ ब्लॉक है। नुआपड़ा जिला में मारागुडा, सुनाबेड़ा, सुसेन, घाटमाल और नंगाबोद, आदि एरियाज में बीएसएनएल टॉवर की असुविधा के कारण लोगों के साथ संपर्क करने में बड़ी दिक्कत होती है। जितने अंचल का मैंने नाम लिया, वे माओइट्स एरियाज हैं। इसलिए मैं आपके माध्यम से मंत्री महोदय से नियेदन करूंगा कि वहां स्टाफ को भेजकर स्पॉट आइडेंटिफाईड करके जल्दी से जल्दी बीएसएनएल टॉवर लगाने की कृपा करें और लोगों को आशीर्वाद दें।
महोदय, आपने मुझे बोलने का मौका दिया, इसके लिए मैं बहुत-बहुत आभार व्यक्त करता हूँ, धन्यवाद।

माननीय अध्यक्ष: माननीय सदस्यों, मेरा सभी दलों के नेताओं से अनुरोध है कि जिन माननीय सदस्यों का शून्य काल की लिस्ट में नाम आता है, उन्हें उस दिन के लिए अपनी पार्टी की सीटों में से कुछ सीटें अगर लोक सभा कक्ष में दे देंगे, तो वह अपनी बात यहां पर बैठकर कह सकते हैं। मैं जानता हूँ कि यह सत्र का पहला दिन है, माननीय सदस्यगण को बोलने में कुछ परेशानियां उठानी पड़ी हैं, लेकिन मैं कोशिश करूँगा कि कल से सत्र को और नियमित कर दिया जाए और सभी माननीय सदस्यों को पयास समय, पयास अवसर मिले, यह मैं प्रयास करूँगा।

डॉ. हर्ष वर्धन जी। ...(व्यवधान)

श्री अधीर रंजन चौधरी: सर, एक मिनट। माननीय रशा मंत्री जी हैं, हमारे फॉर्मर चीफ ऑफ आर्मी भी हैं। मैं यह कहना चाहता हूँ कि जो चीनी साजिश हो रही है, लद्दाख से लेकर अरुणाचल तक चीनी साजिश हमंदेख रहे हैं। ...(व्यवधान)

माननीय अध्यक्ष: माननीय सदस्य। फलीज, नो।

श्री अधीर रंजन चौधरी: यह कहा जा रहा है कि चीन की फोज ने हमारी सरजमी के 1 हजार 7 सौ किलोमीटर को अपने कब्जे में रखा। आज भी 10 हजार ...(व्यवधान)

माननीय अध्यक्ष: आप पयास समय लीजिएगा।

...(व्यवधान)

माननीय अध्यक्ष: गम्भीर संवेदनशील विषय पर, आप सदन के प्लाटर के नेता हैं, हम गम्भीरता से इस पर बीएसी के अंदर चर्चा करेंगे, फिर आपस में बैठकर चर्चा करेंगे।

...(व्यवधान)

श्री अधीर रंजन चौधरी: सर, मुझे कोई इजाम नहीं लगाना है। ...(व्यवधान) सर, हम इस पर चर्चा करने की मांग कर रहे हैं।...(व्यवधान)
माननीय अध्यक्ष : वह बीएसी में करते हैं। आप सीनियर नेता हैं।

डॉ. हर्ष वर्धन जी।

...(व्यवधान)
STATEMENT BY MINISTER
Covid Pandemic and the steps taken by the Government of India

THE MINISTER OF HEALTH AND FAMILY WELFARE, MINISTER OF SCIENCE AND TECHNOLOGY AND MINISTER OF EARTH SCIENCES (DR. HARSH VARDHAN): Hon. Speaker, Sir, thank you for giving me this opportunity. …(Interruptions)

I have briefed this august House on two earlier occasions, once in February and again in March this year on the COVID-19 pandemic. …(Interruptions). I would again like to brief the hon. Members on the current situation of COVID-19 pandemic and the actions taken by the Government of India.

Since my last briefing, the World Health Organization declared COVID-19 a pandemic and asked all countries to take urgent and aggressive action against this public health crisis.

As on 11th September, 2020, 215 countries/territories worldwide are affected. As per WHO, there are more than 2.79 crore confirmed cases across the world with more than 9.05 lakh deaths, with a case fatality rate of 3.2 per cent.

As on 11th September, 2020, a total of 45,62,414 confirmed cases and 76,271 deaths with a case fatality rate of 1.67 per cent have been reported in India. …(Interruptions). As many as 35,42,663 cases, that is, 77.65 per cent have recovered. The maximum cases and deaths have been primarily reported
from Maharashtra, Andhra Pradesh, Tamil Nadu, Karnataka, Uttar Pradesh, Delhi, West Bengal, Bihar, Telangana, Odisha, Assam, Kerala and Gujarat. All these States have reported more than one lakh cases. With our endeavour to manage COVID-19 through a whole of Government and whole of society approach, India has been able to limit its cases and deaths to 3,328 cases and 55 deaths per million population respectively, which is one of the lowest in the world as compared to similarly affected countries. …(Interruptions)

Many of the epidemiological parameters such as mode of transmission, subclinical infection, period of virus shedding, role of immunity etc. are still being researched. Once a person is exposed to the infection, the disease may develop any time between 1-14 days. The main symptoms of COVID are fever, cough and difficulty in breathing. …(Interruptions). In our country, about 92 per cent of the cases …(Interruptions)

माननीय अध्यक्ष : माननीय मंत्री जी आपका वक्तव्य बहुत लम्बा है, सदन भी सहमत है, आपके वक्तव्य को हम ले करा देते हैं, सभी सदस्यों को बांट देंगे। वक्तव्य की मुख्य बातें बोलने के बाद ले करा देते हैं।

DR. HARSH VARDHAN: Sir, I feel that this is a very important issue and each and every Member should be apprised and I think they should have a total thorough knowledge …(Interruptions)

माननीय अध्यक्ष : आपका पूरा भाषण सभी को बांट देंगे, आप इसमें से मुख्य बातें बोल दें।

DR. HARSH VARDHAN: Sir, I will try to finish in 10-15 minutes. You have given so much of time for other things also. …(Interruptions).
Many of the epidemiological parameters such as mode of transmission, subclinical infection, period of virus shedding, role of immunity etc. are still being researched. Once a person is exposed to the infection, the disease may develop any time between 1-14 days. The main symptoms of COVID are fever, cough and difficulty in breathing. ...(Interruptions). In our country, about 92 per cent of the cases are reported to be having mild disease. In only about 5.8 per cent of cases, oxygen therapy is required and the disease may be severe enough to require intensive care in only about 1.7 per cent cases.

The increasing magnitude of this outbreak in India called for a pre-emptive, pro-active, graded, whole-of-Government, whole-of-society approach, built around a comprehensive strategy to prevent infections, save lives and minimize impact.

The Government of India undertook the COVID-19 challenge with the highest level of political commitment. The nationwide lockdown, a bold decision undertaken by the Government duly involving community, initiated as self-imposed Junta Curfew as per the call given by hon. Prime Minister is testimony to the fact that India has collectively stood up to manage COVID-19 and successfully blunted the aggressive progression of COVID. It has been estimated that this decision prevented approximately 14 lakh to 29 lakh cases and 37,000 to 78,000 deaths....(Interruptions) Further, these four months were utilised to create additional health infrastructure, enhance human resource and produce within India critical elements such as PPEs, N-95 masks and ventilators. A case in point is increase in dedicated isolation beds 36.3 times
and dedicated ICU beds above 24.6 times to what existed in March, 2020. Whereas there was no indigenous manufacturing of PPE, with the requisite standards, at that point in time, we are now self-sufficient and, in a position, to even export the same. On behalf of our countrymen, I take this opportunity to congratulate our hon. Prime Minister, Shri Narendra Modi, who personally continues to monitor the situation and provides his leadership. ...(Interruptions)

Government of India has initiated a series of actions to prevent entry of the disease and to contain it. I am daily reviewing the situation. Honourable Prime Minister himself has interacted with the Chief Ministers of all States and UT Administrations and all stakeholders to regularly understand issues and collaborate with the States for effective Covid management. The Group of Ministers under my Chairmanship consisting of Minister of External Affairs, Minister of Civil Aviation and Minister of State for Home Affairs, Minister of State for Shipping and Minister of State for Health and Family Welfare have met 20 times since its inception on 3rd February, 2020. The Committee of Secretaries under the Cabinet Secretary has taken regular reviews with all related Ministries of Health, Defence, External Affairs, Civil Aviation, Home, Textiles, Pharma, Commerce and other officials including State Chief Secretaries....(Interruptions)

Under the overall guidance of the hon. Prime Minister, the Ministry of Home Affairs, Government of India has constituted 11 Empowered Groups on 29th March, 2020 on different aspects of COVID-19 management in the country to take informed decisions on issues ranging from (i) medical emergency
planning, (ii) availability of hospitals, isolation and quarantine facility, disease surveillance and testing, (iii) ensuring availability of essential medical equipment, (iv) augmenting human resource and capacity building, (v) supply chain and logistic management, (vi) coordination with private sector, (vii) economic and welfare measures, (viii) information, communications and public awareness, (ix) technology and data management, (x) public grievance and (xi) strategic issues related to lockdown. (Interruptions) These Groups have recently been restructured on 10th September based on the need and evolving scenario. (Interruptions)

My own Ministry is constantly reviewing the evolving scenario. Video conferences are being held with States regularly. We have held 63 video conferences so far with State Health Ministers, Health functionaries and district level officials. The Joint Monitoring Group (JMG) under the Chairmanship of Director General, Health Services which advises the Ministry on technical matters has met 40 times till now to assess the risk, review the preparedness and response mechanisms and finalise technical guidelines.

The Government of India, based on its experience of successfully managing pandemics and epidemics in the past, provided the requisite strategy, plans and procedures to the State Governments and UT Administrations. This includes containment plans and guidelines on a wide range of subjects related to travel, behavioural and psycho-social health, surveillance, laboratory support, hospital infrastructure, clinical management,
rationale use of Personal Protective Equipment (PPE) etc. including inspirational guidance for healthcare personnel.

Government of India has also taken several other measures to contain/suppress the transmission of Covid. First Travel Advisory was issued on 17\textsuperscript{th} January, 2020 and as situation evolved, the travel advisories were revised in a graded manner. Universal screening of passengers from all countries was introduced and up to 23\textsuperscript{rd} March, 2020 (till suspension of all commercial flights), a total of 14,154 flights with 15,24,266 passengers were screened at the airports. In addition to airports, about 16.31 lakh persons were screened at land border crossings and about 86,379 persons were screened at 12 major and 65 minor sea ports.

Presently, Government of India has advised no scheduled international commercial passenger aircraft be allowed to take off from any foreign airport for any airport in India, from March 22, 2020 except under Vande Bharat Mission on May 7\textsuperscript{th} 2020, which aims to bring home stranded Indians in many countries due to Covid-19 pandemic. Temporary air travel arrangements (Transport Bubbles) between India and 9 other mutually consenting countries aimed at restarting commercial passenger services have commenced. They are reciprocal in nature, meaning airlines from both countries enjoy similar benefits. Guidelines for International arrivals have also been issued by the Ministry on 24\textsuperscript{th} May, 2020, which were revised on 2\textsuperscript{nd} August, 2020.

Prior to the lockdown 1.0, Government of India evacuated Indian nationals from Wuhan in China, Diamond Princess Cruise Ship, Japan, Iran,
Italy and Malaysia. Under Vande Bharat Mission, as reported on 11th September, 2020, a total of 12,69,172 passengers have been brought back to India.

Community surveillance was initiated initially for travel related cases and subsequently for cases being reported from community by Integrated Disease Surveillance Programme (IDSP). As on 11th September 2020, a total of about 40 lakh persons have been kept under surveillance and extensive contact tracing of all positive cases is regularly being undertaken through disease surveillance network so as to break the chain of transmission.

Ministry of Health & Family Welfare released containment plans to contain cluster and large outbreaks on 2nd March and 4th April, 2020 respectively and these plans were updated from time to time. The containment plans envisage a strategy of breaking the chain of transmission by (i) defining containment and buffer zones, (ii) applying strict perimeter control, ...(Interruptions)

*DR. HARSH VARDHAN*: (iii) Intensive active house to house search for cases and contacts, (iv) isolation and testing of suspect cases and high risk contacts, (v) quarantine of high risk contacts, (vi) intensive risk communication
to raise community awareness on simple preventive measures and need for prompt treatment seeking and (vii) strengthening of passive Influenza Like Illness (ILI)/ Severe Acute Respiratory Illness (SARI) surveillance in containment and buffer zones.

With the evolving scenario, laboratory network is continuously being strengthened. From a situation of a single laboratory equipped to undertake testing for Covid in January, presently 1705 laboratories are conducting COVID-19 Testing. Laboratories have been established in difficult terrains like Ladakh, Sikkim, Arunachal Pradesh, Nagaland as well as other North Eastern states, Lakshadweep and Andaman & Nicobar island. Currently the testing is about 1 million tests a day (which translates to 720 tests per million population per day), much higher than that stipulated by WHO which is 140 tests per million population per day. A total of 5,51,89,226 samples have been tested so far as on 11th September 2020. While there were no indigenous manufacturers of laboratory diagnostics or testing machines for Covid, today we have an indigenous production capacity of more than 10 lakh kits/day.

For appropriate management of COVID-19 cases, a three tier arrangement of health facilities [(i) COVID Care Centre with isolation beds for mild or pre-symptomatic cases; (ii) Dedicated COVID Health Centre (DCHC) with oxygen supported isolation beds for moderate cases and (iii) Dedicated COVID Hospital (DCH) with ICU beds for severe cases] has been implemented. Tertiary care hospitals under ESIC, Defence, Railways,
paramilitary forces, Steel Ministry etc. have been leveraged for case management.

As on 12th September, 2020, a total of 15,284 COVID treatment facilities with 13,14,646 dedicated isolation bed without O₂ have been created. Also, a total of 2,31,093 oxygen supported isolation beds and 62,717 ICU beds (including 32,575 ventilator beds) have been created. Constant monitoring of the disease trend, analysis of available infrastructure and planning in advance for the future has averted a major crisis as was faced by many developed countries. In addition, a total of 12,826 quarantine centres with 5,98,811 beds have been created.

Guidelines on Clinical management of COVID-19 were issued and regularly updated & widely circulated. These include case definition, prevention of infection control, laboratory diagnosis, early supporting therapy, management of severe cases and complications. No specific antivirals have been proven effective so far. Symptomatic treatment for fever and cough, appropriate rehydration, supplemental oxygen therapy remains the mainstay of treatment. We have re-purposed the drug Hydroxychloroquine for mild (but high-risk cases) and for moderate cases. This was done with limited scientific evidence but well acknowledging that this drug has been used widely in India for other ailments where it is used for prolonged periods of time, with good safety profile.
In addition, provisions for investigational therapies has also been made for using Remdesivir, Convalescent plasma and Tocilizumab for managing severe cases under close medical supervision.

With the intent to ensure dissemination of these standard treatment protocols and reduce mortality to maximum extent, a number of initiatives have been launched. An AIIMS Corona helpline 9971876591 has been started to guide the doctors on medical management. AIIMS Delhi is running the COVID-19 National Tele-consultation Centre (CoNTeC) which can be reached by calling +91-9115444155. It is catering to doctors, from anywhere in the country, who want to consult AIIMS faculty for the management of COVID-19 patients, as well as to the public in general. Telemedicine guidelines have been issued on 25.03.2020 to provide tele-consultation to patients for mitigation of their illness and prevention of crowding in clinics. It may also help in triage, treatment and counselling for care of ill patients by healthcare providers in areas with limited access.

A clinical Centre of Excellence (CoE) initiative has also been launched by Ministry of Health & FW with AIIMS, Delhi as apex nodal institution and State level CoEs to provide guidance on clinical management protocols. Weekly webinars are being organized by AIIMS to guide these State level CoEs on crucial clinical issues that doctors may require guidance on managing Covid cases. These State level CoEs are expected to further disseminate these in their districts.
To ensure accessibility of quality treatment for both Covid and non-Covid health issues, to far flung areas, use of telemedicine has been promoted in a big way. 'eSanjeevani', a web-based comprehensive telemedicine solution is being utilized (in 23 states) to extend the reach of specialized healthcare services to masses in both rural areas and isolated communities.

ICMR is establishing a National Clinical Registry on COVID that will provide insights into clinical course of COVID-19 disease, its spectrum and outcome of patients.

Thirteen clinical trials of repurposed drugs and harnessing of traditional knowledge using the modern medicine approach are building a portfolio of therapeutic options for Covid-19 patients. Phase 2 clinical trial of immunomodulator Sepsivac has been completed successfully. Phase 2 clinical trial of the first-ever phytopharmaceutical ACQH is underway. One prophylactic trial of Aswagandha and three trials of Guduchi + Pippali; Yashtimadhu; and polyherbal AYUSH drug (AYUSH-64) are planned on moderately ill Covid19 patients.

An effective vaccine would be the sure shot tool in armamentarium against this disease. On this front, globally, there are around 145 candidate vaccines in preclinical evaluation and currently 35 vaccines in clinical trial. In India, a major focus has been on facilitating the development of COVID19 vaccine. More than 30 vaccine candidates have been supported which are in
different stages of development, 3 candidates are in advanced stage of Phase I/II/III trials and more than 4 are in advanced pre-clinical development stage.

COVID19 Biorepositories have been setup, which have collected more than 40,000 samples which have been made available to researchers and industry for developing diagnostics, therapeutics and vaccines.

To coordinate procurement and distribution of Covid vaccine, Government of India has constituted a National Expert Group on Vaccine Administration for COVID-19 on 7th August, 2020, under the Chairmanship of Member (Health), NITI Aayog.

Ministry of AYUSH has contributed through various measures for the management and mitigation of Covid-19. The Ministry recommended guidelines of self-care for preventive health measures and boosting immunity. Ministry of AYUSH has also issued health advisories from different systems of medicine on prophylaxis and immunity promotion which was translated into eight foreign languages and circulated to Indian Embassies. Various AYUSH Hospitals were designated as quarantine centres, isolation centres, Covid Care Centres and Covid Health Centres. Around 8.5 lakh Ayush healthcare professionals have been registered on covidwarriors.gov.in. Ministry of AYUSH has formed an “Inter-disciplinary AYUSH R&D Task Force”. The Task Force has formulated and designed clinical research protocols for AYUSH prophylactic studies and add-on interventions in COVID-19 positive cases. AYUSH-CSIR collaborative studies were initiated with AYUSH medicines for
prophylaxis/treatment. A largescale population-based study through AYUSH Research Councils and National Institutes under the Ministry on prophylaxis of AYUSH interventions in targeted populations in containment zones is underway. Ministry of AYUSH has also initiated impact assessment of effectiveness, acceptance and usage of AYUSH advisories & measures in prevention of COVID 19 through a mobile application app known as AYUSH-Sanjivani app.

States have been requested to assess the stock of their logistic, particularly Personal Protective Equipment and procure the same. Total orders for 1.92 crore PPEs have been placed by the Central Government so far. The Ministry has already supplied 1.39 Crore PPE Kits and 3.43 crore N95 masks to States (as on 11th September, 2020).

Department of Pharmaceuticals increased the production of drug hydroxychloroquine manifold. As on 11th September, 2020, MoHFW has issued 10.84 crore tablets of Hydroxychloroquine to States/UTs. India has also exported it to more than 140 countries.

The Central Government has already issued orders to purchase 60,948 ventilators to meet any contingencies. As on 11th September 2020, 32,109 ventilators have been allocated to States of which 30,170 have been delivered. The country is self-sufficient in oxygen and oxygen cylinders. Ministry of Health & Family Welfare has procured & supplied 1,02,400 oxygen cylinders to various States/UTs so far. In addition, oxygen concentrators are also being supplied to States.
One of the major challenges was to identify and train a large number of Covid warriors across sectors and departments that can be involved in not only COVID related work but also for ensuring maintenance of other essential medical services. Pooling manpower resources has been done from Defence, AYUSH, NCC, NSS, NYK, public sector enterprises, and private sector.

In spite of various constraints and challenges, the Covid warriors rose to the occasion in serving humanity. The country feels indebted to the doctors, nurses, paramedics, frontline field workers, security and police personnel, sanitary workers, volunteers and journalists who have worked tirelessly to protect our countrymen from Covid. I would request the August House to place on record the appreciation for the yeoman services delivered by them.

There had been instances where healthcare service personnel had to face harassment, acts of violence, intimidation and danger to life during discharge of their duties. To overcome this and support their efforts, Government of India promulgated Epidemic Diseases (Amendment) Ordinance, 2020 on 22\textsuperscript{nd} April 2020.

To build the capacities of human resources including the medical manpower who help managing patients in hospitals; as well as non-medical personnel and field workers involved in surveillance, logistics etc., modules have been made available on iGOT - Diksha (online platform) by DOPT (https://igot.gov.in/igot/). The training modules have been translated to regional languages. Close to 29.15 lakh people have registered for various courses. This includes 5,699 doctors, 86,018 AYUSH Professionals, 4,102 Nurses, 963
Allied Health Professionals, 5,881 frontline workers, 2,70,736 volunteers and 25,42,892 other participants. About 18.96 lakh course completions have taken place on iGOT – Diksha platform. Training Resources for medical and non-medical personnel have also been made available on the website of Ministry of Health & Family Welfare.

We have now moved from ‘managing travel related cases’ to containing clusters and large outbreaks due to local transmission to wide spread of infection to urban, peri-urban and rural areas. This would require concerted effort by the Government with people’s participation to prevent large scale morbidity and mortality. Equally crucial is to maintain the success achieved in management of reproductive maternal and child health, vaccine preventable diseases, non-communicable diseases, tuberculosis, vector borne diseases such as Kala Azar and Malaria. Hence there is an increased thrust for managing non-Covid essential services.

MoHFW website is being updated daily to provide general public with information on current status of COVID-19 spread in India. Regular press releases are being issued and press briefings are being held.

Communication material and toolkits have been developed (pamphlets, poster, audio and AV films) and provided to the States/UTs on COVID-19 disease, preventive steps required to be taken by the communities, handling of myths and stigma related to disease and to widely publicize the helpline numbers available. Communication material is also being hosted on MoHFW website and through social media. Dos and Don’ts are being widely circulated
through SMS (550 crore SMSs have been sent). Caller-tune messages are being sent to telecom subscribers in 13 languages and 117 crore subscribers have been reached.

A dedicated call centre / helpline (1075) had been started in the initial days to guide community at large which is being used by the citizens very effectively and on a regular basis. A total of 41.04 lakh calls have been received so far.

Department of Bio Technology, Department of Science and Technology, CSIR and Department of Health Research covered the entire chain of scientific and technological solutions holistically for COVID-19 through academia, R&D labs, industry, start-ups and NGOs. These solutions include basic scientific studies on the behaviour, transmission and effects of virus, mathematical modelling of the pandemic, and products such as the world class ventilators, diagnostic kits, vaccines, therapeutics, antiviral coatings, disinfectants, PPEs, masks, mobile testing booths and hospitals, artificial intelligence based tools, and information dissemination to masses.

For these purposes, a comprehensive mapping of our entire start-up ecosystem was done to identify and support over 110 technology start-ups and over 20 industries for commercial production. Over 150 projects in all areas of virus behaviour have been initiated.

Government of India is regularly coordinating with WHO headquarters, regional office and country office to get updates on evolving scenario.
Government of India has also provided support to other countries in tackling the challenge posed by the Covid. India has played a major role in shaping up G20 and BRICS response to Covid. India is also extending support wherever required to neighbouring SAARC countries.

The Government is proactively identifying gaps and building an Atmanirbhar Bharat that will be able to take challenges of similar pandemics, epidemics and disasters in future. An Expenditure Finance Memorandum of Rs. 65,560.98 Crores under Prime Minister Atmanirbhar Swasth Bharat Yojana for strengthening is under consideration. This includes investment in research, healthcare and public health infrastructure with particular focus on pandemic management.

I would urge all Hon’ble members of Parliament that battle for Covid is still far from over. On one hand, when we are in stage of Unlock so as to revive economy, and have a balanced approach, it is important that sustained community support is ensured consistently to control the spread of Covid infection & break its chain of transmission.

Your support is crucial to create awareness in your respective constituencies for Covid Appropriate Behaviour. The simple public health measures of wearing of mask/face covers, frequent handwashing, respiratory etiquettes, and physical distancing “2-gaj ki doori” as a social vaccine, if practiced in a responsible manner, will help us control/suppress the transmission of Covid.
I wish to inform this house that the Government is taking all necessary measures to prevent spread of the COVID in India.*

[Placed in Library, See No. LT 2477/17/20 ]

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DEMANDS FOR SUPPLEMENTARY GRANTS, 2020-2021

Statement

THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS
(SHRIMATI NIRMALA SITHARAMAN): Sir, I beg to present a statement
(Hindi and English versions) showing Supplementary Demands for Grants –
First Batch for 2020-2021.

[Placed in Library, See No. LT 2478/17/19]

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DEMANDS FOR EXCESS GRANTS, 2016-2017

Statement

THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS
(SHRIMATI NIRMALA SITHARAMAN): Sir, I beg to present a statement
(Hindi and English versions) showing Demands for Excess Grants for 2016-
2017.

[Placed in Library, See No. LT 2479/17/19]

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THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS
(SHRIMATI NIRMALA SITHARAMAN): Sir, I beg to move for leave to withdraw a Bill further to amend the Banking Regulation Act, 1949.

HON. SPEAKER: Motion moved:

“That leave be granted to withdraw a Bill further to amend the Banking Regulation Act, 1949.”

SHRI N. K. PREMACHANDRAN (KOLLAM): Hon. Speaker, Sir, first of all, I would like to appreciate the hon. Speaker and the Lok Sabha Secretariat for making this wonderful arrangement to have the Parliament Session in the midst of this pandemic situation. So, we are all grateful to the hon. Speaker as well as the Lok Sabha Secretariat for this wonderful arrangement. Thank you very much Sir.

Sir, I oppose the Bill to be withdrawn by the hon. Finance Minister. Why am I opposing? I fully agree with the Government that under Rule 110 the Government is having ample authority and power which states that a Member, at any stage of the Bill, can withdraw the Bill with the leave of the House. I fully agree with it. In this case, the Banking Regulation (Amendment) Bill, 2020 was introduced in the House on 3rd March, 2020 and it was not passed in that Session because of the pandemic. But on 26th June, 2020, an ordinance, that is, the Banking Regulation (Amendment) Ordinance was promulgated by the
hon. President under Article 123 (1) of the Constitution of India. Today the hon. Finance Minister is coming with a motion to withdraw the Bill. What is Article 123 (1) of the Constitution of India? I have elaborated that provision many times here and so, I need not elaborate it again now. An ordinance is promulgated when the President is satisfied that the circumstances exist which render it necessary for him to take urgent action or immediate action. In that circumstance, he will promulgate an ordinance when the Parliament is not in Session. So, normally an ordinance is promulgated only in extraordinary situations when the Government wants to make some legislation.

But now, the hon. Finance Minister comes here to withdraw the Bill. So, I would like to know from the hon. Finance Minister as to what is the fate of the ordinance, that is, Ordinance No. 12 of 2020. I would also like to know from the hon. Minister as to what was the emergency or urgency or the extraordinary situation prevailing so as to promulgate an ordinance as she is simply withdrawing the Bill.

Sir, my point is, when the Government makes a legislative proposal, the long-term interest of the society has to be taken into account. She brought the Bill without applying the legislative wisdom. So, lack of seriousness on the part of the Government in legislative process is well proved in this case. You are introducing a Bill, subsequently you are promulgating an ordinance and after promulgation of the ordinance you are again coming to the House and seeking the leave of the House to withdraw the Bill. That means, the Parliament and the Presidential power under Article 123 (1) of the Constitution, everything is
taken for granted. So, this is a clear case of misuse of constitutional power under Article 123 and also the provisions of the Rules of Procedure and Conduct of Business in Lok Sabha.

Hence, I oppose the motion to withdraw the Bill.

SHRIMATI NIRMALA SITHARAMAN: Hon. Speaker, Sir, I fully appreciate the hon. Member's concern. Yes, we did come with a Bill on 3rd March, 2020 and subsequently an ordinance was promulgated because the Session was not there to discuss the Bill and pass it. Why did the ordinance become necessary? We were going through a pandemic and there was stress in several cooperative banks. As a result of it, it was felt that till we clear the Bill there should not be a situation where many of the cooperative banks would suffer and, therefore we brought in an ordinance with essential features of the Bill which was tabled in the House in March. That is how the ordinance was necessitated, duly considered and given the consent by the hon. President.

But now, why are we coming here for withdrawal of the Bill? I am very appreciative of the hon. Member for raising this question which is absolutely right. This will be a question which arises in the minds of the people. But now what we are bringing, after withdrawing that Bill which came in the form of ordinance, is essentially what the Bill of March, 2020 had, together with a few things added in such as giving the Reserve Bank a chance to be able to restructure any distressed cooperative banks just in case they are in severe distress.
I can give you the data of a number of cooperative banks, which are in distress. All of us know, all hon. Members here know that when a bank is put in a freeze, the customers suffer. Till today the memory of PMC is there; and today, the PMC issue is getting resolved. We do not want a situation where banks are being held in a frozen situation, and the customers are being put to a difficulty.

Sir, I would not think, it is out of place for me, to here remind all the hon. Members, the way in which the Reserve Bank sorted the problem of Yes Bank. It will tell you how within a short period, reconstruction of the bank was made possible; and that was because it was a commercial bank. Whereas cooperative banks, unfortunately, do not have that situation, which can help them to quickly resolve.

So, this Bill, which we are bringing in the place of the original Bill, is essentially having all the features of the original Bill, but it is not exactly the same because together with that, a few things are being added so that citizens/depositors do not face similar situation as has arisen out of the PMC problem. So, cooperative banks can also benefit from it.

Therefore, Sir, through you, I would like to appeal to the Member to allow consideration and withdrawal of this Bill, and kindly request him to withdraw his objections.
माननीय अध्यक्ष: प्रश्न यह है:

"कि बैंककारी विनियमन अधिनियम, 1949 का और संशोधन करने वाले विधेयक को वापस लेने की अनुमति प्रदान की जाए।"

...(यवधान)

माननीय अध्यक्ष: आप ‘नो’ कह रहे हैं, लेकिन आप विधेयक को पूरा पढ़िए। वह इस देश की जनता के हित का विधेयक है।

श्री असादुद्दीन ओवेसी (हैदराबाद): सर, ...*(यवधान)

माननीय अध्यक्ष: हां, मैं बोल रहा हूँ। मैंने पूरा विधेयक पढ़ा है।

...(यवधान)

श्री असादुद्दीन ओवेसी: सर, ...*(यवधान)

माननीय अध्यक्ष: मुझे कुछ बोलना पड़ेगा।

...(यवधान)

माननीय अध्यक्ष: प्रश्न यह है:

"कि बैंककारी विनियमन अधिनियम, 1949 का और संशोधन करने वाले विधेयक को वापस लेने की अनुमति प्रदान की जाए।"

प्रस्ताव स्वीकृत हुआ।

SHRIMATI NIRMALA SITHARAMAN: Sir, I withdraw the Bill.

* Not recorded as ordered by the Chair.
GOVERNMENT BILLS .... Introduced

(i)Salary, Allowances and Pension of Members of Parliament (Amendment) Bill, 2020


SHRI PRALHAD JOSHI: I introduce the Bill ...(Interruptions)

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* Published in the Gazette of India, Extraordinary, Part-II, Section-2, dated 14.09.2020
STATEMENT RE: SALARY, ALLOWANCES AND PENSION OF MEMBERS OF PARLIAMENT (AMENDMENT) ORDINANCE, 2020*

THE MINISTER OF PARLIAMENTARY AFFAIRS, MINISTER OF COAL AND MINISTER OF MINES (SHRI PRALHAD JOSHI): Sir, I beg to lay on the Table an explanatory Statement (Hindi and English versions) showing reasons for immediate legislation by promulgation of the Salary, Allowances and Pension of Members of Parliament (Amendment) Ordinance, 2020 (No. 3 of 2020).

* Laid on the Table and also placed in Library, See No. LT 2480/17/20
11.54 hrs

GOVERNMENT BILLS – Introduced ...Contd.

(ii) Essential Commodities (Amendment) Bill, 2020

there could also be some States where the business of hoarding is so rampant that the State Governments may wish to regulate and place stock limits.

Published in the Gazette of India, Extraordinary, Part-II, Section-2, dated 14.09.2020
Hence, respecting the principle of federalism, the amendment must apply only if the State Government by notification applies that amendment in its State. हमारे संघीय ढांचे में जिस तरह से यह बिल पेश किया जा रहा है, मैं उसका विरोध करता हूँ।

SHRI GAURAV GOGOI (KALIABOR): Thank you, hon. Speaker, Sir. First, with regard to the legislative competence of the Bill, the Essential Commodities Act, the State Government could regulate the prices by fixing them in a situation of price rise. This Bill deregulates certain commodities thus depriving the State Governments of this control. This deprivation of this essential responsibility comes without any consultation with States. This impingement on State powers without any consultation renders the Bill *ultra vires*.

Secondly, Sir, this Bill is extremely subjective. The Bill does not define extraordinary circumstances under which the Government may regulate. It also does not define the two situations of 100 per cent increase in retail price of horticulture produce and 50 per cent increase in retail price of non-perishable agricultural food when its stock price may be imposed.

This creates room for arbitrary and subjective interpretation. Additionally, the lack of stock limit allows corporates and traders with capacity and resources to hoard the commodities. Hoarding of these commodities will allow them to manipulate the market. Shortage of supply created by such hoarding will have two adverse consequences. Firstly, it will cause the prices to exorbitantly increase.

Therefore, I request that this Bill should not be introduced.
PROF. SOUGATA RAY (DUM DUM): Sir, under Rule 72(1), I oppose the introduction of the Essential Commodities (Amendment) Bill, 2020. I have given a Statutory Resolution against the Ordinance which will be taken up later.

Sir, I want to mention that this is an example of coercive federalism by the Central Government. जबरदस्ती स्टेट से पावर ली जाती है। Before, Sir, the States had the power to regulate stocks being kept by people. It was necessary for avoiding hoarding and black-marketing or seasonal shortages during floods or droughts. This power was wholly with the State Government.

Now, this power is being taken over by the Central Government and the powers of the State Governments to regulate have been circumscribed. The power to fix stock limits has been rendered illusory. Through a provision and an explanation clause, the Ordinance has rendered the concept of stock limit illusory and meaningless. If the Ordinance becomes an Act, hoarders will celebrate. This is to help the hoarders.

माननीय अध्यक्ष : मंत्री जी, व्या आप इस बिल के बारे में कुछ बोलना चाहते हैं?
श्री दानवे रायसाहब दादाराव : अध्यक्ष जी, जब इस बिल की चर्चा होगी, तब सरकार की तरफ से सारे प्रश्नों के उत्तर दिए जाएंगे। लेकिन मैं आपके माध्यम से सम्मानित सदस्य को बताना चाहता हूँ कि यह आर्डिनेंस 5 जून, 2020 को लाया गया। उस समय पूरे देश में महामारी थी और लॉकडाउन घोषित था। उस समय किसानों की फसलें कटी हुई थीं, लेकिन कोई खरीदार नहीं था। व्यापारियों द्वारा माल उठाने में दिक्कतें थीं।
12.00 hrs

दूसरी ओर उसकी मांग बढ़ रही थी। इसलिए किसानों को केंद्र बिन्दु मान कर यह ऑडिनेस्लाया गया था। इन परिस्थितियों में यह आवश्यक था कि किसानों को अपनी उपज बेचने का अवसर प्रदान हो और कंजूमर्स को आवश्यक वस्तुएं आसानी से मिले। इसलिए यह ऑडिनेस्लाया गया था।

अध्यक्ष महोदय, अभी माननीय सदस्य ने कहा है कि इस ऑडिनेस्लाय के लिए राज्यों के विचार नहीं लिए गए हैं। मैं आपके माध्यम से माननीय सदस्य को सूचित करना चाहता हूँ कि यह ऑडिनेस्लायाने से पहले राज्यों के मुख्यमंत्रियों की एक हाई पावर कमेटी बनाई गई थी और उस कमेटी में पंजाब, ओडिशा, हरियाणा, अरुणाचल प्रदेश और उत्तर प्रदेश के मुख्यमंत्री थे। उन मुख्यमंत्रियों ने इस समस्या के सभी बिन्दुओं पर चर्चा करने के बाद निर्णय किया है कि यह बिल आना चाहिए। मुझे ऐसा लगता है कि इसमें कोई संदेह नहीं है कि इस बिल के कारण किसानों पर कोई अन्याय भी नहीं होगा।

माननीय अध्यक्ष : प्रश्न यह है:

“कि आवश्यक वस्तु अधिनियम, 1955 का और संशोधन करने वाले विवेधक को पुर:राजापित करने की अनुमति प्रदान की जाए।”

प्रस्ताव स्वीकृत हुआ।

श्री दानवे राधाशेष दादाराव: अध्यक्ष महोदय, मैं विवेधक को पुर:राजापित करता हूँ।

...(व्यवधान)
THE MINISTER OF HEALTH AND FAMILY WELFARE, MINISTER OF SCIENCE AND TECHNOLOGY AND MINISTER OF EARTH SCIENCES (DR. HARSH VARDHAN): Respected Sir, I beg to move for leave to introduce a Bill for the regulation and supervision of the assisted reproductive technology clinics and the assisted reproductive technology banks, prevention of misuse, safe and ethical practice of assisted reproductive technology services and for matters connected therewith or incidental thereto.

DR. SHASHI THAROOR (THIRUVANANTHAPURAM): Thank you very much, hon. Speaker. I do wish to oppose the introduction of the Assisted Reproductive Technology (Regulation) Bill on six grounds, very briefly. Firstly, the Bill violates the right to equality provided under Article 14 of the Constitution as it discriminates against unmarried couples and those belonging to the LGBT community by limiting access to assisted reproductive technology

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only to married heterosexual couples. Secondly, it stipulates an arbitrary restriction by only allowing ever married women who are mother to at least one child to be oocyte donors. Thirdly, it does not create adequate safeguards for the donor. It remains silent on the health risks associated with participation in this process and does not provide for any compensation in the case of mishap. Fourthly, it promotes arbitrariness by permitting the Central and State Governments to issue directions to the entities established under the Bill without placing an onus on the Governments to specify reasons for issuance of such directions. Fifthly, it lacks proportionality while penalising offences. For instance, the same punishment of a minimum of eight years of imprisonment has been prescribed for serious offences as well as for any contravention of the Bill’s provisions or the rules made thereunder. Finally, the Bill will give rise to inconsistencies in practices governing the subject because there is no synchronisation in this Bill between the provisions of this Bill and that of the Surrogacy (Regulation) Bill, 2019.

For these reasons, I wish to oppose the motion of introduction for this Bill. It is not ready for submission. I would urge the Minister to undertake a detailed discussion with experts, incorporate recommendations, look at the Surrogacy Bill that he himself passed here and bring the new Bill back to the House with necessary amendments.

Thank you, Mr. Speaker.

माननीय अध्यक्ष : माननीय मंत्री जी, क्या आप कुछ कहना चाहते हैं?
DR. HARSH VARDHAN: Dear Shashi Tharoor ji is talking about the merits of the Bill. You see, when we were discussing the Surrogacy Bill, many Members used to say that why do you not bring the Assisted Reproductive Technology Bill prior to that. This was the general observation. Now, when the Bill has been brought, if he had mentioned about the legislative competence, I think we are very much within the legislative competence to introduce this Bill. When the discussion will take place about this Bill, I will answer all the queries which have been posed by Mr. Shashi Tharoor.

माननीय अध्यक्ष : प्रश्न यह है:

“कि सहायता प्राप्त जननीय प्रौद्योगिकी विलिनिकों और सहायता प्राप्त जननीय प्रौद्योगिकी बैंकों का विनियमन और पर्यवेक्षण करने के लिए, सहायता प्राप्त जननीय प्रौद्योगिकी सेवाओं के दुरुपयोग के निवारण, उनका सुरक्षित और नीतिक व्यवसाय करने के लिए तथा उससे संबंधित या उसके आनुष्ठानिक विषयों का प्रबंध करने वाले विचेष्यक को पुर:स्थापित करने की अनुमति दी जाए।"

प्रस्ताव स्वीकृत हुआ।

माननीय अध्यक्ष : माननीय मंत्री जी, अब विचेष्यक को पुर:स्थापित कीजिए।

DR. HARSH VARDHAN: Sir, I introduce the Bill.

* Introduced with the recommendation of the President.
THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS
(SHRIMATI NIRMALA SITHARAMAN): I beg to move that leave be granted to introduce a Bill to ensure financial stability and promote competitiveness in Indian financial markets by providing enforceability of bilateral netting of qualified financial contracts and for matters connected therewith or incidental thereto.

SHRIMATI NIRMALA SITHARAMAN: I introduce the Bill.
माननीय अध्यक्ष: माननीय सदस्य, नोटिस 10 बजे देते हैं।

...(व्यवधान)

12.07 hrs

(v) Farmers' Produce Trade and Commerce (Promotion and Facilitation) Bill, 2020

माननीय अध्यक्ष : आईटम नम्बर 14, श्री नरेन्द्र सिंह तोमर जी।

कृषि और किसान कल्याण मंत्री; ग्रामीण विकास मंत्री तथा पंचायती राज मंत्री (श्री नरेन्द्र सिंह तोमर): माननीय अध्यक्ष महोदय, मैं प्रस्ताव करता हूं कि ऐसे पारिष्ठिक तंत्र के सृजन का वहां, जहां कृषक और व्यापारी, ऐसी कृषक उपज के, विक्रय और क्रय संबंधी चयन की स्वतंत्रता का उपभोग करते हैं, जो प्रतिस्पर्धात्मक वैकल्पिक व्यापारिक चैनलों के माध्यम से लाभकारी कीमतों को सुकर बनाता है, का उपबंध करने के लिए; बाजारों के भौतिक परिसर या विभिन्न राज्य कृषि उपज बाजार संबंधी विधानों के अधीन अधिसूचित समझे गए बाजारों के बाहर कृषक उपज का दक्ष, पारदर्शी और निर्बाध अंतराष्ट्रिय और अंत:राष्ट्रीय व्यापार और वाणिज्य के संवर्धन के लिए; इलेक्ट्रॉनिक व्यापार के लिए सुसाध्य ढांचे का और उससे संबंधित या उसके आनुषंगिक विषयों का उपबंध करने वाले विधेयक को पुर:स्थापित करने की अनुमति प्रदान की जाए।

माननीय अध्यक्ष : प्रस्ताव प्रस्तुत हुआ:

"कि ऐसे पारिष्ठिक तंत्र के सृजन का वहां, जहां कृषक और व्यापारी, ऐसी कृषक उपज के, विक्रय और क्रय संबंधी चयन की स्वतंत्रता का उपभोग करते हैं, जो प्रतिस्पर्धात्मक वैकल्पिक व्यापारिक चैनलों के माध्यम से लाभकारी कीमतों को सुकर बनाता है, का उपबंध करने के लिए; बाजारों के भौतिक परिसर या विभिन्न राज्य कृषि उपज बाजार संबंधी विधानों के अधीन अधिसूचित समझे गए बाजारों के बाहर कृषक उपज का दक्ष, पारदर्शी और निर्बाध अंतराष्ट्रिय और अंत:राष्ट्रीय व्यापार और वाणिज्य के संवर्धन के लिए; इलेक्ट्रॉनिक व्यापार के"

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I do vehemently oppose the introduction of this legislative document. The reasons are loud and clear. The Farmers’ Produce Trade and Commerce (Promotion and Facilitation) Bill, 2020 seeks to replace the Farmers’ Produce Trade and Commerce (Promotion and Facilitation) Ordinance, 2020. The Ordinance was promulgated on 5th June, 2020. My main objection is that Parliament lacks legislative competence to legislate on this subject because the subject Agriculture is a State subject and is in the Entry 14. Moreover, the subject ‘Markets and Fairs’ is also in the State list and is in the Entry 28 of the list 2.

The Constitutional provisions are very clear. Article 246(3) clearly states that the State legislature has exclusive powers to make laws on any matters enumerated in the State list. The Bill is regulating the sale and purchase of agricultural goods and according to the Constitution of India, such a law can only be brought only by the State Government as inter-State trade is covered under Entry 26 of the State list. Moreover, through this Bill, the Central Government is nullifying the APMC law enacted by the various State Governments. The Central Government is not competent to make such a law. So, the Government has introduced certain provision of interstate trade to make the Bill look legal. This is a clear case of legislative overreach. The
Government may give example of APEDA Act. The APEDA Act is for agricultural export which is entirely a different issue.

I oppose the Bill because the Bill is directly violating the provisions of Article 246 and the Seventh Schedule of the Constitution. The Bill is a direct attack on the federal structure of Constitution.

شاهت كومار جي كي جي رابوت كيتا, उसको लागू करने के लिए और किसानों को बर्बाद करने के लिए यह बिल लाया जा रहा है। आप इसको रोकिए। पंजाब और हरियाणा में चारों तरफ इस बिल के खिलाफ लोग आंदोलन कर रहे हैं। ...

माननीय अध्यक्ष: प्रो. सौगत राय जी।

...(व्यवधान)

PROF. SOUGATA RAY (DUM DUM): Under Rule 72 (1) of the Rules of Procedure, I oppose the introduction of the Farmers’ Produce Trade and Commerce (Promotion and Facilitation) Bill, 2020. Through this Bill, the Central Government has over-written the State legislated Agriculture Produce Marketing Committee Act. The worst affected States are Punjab, Haryana, Madhya Pradesh and Chhattisgarh and any other State that has invested heavily in public procurement and assuring Minimum Support Price to farmers. The suspicion is that the Modi Government is attempting to implement the controversial recommendations of the Shanta Kumar Committee. That will have the effect of diluting public procurement, the Public Distribution System, the Minimum Support Price principle and food security.
Sir, farmers are seeing this as an effort to jettison the Minimum Support Price mechanism and Government procurement of foodgrains.

That is why, the farmers in Haryana are up in arms and they are agitating. The Punjab Assembly has passed a Resolution against this Bill. I shall request Mr. Narendra Singh Tomar, who is otherwise a very mild man, not to push through this Bill.

श्री गौरव गोगोई (कलियाबो): माननीय अध्यक्ष महोदय, मैं आपसे अनुरोध करता हूं कि कृषक उपज व्यापार और वाणिज्य अध्यादेश, 2020 के पुर:स्थापन में मेरा विरोध प्रस्ताव कृपया स्वीकार करें।

विशेषक की विधायी सक्षमता के संबंध में भारतीय संविधान की सातवीं अनुसूची के तहत कृषि राज्य सूची में 14वीं प्रविधि है। यह विशेषक राज्य सरकारों को बाजार शुल्क, उपकर या किसानों, व्यापारियों पर लेवी के माध्यम से राजस्व एकत्र करने की शक्ति से वंचित करता है और इलेक्ट्रॉनिक व्यापार प्लेटफॉर्म्स को विद्यमान नियोजित करने के अपने अधिकार का भी अतिक्रमण करता है। इसके अतिरिक्त, यह विशेषक मौजूदा एपीएमसी कानून को और कृषि के विषय पर राज्यों को उनके अनेक अधिकारों से वंचित कर देता है। केन्द्र ने ये सभी प्रतिकूल बदलाव राज्यों के साथ बिना किसी परामर्श के किये हैं, यह एकपक्षीय किया गया है। राज्यों के साथ कोई भी परामर्श न होने के कारण यह विशेषक अधिकारातीत है।

यह विशेषक कॉपरेट जगत के संबंध में है, उनकी भागीदारी को बढ़ाने की यह साजिश है। दो राज्यों के बीच मुक्त बाजार और व्यापार की अनुमति देने की इस कवायद में कॉपरेट जगत द्वारा शोषण की गुंजाइश मौजूद है। इन दो कारणों से इस बिल के इंटरोक्शन का में विरोध करता हूँ।
SHRI SANTOKH SINGH CHAUDHARY (JALANDHAR): Sir, I rise to oppose the introduction of this Bill under rule 72 of the Rules of Procedure and Conduct of Business in Lok Sabha. I oppose the introduction of this Bill on the following grounds:-

Pahli bati yah hai ki yeh bil pahityamet ki lejistitevik capitez se bahr hai aur sampadhan ke sheeyool 7 ke tahat aaytam numbar 14 par listед yah ek stet sabjject hai. Sarkar aisa koi bil nahi la sakati hai, jo sanad ki lejistitevik pover ke bahr ho.

EPCIEMS ekta ke tahat stet ki jo pover hai, yeh bil unko khatam karta hai. Rajyov ki shaktiyon ko khatam karyne ke saath-saath yah wahan ki madhi sistam aur epcims sistam ko bhi khatam karna dega, jisse kisaino ko unekhi faslasa ko sahi suly nahi mili paga.

Punjab jese krish praytan rajya me bhut-se revneu epciiklch arkaet, madhi ki fias aur ses se aate hai. Is bil ke tahat rajya kisii bhi tash ki fias ya ses nahi lag sakte hai. Is fias aur ses se jo revneu aate hai, unse rajya ka vikas hota hai. Vary 2019-20 mein is fias se Punjab ko 3,600 koroed rupae mila...(vyvadhan)

MAANNEI ADHYAKSH: MAANNEI SADASYA, JAB BIL PAR POURI CHARCHA HOOTI HAI, TAB SARE VISHY UTTAA JAAATE HAIN.

...(vyvadhan)

MAANNEI ADHYAKSH: SHRI NARENDRA SINGH TOMAR JI, KYA AAP KUCH KAHNA CHAHAATE HAIN?

...(vyvadhan)

MAANNEI ADHYAKSH: SHRI BHAGVANT MAN JI, JAB BIL PAR DIITLE MEX CHARCHA HONI, TO MERA BAYADA HAI, MAIN APKOE MUKA DHONGA.

...(vyvadhan)

MAANNEI ADHYAKSH: AAPKOE DAS BAZ SE PHALLE NOTISH DENA CHAHIE THA.

SHRI BHAGVANT MAN (SANGRUR): SAR, CHARCHA HONI HI Nahi chaahie. ...(vyvadhan)
माननीय अध्यक्ष: चर्चा होगी। इस तरह से खड़े नहीं होते हैं, आप बैठ जाइए।

...(व्यवधान)

श्री नरेंद्र सिंह तोमर: माननीय अध्यक्ष महोदय, मुझे बहुत ही आश्चर्य है कि इस अध्यादेश के विरुद्ध भी चर्चा की स्थिति सदन में आ रही है। एक लम्बे कालखंड के बाद, मुझे लगता है कि इस अध्यादेश के माध्यम से कृषि के क्षेत्र में और किसानों की स्थिति में क्रांतिकारी बदलाव आने वाले हैं। जहाँ तक कानून बनाने की शक्ति की बात है, तो इस मामले में मैं सदन को अवगत कराना चाहता हूँ कि संघ सूची के विभिन्न संख्या 42 में अंतर्राज्यीय वाणिज्य एवं व्यापार का उल्लेख है।

इसका अर्थ यह है कि किसी भी कस्तूर, सेवा के अंतर्राज्यीय व्यापार के संबंध में कानून बनाने का अधिकार संघ शासन को है और इसमें कृषि उत्पाद भी सम्मिलित है।

माननीय अध्यक्ष जी, मैं आपके माध्यम से सदन से यह भी आग्रह करना चाहता हूँ कि अभी जो वर्तमान व्यवस्था है, उसमें कृषि मांग उत्पाद पेंदा करता है और यह मंडी में उसे लाता है। जब वह अपने उत्पाद को मंडी में लाता है, तब उसके ऊपर मंडी फीस, परिवहन के खर्च और दुनिया भर के कानून हैं। मंडी में बीस-पचीस लोग बोली लगाकर उसके उत्पादन की कीमत को तय करते हैं।

अब अगर यह अध्यादेश अधिनियमित हो जाएगा तो निश्चित रूप से किसान को इस बंधन से मुक्ति मिलेगी। किसान जब अपनी फसल मंडी में किसी व्यापारी को बेच देता है तो व्यापारी उस फसल का धारण करेगा, कहा बेचेगा, कितने भाव पर बेचेगा, किस राज्य में बेचेगा, इसकी व्यापारी को तो पूरी आजादी है, लेकिन किसान, जो देश का सबसे बड़ा उत्पादक है, उसको केवल उत्पादन को बेचने का, मूल्य तय करने का, स्थान तय करने का और कैसे बेचेगा यह तय करने का आज तक अधिकार नहीं था। ... (व्यवधान) में समझता हूँ कि इस अध्यादेश के माध्यम से यह आजादी पूरे देश को मिलने वाली है। ...(व्यवधान)

माननीय अध्यक्ष महोदय, मैं आपके माध्यम से देश भर के किसानों, राजनीतिक दल के नेताओं और सभी से यह आग्रह करना चाहता हूँ कि यह जो अध्यादेश है, जिसको आज संसद में
प्रस्तुत किया जा रहा है, इससे एपीएमसी एक्ट पर कोई फर्क नहीं पड़ेगा। अगर राज्य चाहेगा तो मंडियां चलेंगी। राज्य का अपना एक्ट है। मंडी की परिधि के बाहर जो ट्रैड होगा, वह इसके माध्यम से कवर होगा। दूसरा, जिस प्रकार की बात कही जा रही है, कि एमएसपी पर फर्क पड़ेगा और फलाना कमेटी की रिपोर्ट है, में सरकार की ओर से यह कहना चाहता हूँ कि एमएसपी है, एमएसपी से लें और एमएसपी पर कोई फर्क नहीं आने वाला है।

प्रधान मंत्री नरेंद्र मोदी जी के आने के बाद वर्षों से स्वामीनाथन कमेटी की जो अनुशंसाएं पड़ी हुई थी, उन 201 अनुशंसाओं में से मोदी जी के नेतृत्व में भारत सरकार ने 200 अनुशंसाओं पर अमल किया और जो एमएसपी थी, उस पर भी 50 प्रतिशत मुनाफा छोड़कर रबी और खरीफ की एमएसपी घोषित की जा रही है। ...(लक्ष्य) इससे किसी भी प्रकार का फर्क नहीं आएगा। किसान को अपना उत्पाद बेचने की स्वतंत्रता मिलेगी, व्यापारी भी लाइसेंस राज्य से मुक्त होंगे, भ्रष्टाचार पर निर्यंत्रण होगा और सत्ताई चेन मजबूत होगी। कृषि के क्षेत्र में निजी निवेश बढ़ेगा और जब यह निजी निवेश गांवों तक और खेतों तक पहुंचेगा तो इसी से किसान का उत्थान आने वाले कल में होने वाला है। आपका बहुत-बहुत धन्यवाद।

माननीय अध्यक्ष: प्रश्न यह है:

“कि ऐसे पारिस्थितिक तंत्र के सृजन का वहा, जहां कृषक और व्यापारी, ऐसी कृषक उपज के, वित्त के और क्रय संबंधी चयन की स्वतंत्रता का उपभोग करते हैं, जो प्रतिस्पर्धात्मक वैकल्पिक व्यापार चैनलों के माध्यम से लाभकारी कीमतों को सुकर बनाता है, का उपबंध करने के लिए बाजारों के भौतिक परिसर या विभिन्न राज्य कृषि उपज बाजार संबंधी विधानों के अधीन अधिसूचित समझे गए बाजारों के बाहर कृषक उपज का दक्ष, पारदर्शी और निर्बाध अंतरराज्यक और अंत:राज्यक व्यापार और वाणिज्य के संबंधन के लिए; इलेक्ट्रॉनिक व्यापार के लिए सुसाध्य ढांचे का और उससे संबंधित या उसके अनुपक्षिक विषयों का उपबंध करने वाले विषयों को पुर:स्थापित करने की अनुमति प्रदान की जाए"
14.09.2020

माननीय अध्यक्ष: अब माननीय मंत्री जी विधेयक को पुर:स्थापित करें।
श्री नरेन्द्र सिंह तोमर : माननीय अध्यक्ष महोदय, मैं विधेयक को पुर:स्थापित करता हूँ।

माननीय अध्यक्ष: आइटम नंबर – 15, नरेन्द्र सिंह तोमर जी।

12.17 hrs

STATEMENT RE : FARMERS' PRODUCE TRADE AND COMMERCE
(PROMOTION AND FACILITATION) ORDINANCE, 2020*

कृषि और किसान कल्याण मंत्री; ग्रामीण विकास मंत्री तथा पंचायती राज मंत्री (श्री नरेन्द्र सिंह तोमर): माननीय अध्यक्ष महोदय, मैं कृषक उपज व्यापार और वाणिज्य (संवर्धन और सरलीकरण) अध्यादेश, 2020 (2020 का संयांक 10) के प्रस्तावना द्वारा तत्काल विधान बनाए जाने के कारणों को दर्शाने वाला व्यापारिक संबंध (हिन्दी तथा अंग्रेजी संस्करण) सभा पटल पर रखता हूँ।

माननीय अध्यक्ष: आइटम नंबर – 16, नरेन्द्र सिंह तोमर जी।

...(व्यवधान)

श्री अधीर रंजन चौधरी (बहरामपुर): सर, हमें बोलने दीजिए।...(व्यवधान)

माननीय अध्यक्ष: आपका आइटम नंबर - 16 पर नोटिस है।

...(व्यवधान)

* Laid on the Table and also placed in Library, See No. LT 2481/17/20
(vi) Farmers (Empowerment and Protection) Agreement of Price Assurance and Farm Services Bill, 2020

कृषि और किसान कल्याण मंत्री; ग्रामीण विकास मंत्री तथा पंचायती राज मंत्री (श्री नरेन्द्र सिंह तोमर): माननीय अध्यक्ष महोदय, मैं प्रस्ताव करता हूँ कि ऐसे कृषि करारों पर जो निष्पक्ष और पारदर्शी रीति में पारस्परिक रूप से सहमत लाभकारी कीमत रुपरेखा पर कृषि सेवाओं और भावी कृषि उत्पादों के विक्रय के लिए कृषि-कारखाने फर्मों, प्रोसेसरों, थोक विक्रेताओं, निर्यातकों या बड़ी संख्या में फुटकर विक्रेताओं के साथ कृषि करार का संरण और उनको सशीक संरण और उनके आनुषंगिक विषयों का उपबंध करने वाले विषयक को पुर:स्थापित करने की अनुमति दी जाए।

माननीय अध्यक्षः प्रस्ताव प्रस्तुत हुआ:

"कि ऐसे कृषि करारों पर जो निष्पक्ष और पारदर्शी रीति में पारस्परिक रूप से सहमत लाभकारी कीमत रुपरेखा पर कृषि सेवाओं और भावी कृषि उत्पादों के विक्रय के लिए कृषि-कारखाने फर्मों, प्रोसेसरों, थोक विक्रेताओं, निर्यातकों या बड़ी संख्या में फुटकर विक्रेताओं के साथ कृषि करार का संरण और उनको सशीक संरण और उनके आनुषंगिक विषयों का उपबंध करने वाले विषयक को पुर:स्थापित करने की अनुमति प्रदान की जाए।"

श्री अधीर रंजन चौधरी (बहरामपुर): सर, मुझे दोबारा विधेयक के इन्ट्रोडक्शन का विरोध करना पड़ रहा है, क्योंकि तोमर साहब ने यह कसम खाई है कि हिन्दुस्तान की कृषि व्यवस्था को और सबसे बड़ी बात है कि हमारे यहां जो हरित-क्रांति हुई थी, आप उस हरित-क्रांति की सुविधा और उसके ढांचे को ध्वस्त करने की कोशिश कर रहे हैं।...(व्यवधान)

1 Published in the Gazette of India, Extraordinary, Part-II, Section-2, dated 14.09.2020
Sir, the green revolution had two pillars – one a MSP and the other a public procurement. The priority should be to ensure that the farmers and producers have adequate bargaining power and they get a price higher than the Minimum Support Price (MSP). The ordinance does not ensure these two key requirements. You are ignoring the unequal bargaining power between the small and medium farmers and the sponsor of aggregator or the farm service provider. The ordinance should reduce the unequal bargaining power between the farmer and the sponsor of the aggregator or farm service provider. It is a fatal flaw not to stipulate that the price shall not be less than MSP in cases where MSP has been fixed and declared. A convoluted and totally bureaucratic dispute resolution mechanism will leave the farmers totally exhausted, poor and beaten, whatever the outcome may be.

This is what the farmers have been fighting against for so long.

PROF. SOUGATA RAY (DUM DUM): Sir, under Rule 72(1) of the Rules of Procedure and Conduct of Business in Lok Sabha, I oppose the introduction of the Farmers (Empowerment and Protection) Agreement of Price Assurance and Farm Services Bill, 2020. While mentioning this Bill, I heard a small, short comment from you. आपने कहा कि यह कॉन्ट्रैक्ट फार्मिंग है। हाँ, यह कॉन्ट्रैक्ट फार्मिंग है। This is what the farmers have been fighting against for so long. अब किसान कैपिटलिस्ट के हाथ में चला जाएगा।
This Bill would subjugate the farmers at the altar of a handful of crony capitalists and would prove to be a death knell for agriculture. This is a draconian Ordinance aimed at subjugating the farming community and abolishing the livelihood of crores of people who are allied with the grain markets and other market systems. Sir, किसान की स्वतंत्रता को लिया जाएगा और इसमें बड़े-बड़े कैपिटलिस्ट लोग घुसाएंगे तथा वे लोग कॉन्ट्रैक्ट फार्मिंग करेंगे।

DR. SHASHI THAROOR (THIRUVANANTHAPURAM): Thank you, Mr. Speaker.

I would like to support my colleagues who have already spoken, but also to oppose the motion on the following three constitutional grounds. First, the Bill violates the basic tenet of federalism enshrined in our Constitution. It is beyond the legislative competence of this House to enact a law on a subject, that is, agriculture which falls squarely within the domain of the State List. It also seems to operate on a misconstrued understanding of the Concurrent List because it does not acknowledge the provision under Entry 7 of the Concurrent List that specifically excludes contracts relating to agricultural lands.

Second, the Bill endangers the right to food of the people of the country that has been recognised as a Fundamental Right under Article 21 of the Constitution by the hon. Supreme Court.
Third, the Bill replaces an Ordinance that was brought into effect during the national lockdown despite having no nexus to the COVID-19 pandemic. No specific exigencies have been met. The unwarranted promulgation of the Ordinance, that constitutes the foundation of this Bill, has sadly precluded the Bill from benefitting from any expert opinions or stakeholders’ suggestions.

Mr. Speaker, we have just witnessed the Finance Minister withdrawing a Bill because it was ill-considered and unprepared for passage. Let us not have this Minister make the same mistake again. I request him to withdraw the Bill.

Thank you.

माननीय अध्यक्ष: आप कानून की क्षमता बनाने के विरोध के विषय को कर दें।

...(व्यवधान)

SHRI GAURAV GOGOI (KALIABOR): Sir, I hereby completely and totally oppose the introduction of this Bill. This Bill is a severe limitation of States’ rights and responsibilities. It is making a unilateral decision by the Central Government and is against the principle of federalism and decentralisation.

अभी-अभी मंत्री महोदय ने कहा है कि यह बिल किसानों को आजादी देता है। यह किसानों को आजादी नहीं देता है, यह कॉर्पोरेट को आजादी देता है। आप किसानों की आजादी छीनकर, पूरी आजादी कॉर्पोरेट को दे रहे हैं। इस बिल में एमएसपी का कोई उलेख नहीं है। इस बिल में किसानों का संरक्षण किस प्रकार से होगा, उसका कोई उलेख नहीं है। कॉर्पोरेट अपनी क्षमता और शक्ति के द्वारा किसानों पर अत्याचार करेगा। किसानों को जो उचित मूल्य मिलना चाहिए, इसमें उसका कोई उलेख नहीं है। आपने इस बिल से डेलिबेरेटली एमएसपी को हटाया है, इसलिए बहुत से किसान और हमारे भारत के सारे किसान इस बिल का विरोध करते हैं। हम चाहेंगे कि आप इस बिल को वापस ले। धन्यवाद।
श्री संतोख सिंह चौधरी (जालंधर): अध्यक्ष महोदय, मैं इस बिल का विरोध करता हूँ, क्योंकि सरकार व्यक्तिगत ऑफिसर और फेडरलिज्म की बात करती है। यह बिल स्टेट्स की पावर को खत्म करता है और देश के फिटलाइजर को कमजोर करता है।

तीसरे, यह विधेयक किसानों के हक में नहीं है, क्योंकि इसके जरिए सारी पावर प्राइवेट प्लेयर्स, जो बड़े कॉप्युटरस्ट्रों हैं, उनके पास चली जाएगी और जैसे कि मेरे साथियों ने कहा कि इसमें एमएसपी का कोई जिक्र नहीं है। कोविड में भी मेरे स्टेट में हंडेड पर्सेंट प्रोक्योर्सेंट हुई क्योंकि एमएसपी थी और मैं समझता हूँ कि अगर यह बिल पास हो जाता है, यह बिल यहां लाया जाता है तो किसानों की स्लो डेथ प्राइवेट प्लेयर्स के हाथ में चली जाएगी। मेरे पंजाब राज्य ने ग्रीन रेजल्यूमेंशन में सबसे उज्जादा योगदान दिया है, उस पंजाब की विधान सभा ने भी इस बिल का विरोध किया है। मैं अनुरोध करता हूँ कि इसको वापस लिया जाए।

श्री नरेन्द्र सिंह तोमर: माननीय अध्यक्ष महोदय, अगर किसी बिल का राजनीतिक विरोध हो तो मुझे आपत्ति नहीं है। लेकिन, वैसे में इस मत का हूँ कि किसी भी कानून के बारे में विचार व्यक्त करना है तो उसकी गहराई तक जाना चाहिए। चाहे यह विधेयक हो, चाहे पहले वाले विधेयक हों, चाहे आवश्यक वस्तु अधिनियम में संशोधन का मामला हो। ये सभी विधेयक एक-दूसरे से कहीं न कहीं लिखे हैं। हम सब इस बात को भली-भाती जानते हैं कि देश में 86 प्रतिशत छोटे किसान हैं, जो दो हेक्टेयर या उससे कम के क्षेत्र पर खेती करते हैं। यह जो छोटा किसान है, इस छोटे किसान के उत्पादन का बॉल्ड्यूम इतना कम होता है कि वह एमएसपी का भी फायदा नहीं ले पाता है। छोटे रक्षक वाला अपनी स्वयं भी अपने खेत में निवेश नहीं कर पाता है और कोई दूसरा भी उसके खेत में निवेश करने को तैयार नहीं होता है। अज्ञात पूरा देश और जुनिया क्लाइमेट चेंज की बात करती है कि फसल ऐसी करो, जिसमें पानी कम लगे, फसल ऐसी करो किस्मत के हाथ फर्टिलाइजर कम लगे और फसलों का विविधिकरण हो। ये सब बातें भाषण के लिए तो जल्दी हैं, लेकिन जब एक के माध्यम से इस दिशा में आगे बढ़ने की बात आती है तो सभी लोग अपना-अपना व्यक्तिगत मत प्रस्तुत करने लगते हैं। मैं आपके माध्यम से सदन से यह आग्रह करना चाहता
हूं कि एक तो भारत सरकार की बुद्धि पर आपको इतना भरोसा होना चाहिए कि जो हम कानून लाए हैं, उस कानून को लाने का अधिकार भारत सरकार को है। मैं यह बात पहले भी कह चुका हूं। दूसरा, मिनिमम मूल्य आश्कासन वाला एक्ट है, इससे किसान को सिर्फ़ फायदा ही फायदा है। कोई भी व्यक्ति इस बिल के बाद किसान के खेत तक पहुंच सकेगा। किसान के खेत के मामले में किसी भी प्रकार का करार इस बिल में निषेध है। खेत का मालिकाना हक किसान का होगा, खेत के बारे में किसी प्रकार का करार नहीं हो सकता है। करार केवल फसल के लिए हो सकता है। मैं अपने गांव में जाता हूं और पाया बीधा वाले किसान को बोलता हूं कि तुम आम की खेती कर लो, तुम्हें अच्छा दाम मिल जाएगा। मैं उसे सलाह देता हूं और खेत के बारे में किसी व्यक्ति को करार नहीं देता। सरकार आपको अपनी आदमी आम खरीदेगा, यह व्यवहार में समभव नहीं होता है। इस एक्ट के माध्यम से खेत विकसित होंगे, निजी निवेश खेत तक पहुंचेगा, खेत तक तकनीक पहुंचेगी, खेत तक पैसा पहुंचेगा और अच्छी और वैश्विक गुणवत्ता के आधार पर एक किसान खेती करेगा, उत्पादन करेगा और जब अपनी फसल को बेचेगा तो उसको उत्पादन का उचित मूल्य मिलेगा। दूसरा, जो व्यक्ति करार करता है, वह किसान से एप्प्रीमेंट के समय मिनिमम मूल्य का करार देगा, परिस्थिति कैसी भी हो, आप और पाला हो, प्राकृतिक विघ्न हो, मिनिमम मूल्य किसान को मिलेगा ही। अगर फसल आने पर फसल का भाव मिनिमम मूल्य से ज्यादा है तो करार में ही यह उल्लेख होगा कि अगर इतना प्रतिशत मूल्य फसल आने पर बढ़ेगा तो उसका इतना प्रतिशत किसान को मिलेगा। इससे मैं आप सभी को अध्यक्ष महोदय के माध्यम से आग्रह करना चाहता हूं कि कृषि का जीवन बदलने वाले ये एक्ट हैं, आप सब का आशीर्वाद इनको मिले। धन्यवाद।
माननीय अध्यक्ष : प्रश्न यह है :

"कि ऐसे कृषि करारों पर जो निष्पक्ष और पारदर्शी रीति में पारस्परिक रूप से सहमत लाभकारी कीमत रूपरेखा पर कृषि सेवाओं और भावी कृषि उत्पादों के विक्रय के लिए कृषि-काररबार परमी, प्रोसेसरों, थोक विक्रेताओं, नियंत्रकों या बड़ी संख्या में पुनःस्वीकार विक्रेताओं के साथ कृषकों का संरक्षण और उनको सशक्त करते हैं, राष्ट्रीय रूपरेखा का तथा इससे संबंधित या उसके आनुपातिक विषयों का उपबंध करने वाले विधेयक को पुरःस्थापित करने की अनुमति प्रदान की जाए।"

प्रस्ताव स्वीकृत हुआ।

माननीय अध्यक्ष : माननीय मंत्री जी, अब विधेयक को पुरःस्थापित कीजिए।

श्री नरेन्द्र सिंह तोमर : माननीय अध्यक्ष महोदय, मैं विधेयक को पुरःस्थापित करता हूं।

12.31 hrs

STATEMENT RE : FARMERS (EMPOWERMENT AND PROTECTION)
AGREEMENT ON PRICE ASSURANCE AND FARM SERVICES
ORDINANCE, 2020*

माननीय अध्यक्ष : आईटम नंबर – 17.

श्री नरेन्द्र सिंह तोमर जी।

कृषि और किसान कल्याण मंत्री: प्रामीण विकास मंत्री तथा पंचायती राज मंत्री (श्री नरेन्द्र सिंह तोमर) : माननीय अध्यक्ष महोदय, मैं कृषि (सशक्तिकरण और संरक्षण) कीमत आश्वासन और कृषि सेवा पर करार अध्यादेश, 2020 (2020 का संख्यांक 11) के प्रख्यापन द्वारा तत्काल विधान बनाए जाने के कारणों को दर्शाने वाला व्याख्यात्मक विवरण (हिन्दी तथा अंग्रेजी संस्करण) सभा पटल पर रखता हूं।

* Laid on the Table and also placed in Library, See No. LT 2482/17/20
THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS
(SHRIMATI NIRMALA SITHARAMAN): Sir, I beg to move for leave to introduce a Bill to amend the Factoring Regulation Act, 2011.

SHRIMATI NIRMALA SITHARAMAN: I introduce the Bill.

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*Published in the Gazette of India, Extraordinary, Part-Il, Section-2, dated 14.09.2020
12.32 ½ hrs

(viii) Banking Regulation (Amendment) Bill, 2020

माननीय अध्यक्ष : आईटम नंबर – 19.

श्रीमती निर्मला सीतारमण जी।

THE MINISTER OF FINANCE AND MINISTER OF CORPORATE AFFAIRS

(SHRIMATI NIRMALA SITHARAMAN): Sir, I beg to move for leave to introduce further to amend the Banking Regulation Act, 1949.

माननीय अध्यक्ष : प्रस्ताव प्रस्तुत हुआ :

“कि बैंककारी विनियमन अधिनियम, 1949 का और संशोधन करने वाले विधेयक को पुर:स्थापित करने की अनुमति प्रदान की जाए।”


The Minister has just withdrawn a Bill. She had brought it earlier and I see in the interregnum between the two Sessions, the Minister has...

*(Interruptions)* क्या मैंने कोई खराब बात कही है?...(व्यवहार)

माननीय अध्यक्ष : इसे कार्यवाही से निकाल दिया जाए।

*(व्यवहार)*

* Published in the Gazzette of India, Extraordinary, Part-II, Section-2, dated 14.09.2020

* Not recorded.
PROF. SOUGATA RAY: Sir, have I used any unparliamentary word? ...(Interruptions) What is the objection? Sir, through this Ordinance, the Modi Government has brought all District Central Cooperative Banks and Urban Cooperative Banks under the Centre’s control and designated the Reserve Bank of India as a regulator.

Power has been taken to alter the membership structure and the financial structure of the cooperative bank which may result in transfer of control and management to strangers and predators. The motive behind this Ordinance is that all major financial intermediaries should be under the control of the Central Government and all those who are in the management of DCCBs and UCBs elected directors should be obliged to the Central Government.

This Ordinance is a naked aggression on State’s rights and coercive federalism is on display. Now, the State was the controlling regulator. The State Government was the regulator as far as the cooperative banks were concerned.

Now, the States are being removed. State’s power is being taken away. The control and supervision of the State Government is with the cooperative banks.

DR. SHASHI THAROOR (THIRUVANANTHAPURAM): Sir, I too wish to oppose the Motion of introduction of this Bill on the following grounds.
The Bill proposes alternations in the regulation of the cooperative banks registered under the Cooperative Societies Act and impinges in the federal process of the State that has been prescribed by the Constitution, since it is beyond the legislative competence of the House ...(Interruptions) to legislate on a subject which is in the State List ...(Interruptions)

HON. SPEAKER: Already removed.

... (Interruptions)

संसदीय कार्य मंत्रालय में राज्य मंत्री तथा भारी उद्योग और लोक उद्यम मंत्रालय में राज्य मंत्री (श्री अर्जुन राम मेघवाल) : महोदय, पर्षन्न रिमार्क्स को रिमूव कीजिए।...(यवधान)

THE MINISTER OF PARLIAMENTARY AFFAIRS, MINISTER OF COAL AND MINISTER OF MINES (SHRI PRALHAD JOSHI): Commenting on personal attire, ऐसे लोगों की तरह हम भी बात कर सकते हैं, लेकिन यह हमारी संस्कृति नहीं है। Being a senior Member, what is he talking? He should apologise unconditionally. It is an insult to the womenfolk. He should apologise. What is this? ...(Interruptions) यह पार्लियामेन्ट नहीं है।...(यवधान)

DR. SHASHI THAROOR: Sir, may I continue? ...(Interruptions)

Sir, I just want to stress that ...(Interruptions)

Sir, it is beyond the legislative competence of this House to legislate on a subject that features in the State List, which in the present case is the Cooperative Societies. Since federalism forms part of the basic structure -- the doctrine propounded by the hon. Supreme Court -- encroachment on the idea of federalism amounts to violation of the basic structure doctrine as well.
Equally, I am sorry that the Ordinance that this Bill seeks to replace has been legally challenged and the matter is pending before the hon. Madras High Court. Constitutional experts have argued that it is against propriety to legislate on sub-judice matters. You yourself, hon. Speaker, have expressed the opinion that we should not even be discussing sub-judice matters. Can we have one rule for us and one rule for the Government?

Finally, the selective ordinance-making powers provided under the Constitution have been abused by doing this without referring it to a Standing Committee. Such a crucial subject such as the regulation of the banking industry should have at least taken the views of the Members of the Standing Committee.

I would request the Minister to kindly withdraw this; offer it to the Standing Committee; and then bring it back to the House with all these issues taken care of and the court matter settled. Thank you, Sir.

SHRIMATI NIRMALA SITHARAMAN : Thank you, Sir. Cooperative Banks in this country are regulated by the RBI since 1965, and this Bill actually only seeks to extend the applicability so that some of the banking regulation laws are also going to be applicable to them. Why was this necessitated? First of all, the State Cooperative Laws are not being proposed to be amended. They are not at all being touched. If only Prof. Sougata Ray can listen rather than get distracted by other factors. The State Cooperative Laws are not being proposed at all in this amendment, if that is clear to him.
The other thing is that in this amendment what we are trying to do is only to look at those cooperatives, which are using the word ‘bank’, and therefore are receiving deposits and dealing with deposits. To that extent, the legislative competence of this House is absolutely well established under Entry No. 45 of the Union List. Regulation of banking also comes under Entry No. 43 of the Union List. Further, as per Clause 2 of this Bill, it would apply only to those cooperative societies, which use the words ‘bank’, ‘banker’ or ‘banking’. So, this is not anything to do with all cooperative activities of a cooperative institution. It is only restricted to those activities, which come under the name of ‘bank’, ‘banker’ or ‘banking’ that we are trying to regulate under Entry 45 of the Union List. So, the competence is very well established, we are very clearly saying that we are not looking at the States where we have the State Cooperative Laws, that will remain wherever it is, and we are not touching them. So, that is one thing.

The next issue raised was that there is a legal challenge in some court, so this House cannot deal with it. Let us first of all understand that there is no interlocutory relief, which is being provided in the court. There is no other direct direction also given by the court in the matter against the operation of this Ordinance. So, that is the second point, which hon. Member, Dr. Shashi Tharoor, raises that it is in the court and several times you have referred to matters being sub-judice. Here, there is nothing at all, which is stopping us from going ahead with the Ordinance.
Another point that was made was about being 'devoid of potential benefits and lacking inputs from the Standing Committee'. A number of cooperative banks have weak financials. Without taking much of your time, Sir, I would just like to highlight the number of such institutions, which are in a precarious condition. I know and I repeat this. Have we not had calls from all sections of this House saying why the PMC Bank matter does not get sorted out at the earliest? Why can we not do something about it because the depositors are really suffering? So, what are we trying to do? Kindly look at the number of institutions, which are cooperative and in weak financial situation. There are 277 Urban Cooperative Banks that are reporting loss.

Sir, 105 urban cooperative banks are unable to meet minimum regulatory capital requirements; 47 having negative net worth and 328 urban cooperative banks have more than 15 per cent gross NPA ratio as of 2019 March. So, we need to have depositors protected and this protection will aim at protecting the depositors about whom all of us individually are concerned and we, as representatives, have to sort out the matters at the earliest. This is what we have come here with. A number of cooperative banks are weak; I have established that, and to protect depositors and public interest, early legislation is required. I seek your assistance, Hon. Speaker, Sir.

माननीय अध्यक्ष : प्रश्न यह हैः

“कि बैंककारी विनियमन अधिनियम, 1949 का और संशोधन करने वाले विधेयक को पुरःस्थापित करने की अनुमति प्रदान की जाए।”

प्रस्ताव स्वीकृत हुआ।
SHRIMATI NIRMALA SITHARAMAN: I introduce the Bill.
MATTERS UNDER RULE 377*
(i) Regarding conferring ST status on left out Gorkha Sub-Tribes

SHRI RAJU BISTA (DARJEELING): As historic documents show until 1941 census, Indian Gorkhas were collectively recognized as ‘Hill Tribes’ and listed as ST in the census reports. However, this status was taken away without any consultation or official communication with these tribes in the 1951 census.

Currently there are 11 left out Gorkha sub-tribes — Rai, Sunwar, Gurung, Mangar, Newar, Yakkha, Khas, Jogi, Thanii, Phujel, and Dhimal who are awaiting for their Hill Tribes status to be reinstated.

Recognizing this historic injustice, the Government of India has constituted 3 committees to expedite the inclusion of 11 left-out Gorkhas sub-tribes as ST since 2016. However, there has been no outcome so far, and the reports and recommendations of these committees have not been made public till date.

This delay is denying the Gorkhas their right to historic and cultural roots.

* Treated as laid on the Table.
I request Hon’ble Minister for Tribal Affairs and Hon’ble Home Minister to kindly expedite the process for reconferring the ST status on these 11 left out Gorkha sub-tribes.
(ii) Need to review NCERT history text books


Inke saath NCERT ke Itihas ke visheen kshatra ke purshok mona utaran itihastha pathya samagrahaya men aur vedo men varnita janakriya men virodha bahaar hai. In visangitiy ke dur karna ke liye jaanch karniti banaava jaana bahut jaruri hai.
(iii) Regarding establishment of a Skill Development University in Kalaburagi

**DR. UMESH G JADAV (GULBARGA):** The then Skill Development and Entrepreneurship Minister had announced establishment of a Skill Development University in Kalaburagi in the year 2018 as a step to fight backwardness of the region and pave the way for development.

Skill Development University is a must for empowering youth of Hyderabad Karnataka Region which has been accorded special status of 371(3).

Therefore, I would like to urge upon the Hon'ble Minister for Skill Development and Entrepreneurship & Hon'ble Minister for Finance through you to sanction the Fund for this project which will be a milestone for the development of this most backward region.
(iv) Need to set up a rail coach factory in Tikamgarh district, Madhya Pradesh

Dr. Veerendra Kumar (Tikamgarh): Need to set up a rail coach factory in Tikamgarh district, Madhya Pradesh.

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Dr. Veerendra Kumar (Tikamgarh): Need to set up a rail coach factory in Tikamgarh district, Madhya Pradesh.
Need to construct 4 lane bye-pass road connecting NH 96 to NH 231 in Pratapgarh Parliamentary Constituency, Uttar Pradesh

श्री संगम लाल गुप्ता (प्रतापगढ़): मैं सड़क परिवहन एवं राजमार्ग मंत्रालय से मांग करना चाहता हूँ कि मेरे लोक सभा क्षेत्र प्रतापगढ़ (उत्तर प्रदेश) के एन एच 96 के गोंडो गांव से एन एच 231 सुखपाल नगर तक बनने वाले 6 लेन बाई पास निर्माण हेतु भूमि अधिग्रहण किया गया है किन्तु अभी निर्माण केवल 2 लेन का ही प्रस्तावित है, जबकि वह बाई पास अत्यंत महत्वपूर्ण मार्ग होने के साथ ही साथ रामायण सरकार के प्रस्तावित राम वन गमन मार्ग को भी जोड़ने के कारण अत्यंत आवश्यक वाला मार्ग होगा। इसलिए इस बाई पास को 4 लेन निर्मित करने का कष्ट करें।
(vi) Need to construct a ring road in Kuruksheta city in Haryana to ease traffic problem

Shri Naub Singh Saini (Kurukshetra): Kurukshetra Mahabharatkaline Vishwakarma Dharmik Nagni is. Vahan par 134 Dharmik Sthal hain. Pracheen va Vishwakarma Sthal hone ki vajra se vahan par har varj laakhon ki sanchaya me Desh-Videh me parvate aur Shraddhalu aate hain. Mannnibh Shri Jee, Kurukshetra jaane ke liye ek hi sadak hai jo shahar ke beech se nikal kar Kethl-Pehwa-Punjabi ki taraf nikalati hai aur rajasthan ko tara karte hain. Uske uppar bahut bhedh rahi hai aur pura shahar traffic samasya se pareshtan rhta hai.

Mera Sarkar se nivadhan hai ki Kurukshetra ke andar ek ring road banai jaye taaki Kurukshetra ke loogon ko tatha Desh-Videh se eye wale parvate aur Shraddhalu ke traffic ki samasya se nijal mil sakhe.
Need to take measures for welfare of landless and marginal farmers

Dr. (Prof.) Kiran Premjibhai Solanki (Ahmedabad Pashchim):

Haryana Kisan, Desh ke liye anandata raha hai. Apne-apne khet mein din ratal pasiana baha kar, kadi mehnat karo ab anan pada karta hai. Inka labh sas hem anan par nirantar raha hai.

Aise kisan ko Sarkar ki or se har samhav sahayata karni chaahiye aur aam par sahayata milne chaahiye. Sarkar abhi se chaahiye kyonki hain yojana banne ke liye "Khataedar Kisan" ko hi milta hai. Maltab ki jinke pase jamine hain unke hi yojana ka laabh milta hai. Aise karod kisan hain, jo sirf khet majdoor karate hain, jinke pase jamine ka dukhda hain nahi hota, aise "Khet Majdoor" chote-chhote samanta kisan ko sarkari yojana ke labh milte hain.

Mere Sarkar se maang hai ki jin kisanao ke pase jamine nahi hain, jinaka koi khoata bhi nahi hain, aise khet majdoor karane wale chhote kisan, samanta kisan jo jamine wale kisan ke jamine mein mehnat kar fasal pada karte hain, aise samvi majdoor kisan ko bhi kisan ke toor par laabh diya jaana chaahiye. Iske liye aise chhote, samanta aur majdoor kisanao ki pauri desh mein alag rajjistri bannai chaahiye, taaki un tak laabh phuche.
Need to develop a bird sanctuary on the land adjoining Ghonga (Kori) dam in Bilaspur Parliamentary Constituency, Chhattisgarh

Shri Arjun Saw (Bilaspur): Mere loka samaba kshetra Bilaspur (Chhattisgarh) ke antrangat VikasKhand-Kota, Jita' Bilaspur, Chhattisgarh ke Gram-Parad, Shivtarai ke samip Ghonga Jalashay (Korei baandh) sthit haila. Aanchak maar Taiga rizwar se judeh isilake me sanakdoo ki sankhya me dullum prajati ke videshi patshi dikhaai dehte hai. Ghonga Jalashay ka aas-pasas dhane jungai hain. Ye kshetra Goldan Bar, Dragon Bar, Block Star, Humhur, Block Vhalla, Kimgfihar, Block Dha, Jarnviil, Janglini Murgni-Gurungi, Udhna Ginhalari, Mayoor, Janglini Mania adidi dullum prajati ke patshiyon ka Aaramgaah ke rup me prasidd haila. Issme se khali patshi to vilusi ki kamar par hai, kintu in dullum prajatiyon ke parids ke sankhasha ke liye ab tak koi pahal nahi hai ja sakhi hai. Ghonga Jalashay (Korei baandh) se lagmi lagabha 20 ekadha bhumii par parids ka Aaramgaah ke rup me "Barde Sanchuri" ka nirman kharaye jaane ki avalshawkta hai.

At: mere sankar se aapprah karta hoon ki ukh Ghonga Jalashay ke nirkat "Barde Sanchuri" vikasit kharne ke dihasa me undhit pahal ewm avalshawk karchvai ke jawye.
(ix) Need to conduct second survey of 93 Km Aurangabad-Chalisgaon Railway line

SHRI UNMESH BHAIIYASAHEB PATIL (JALGAON): The survey of 93 km Aurangabad-Chalisgaon railway line was done in 2017-18 at a cost of 1690 crore and the project was shelved due to an estimated negative rate of return of -2.23. This railway line assumes strategic and economic importance because it can act as a link between the proposed Delhi-Mumbai Economic Corridor and proposed Mumbai-Nagpur Samruddhi Mahamarg. The construction of this railway line will facilitate economic development of Maharashtra and also give a fillip to tourism due to proximity of Chalisgaon to the UNESCO World Heritage Site of Ajanta and Ellora Caves. With proper planning and utilization of this route for freight and transportation purposes, it can yield revenue for the railways. Hence, in view of the vast potential for economic development and employment generation, I demand that the Government should conduct a second survey on this line at the earliest and take into account its potential.
(x) Regarding concerns of taxpayers with respect to GST

SUSHRI DIYA KUMARI (RAJSAMAND): GST has to a great extent helped to unify the Indian market and has brought about many important reforms in the arena of taxation. But, I would like to put forward few concerns that the taxpayers are facing. Taxpayers who come under GST have not been given any relief in the late fees because of which they are still unable to file returns. The Input Credit limit of 10% and the monthly time period of the same should be rethought and extended to a period of 3 to 6 months. Apart from this, the monthly returns filed under 3-B, since July 2017 have no scope for correction which is creating problems which would result in the inability to contribute to the annual tax assessment as well. Lastly despite the Hon'ble Finance Minister’s extension to file TRANS-1 till December 2019, the form is still unavailable on the portal.
श्री मनोज कुमार लियारी (उत्तर पूर्व दिल्ली): उत्तर पूर्व दिल्ली संसदीय क्षेत्र विश्व का सबसे घनी आबादी वाला क्षेत्र है। वस विधान सभा क्षेत्र इसमें समाहित हैं, लिमापुर, बुराडी यमुना नदी के पश्चिम ओर कराबल नगर, घोड़ा, सीलमपुर, रोहताश नगर, सीमापुरी, बाबरपुर, मुस्तफाबाद गोकलपुर पूर्व के क्षेत्र में सिर्फ दो महाविद्यालय हैं जबकि आबादी लगभग पचास लाख है। हर वर्ष जहाँ हजारों बच्चे महाविद्यालय की कमी के कारण नियमित कक्षाओं से वंचित रह जाते हैं और उनकी उच्च शिक्षा पर इसका असर साफ देखा जा सकता है और यह उनके मनोबल पर भी असर करता है।

माननीय सभापति जी हमारे संसदीय क्षेत्र में बड़ी संख्या में प्रवासी जन रोजी रोजगार के लिए देश के विभिन्न राज्यों से आकर निवास कर रहे हैं जिनके बच्चे उच्च शिक्षा के बेहतर माहौल से वंचित हैं और अगर हमारे नौजवान शिक्षित नहीं होंगे तो देश के विकास में उनका अभेद्य योगदान नहीं होगा। समुचित शिक्षा अभाव कई अवांछित परिस्थितियों का निर्माण करता है। ऐसे महाविद्यालय के लिए सरकारी जमीन भी उपलब्ध है। अत: सदन के माध्यम से माननीय शिक्षा मंत्री जी से अनुरोध करता हूं कि कम से कम दो नये महाविद्यालय बनाने की कृपा करें, जिनमें छात्रावास की सुविधाओं तथा स्वास्थ्य सेवाओं को नियमित शिक्षा और उत्कर्ष के लिए बेहतर माहौल मिल सके।

(xi) Need to establish two colleges in North East Delhi Parliamentary Constituency, Delhi
(xii) Need to frame policy to encourage investment from Indian Venture Capitalists in Startups in the country

SHRI TEJASVI SURYA (BANGALORE SOUTH): The present Government, has extensively supported innovation in the technology sector over the last 6 years. My city Bengaluru accounts for the largest number of startups in the country with more than 9,300 setting up their establishment since 2010.

While the blooming of the startup culture is good for the country’s economic prosperity, many startups are dependent on foreign funding, especially from China. At a time when the Modi government is working towards safeguarding the country’s interests against the Chinese aggression, through the ban on foreign apps, it is important to note that startups with foreign investment will also harm the nation’s interests. It would do a lot of good if startups are truly Indian.

In light of the above, I urge the government to come up with incentives and policies encouraging Indian Venture Capitalists to invest more and more in desi startups.
(xiii) Need to establish a Kendriya Vidyalaya in Bangaon Parliamentary Constituency, West Bengal

Shri Shantanu Thakur (Bangaon): In the wake of the pandemic, the situation is critical for the youth of the parliamentary constituency, which has an estimated population of 16 lakh. The youth of this area are filled with energy and creative thinking, which will be a source of inspiration and innovation in the country. This is why it is considered appropriate to establish a Kendriya Vidyalaya in Bangaon Parliamentary Constituency, which is a necessity in this area. The proposal is well-supported by the proposal of the parliamentary constituency, which has a population of 1.6 million. The area needs to establish a Kendriya Vidyalaya in Bangaon Parliamentary Constituency, which will not only provide quality education to the youth here but will also serve as a role model for the rest of the country. Therefore, it is considered appropriate to establish a Kendriya Vidyalaya in Bangaon Parliamentary Constituency.
(xiv) Need to include certain castes of Gorkha and tribal communities of West Bengal in the list of SC/ST

श्री जॉन बला (अलीपुरद्वार): मेरा केन्द्र सरकार से अनुरोध है कि गोरखा व आदिवासी समुदायों की विभिन्न ग्यारह - ग्यारह जातियों को अनुसूचित जाति व अनुसूचित जनजाति का दर्जा दिए जाने के सम्बन्ध में आवश्यक कदम शीघ्र उठाए जाये। डुवर्स (नार्थ बंगाल) की यह मांग काफी समय से चली आ रही है।
(xv) Regarding illegal bajri quarrying in Baran district of Rajasthan

श्री दुष्यंत सिंह (झालावाड़-बारां): मेरे संसद का ध्यान मैंने लोक सभा क्षेत्र झालावाड़ - बारां (राजस्थान) के बारां जिले में चल रहे बजरी के कठिन अवैध खनन की ओर आकर्षित करना चाहता हूँ।

यह विषय इसलिए जरूरी है, क्योंकि पिछले चार माह में ही इस अवैध कारोबार से जुड़े आठ श्रमिक हादसों में अपनी जान गंवाने वाले हैं। अगस्त के दौरान जिले के किशनपुरा के पास पार्वती नदी से बजरी खनन करते हुए चार लोगों की मृत्यु हुई, इससे पूर्व तीन अन्य हादसों में चार जाने गई है।

मेरा सरकार से अनुरोध है की बारां में बजरी के कठिन अवैध कारोबार की स्वतंत्र एजेंसी से जांच कराई जाए एवं हादसों के पीडित परिवारों को राज्य सरकार से पाँच-पाँच लाख रुपये का मुआवजा दिलवाया जाए।

(xvi) Need to provide rail facility in Khargone Parliamentary Constituency, Madhya Pradesh

श्री गजेन्द्र उमराव सिंह पटेल (खरगौन): आजादी के इतने बरस बाद भी मेरे संसदीय क्षेत्र, खरगौन- मध्य-प्रदेश में आज भी आम जनता के लिए रेल सुविधा उपलब्ध नहीं है। महोदय, आपसे विनिमय अनुरोध है कि पूर्व में जो रेलवे का सर्वोच्च है उसी के आधार पर मेरे संसदीय क्षेत्र में रेल सुविधा पहुँचाई जाए जिससे जनजातीय क्षेत्र को आसानी से आवागमन की सुविधा हो एवं काम ध्वस्त की तलाश में दूरदराज ना जाना वाले और उन्हें अपनी विक्रय सामग्री ले जाने के लिए एक जगह से दूसरी जगह व्यापारिक सुविधा उपलब्ध हो सके।
(xvii) Regarding functioning of Armed Forces Tribunal

SHRI JASBIR SINGH GILL (KHADOOR SAHIB): Armed Forces Tribunals function under the Ministry of Defence. The aim of AFTs was to bring speedy justice to our soldiers without struggling in different courts of Law & without spending hefty fees of lawyers which they cannot afford. However, the Judgments passed by Principal AFTs Bench are not being implemented by MOD in right earnest. Government should give contempt powers to AFTs by making necessary amendments to AFTs Act so as to make the justice delivery more effective for our soldiers.
Regarding judicial enquiry into death of protestors during CAA Protests in Assam

SHRI GAURAV GOGOI (KALIABOR): During the spontaneous street protest against the “Citizenship Amendment Act (CAA)” that broke out across the state of Assam in December 2019, five young, unarmed protesters died as a result of police firing. These young protesters were Sam Stafford, Dipanjal Das, Abdul Alim, Ishwar Nayak, and Dwijendra Panging.

The people of Assam do not accept the Citizenship Amendment Act because this violates the Assam Accord and makes the NRC toothless. Further the Act is unconstitutional as it violates the basic structure of the Indian Constitution and is against articles 14 and 21. Therefore, I urge the Government to set up a judicial enquiry into the death of 5 young martyrs during the anti CAA protests in Assam.
(xix) Regarding Special Investigation Team and Judicial Enquiry Committee into handling of COVID-19 situation in Telangana

SHRI KOMATI REDDY VENKAT REDDY (BHONGIR): I express my long held shock and dismay at the deplorable state of affairs in Telangana over the Covid-19 situation under the present Government. The Telangana High Court expressed alarm at the present Government on multiple occasions for misleading the people on Covid-19 data. I ask the Central Government for nothing less than an autonomous Special Investigation Team and a Judicial Enquiry Committee to look into the Telangana State Government’s handling of the covid-19 situation. People need comprehensive data accounted for each and every day since the pandemic began at the district level and an honest quantitative and qualitative audit of the Government’s actions. The people of Telangana need the truth and nothing less will be accepted. This is after all, a matter of our lives and wellbeing and no one has the right to take liberties with it, let alone the Government.
Regarding setting up of Kendriya Vidyalaya in North Chennai

DR. VEERASWAMY KALANIDHI (CHENNAI NORTH) : North Chennai is one of the biggest Lok Sabha constituencies in Tamil Nadu. All classes of people working in various Central/State Government organizations and below poverty line are living here. Though this Constituency is a part of Chennai Metropolitan city, it is unfortunate that this constituency does not have even a single Kendriya Vidyalaya so far. People are facing a lot of difficulties and they are deprived of the facility of quality and affordable education. This Constituency has a population of about 30 lakh people. Despite the Union Government’s target of opening 500 new KVs in the country, no action has been taken to open a KV in North Chennai so far. Adequate land is available here for setting up of Kendriya Vidyalaya.

I humbly urge upon the Union Government to take necessary steps for opening of one Kendriya Vidyalaya at North Chennai, Tamil Nadu at the earliest.
(xxi) Regarding payment of dues to PSUs

SHRI LAVU SRIKRISHNA DEVARAYALU (NARASARAOPET): Today the industry and economy is awaiting a stimulus package from the Government to boost growth. Even before stimulus, the Central Government must take note of unpaid dues to PSUs like power gencos, toll concessionaires, and sugar mills. These dues are estimated to add up to more than 7.5 lakh crores and releasing these amounts will itself act like a mini-stimulus to the economy.

I request that the details of these receivables be uploaded immediately on the GSTN portal, after authentication from different departments. Banks can be advised to use the greater liquidity provided to them by the RBI and provide loans upto 90% of receivables. The Government can also bear the interest on these at the same rates as bank charges until the bills are cleared. This will give PSUs much needed cash flow and further ramp up expenditure, thus kickstarting the growth engine.
(xxii) Regarding reconstruction of library of ancient Nalanda University in Bihar

Shri Koushaleendra Kumara (Nalanda): Nalanda, ancient Buddhist University in Bihar, is the ancient Nalanda University of the past. Its reconstruction is required. It is known that the Nalanda University was a complete Buddhist University. The Nalanda University was ruled by the Guptan Dynasty's King Kumara in 450-470 CE. It was an example of Thapayana. There were about 10,000 to 20,000 students in the library. The library contained about 3,000,000 books. Nalanda was India's largest and foremost Buddhist University. Mahayana and Hinayana Buddhism, as well as many other countries, were studied there. The library was also a place for monks to gather knowledge. The library was a part of the library system, which was responsible for the education of the monks. This library was also a place for monks to gather knowledge. The library was also a place for monks to gather knowledge.

San 1199 in Turk, the Shastra and other countries, which was called the Khalji family, destroyed Nalanda in 1199 CE. It is said that in this library, there were 3,000,000 books, which were destroyed by fire for three months. It is said that this was done to prevent the destruction of the books in the library. The library was also a place for monks to gather knowledge.
Regarding approval of Project under AMRUT Scheme in Cuttack – Odisha

SHRI BHALRTRUHARI MAHATAB(CUTTACK): Union Government has launched Atal Mission for Rejuvenation and Urban Transformation (AMRUT) with the aim of providing basic amenities like water supply, sewage, parks and urban transport etc. to improve the quality of life especially for the poor and the disadvantaged. Odisha Government had submitted a project with a cost of Rs.3700 crore for development of storm water drainage systems in AMRUT cities which has not been approved yet. A large number of drainage systems in many urban areas of Odisha have collapsed resulting in flooding. This can be seen during rainy seasons in major cities like Cuttack, Puri and Bhubaneswar.

Proper disposal of surplus rainwater is essential to avoid water logging problems and keeping in view the projected rate of urbanization, a 50 year planning has been done. I would urge upon the Government to approve project under AMRUT scheme for the improvement of storm water drainage system in Cuttack and other urban areas of Odisha.
श्री मलूक नागर (बिजनौर): श्री राम जन्मभूमि से संबंधित वर्ष 1976 में एसआई के पूर्व क्षेत्रीय निदेशक की रिपोर्टनुसार मस्जिद के नीचे मंदिर में मिले अवशेष करीब 8वीं से 11वीं शताब्दी के हैं, उन दिनों करीब 300 वर्षों तक गुर्जर प्रतिहार राजाओं का राज था और रिपोर्ट में बताया गया है कि गुर्जर प्रतिहार राजाओं ने यह मंदिर बनवाया था माननीय सुप्रीम कोर्ट के आदेश से संबंधित कोर्ट की प्रोसिडिंग में भी इसका जिक्र है और इसको भी आधार मानकर आदेश आया था। फिर भी गुर्जर समाज व पिछड़े (गुर्जर, जाट, यादव, पाल, सैनी आदि) किसी को भी ‘श्रीराम जन्मभूमि तीर्थ क्षेत्र में ट्रस्टी नही बनाया है। उपरोक्त विषय से संबंधित मुद्दे को मैंने सामाजिक न्याय और अधिकारिता मंत्रालय के अनुदानों पर चर्चा के दौरान दिनांक 13-3-2020 को भी उठाया था।

अतः सरकार से मांग है कि उपरोक्त ट्रस्ट में गुर्जर सदस्य व पिछड़े सभी समाजों से भी सदस्य मनोनीत किये जाए।
Need to increase Government spending on online Education in view of COVID – 19 Pandemic

SHRIMATI SUPRIYA SADANAND SULE (BARAMATI): The COVID-19 pandemic has changed the educational scenario in our country and the manner in which education is imparted to children. Many private educational institutions have made their classes online and their learning content available to students digitally. Though this evades the problem of infection susceptibility, the question of accessibility of such online education among students remains unaddressed. Many children from low-income households, from rural areas and urban slums do not have proper access to digital tools like computers and laptops. Internet connectivity is also an important concern for these students, which needs to be addressed. Thus, there is a need to promote online education and make digital learning tools accessible to all children. I urge the Centre to increase spending on online education and redirect spending from physical infrastructure at schools to digital infrastructure for students.
(xxvi) Regarding relief measures for victims of COVID-19 Pandemic

ADV. A.M. ARIFF (ALAPPUHA): Ruination of people’s lives shows the scourge of the Covid pandemic and the knee jerk response of the Government. The abrupt and unplanned lockdown with just four hours notice has imposed further inhuman miseries on the vast majority of our people. The plight of the migrants who continue to be tormented, anguished and keep losing lives through hunger, exhaustion and accidents is unbearable. The lockdown has neither strengthened our capacities to combat the pandemic nor has it provided any required relief to the people to survive in these conditions, so the central Government must take urgent steps for cash transfer of Rs. 7500 per month for a period of six months to all families outside the income tax paying bracket and free distribution of 10 kg food grains, per individual, per month for a period of six months.
NATIONAL COMMISSION FOR HOMOEOPATHY BILL, 2020
AND
NATIONAL COMMISSION FOR INDIAN SYSTEM OF MEDICINE BILL, 2020
(As passed by Rajya Sabha)

THE MINISTER OF HEALTH AND FAMILY WELFARE, MINISTER OF
SCIENCE AND TECHNOLOGY AND MINISTER OF EARTH SCIENCES (DR.
HARSH VARDHAN): Sir, on behalf of my colleague, Shri Shripad Naik, I rise
to move that the National Commission for Homoeopathy Bill, 2020, as passed
by Rajya Sabha, be taken into consideration.

I beg to move:

“That the Bill to provide for a medical education system that improves
access to quality and affordable medical education, ensures availability
of adequate and high quality Homoeopathy medical professionals in all
parts of the country; that promotes equitable and universal healthcare
that encourages community health perspective and makes services of
Homoeopathy medical professionals accessible to all the citizens; that
promotes national health goals; that encourages Homoeopathy medical
professionals to adopt latest medical research in their work and to
contribute to research; that has an objective periodic and transparent
assessment of medical institutions and facilitates maintenance of a
Homoeopathy medical register for India and enforces high ethical
standards in all aspects of medical services; that is flexible to adapt to
the changing needs and has an effective grievance redressal
mechanism and for matters connected therewith or incidental thereto, as
passed by Rajya Sabha, be taken into consideration.”
As directed by you now, I would also like to simultaneously request for moving another Bill, on behalf of my colleague, Shri Shripad Naik. Sir, I rise to move that the National Commission for Indian System of Medicine Bill, 2020, as passed by Rajya Sabha, be taken into consideration.

I beg to move:

“That the Bill to provide for a medical education system that improves access to quality and affordable medical education, ensures availability of adequate and high quality medical professionals of Indian System of Medicine in all parts of the country; that promotes equitable and universal healthcare that encourages community health perspective and makes services of such medical professionals accessible to all the citizens; that promotes national health goals; that encourages such medical professionals to adopt latest medical research in their work and to contribute to research; that has an objective periodic and transparent assessment of medical institutions and facilitates maintenance of a medical register of Indian System of Medicine for India and enforces high ethical standards in all aspects of medical services; that is flexible to adapt to the changing needs and has an effective grievance redressal mechanism and for matters connected therewith or incidental thereto, as passed by Rajya Sabha, be taken into consideration.”

सर, बहुत ही संक्षेप में इन दोनों बिल्स के बारे में मुझे इस सदन को केवल इतना कहना है कि इस सदन ने 50 साल पहले 1970 में इंडियन सिस्टम्स ऑफ मेडिसिन को रेगुलेट करने के लिए इंडियन मेडिसिन सेंट्रल काउंसिल एवं बनाया और फिर 1973 में इसी प्रकार से होम्योपैथी का सेंट्रल काउंसिल एवं बनाया। लगभग 50 वर्ष के बाद इन दोनों संस्थाओं के माध्यम से, जिनके अंतर्गत सेंट्रल काउंसिल फॉर इंडियन सिस्टम्स ऑफ मेडिसिन और सेंट्रल काउंसिल फॉर होम्योपैथी की आर्मेनाइजेशन से बनाया गया था, इंडियन सिस्टम्स ऑफ मेडिसिन और होम्योपैथी को देश में मॉनिटर करने के लिए, उनकी मेडिकल एजुकेशन को देखने के लिए, उनके
चार सार के लिए, उनकी उपलब्धता आम जनता तक पहुँचाने के लिए ऐसा महसूस किया गया कि जिस प्रकार की जिम्मेदारी इन संस्थाओं को निभानी चाहिए, वे संस्थाएं इस प्रकार की जिम्मेदारी नहीं निभा रही हैं और इन संस्थाओं में द्राफ्टपरिसी का भी अभाव हो गया। जिस प्रकार से वर्षों के अंदर वेटिकल काउंसिल ऑफ इंडिया भ्रष्टाचार से ग्रसित हो गई, उसी प्रकार से ये संस्थाएं भी भ्रष्टाचार से प्रभावित हो गई। हम सब जानते हैं कि आयुवेद और हमारे जो इंडियन सिस्टम्स हैं, जिनको हम ट्रेडिशनल सिस्टम्स कहते हैं, इंडिजिनस सिस्टम्स जिसे कहते हैं, ये हमारे भारत के प्राचीनतम स्वास्थ्य के क्षेत्र से जुड़े हुए सिस्टम्स हैं। आयुर्वेदिक रेमेडीज़ के बारे में वेदों में चर्चा है और विशेषकर अथवेद में बहुत विवाद से इतनी चर्चा है कि कभी-कभी आयुवेद को अथवेद का ऑफ शूट ही माना जाता है। नरेंद्र मोदी जी के नेतृत्व में वर्ष 2014 में जब हमारी देश में सरकार बनी, तो उन्होंने इंडियन सिस्टम्स ऑफ मेडिसिन का 9 नवम्बर, 2014 को एक नया डिपार्टमेंट आयुष मंत्रालय स्थापित किया।

पहली बार देश में नेशनल आयुष मिशन स्थापित किया गया। इन संस्थाओं में भ्रष्टाचार को खत्म करने के लिए और द्राफ्टपरिसी को लागू करने के लिए, जिस प्रकार से मेडिकल काउंसिल ऑफ इंडिया को रिप्लेस करके नेशनल मेडिकल कमीशन बनाया गया, जिसके बारे में इस सदन में बहुत चर्चा हुई है और उस बिल को आज देश में कानून के रूप में हम परिवर्तित कर चुके हैं। वर्ष 2016 में प्रधान मंत्री जी के आदेश पर...(व्यवधान)

माननीय अध्यक्ष : माननीय मंत्री जी, समय बहुत संक्षिप्त है।

डॉ. हर्ष वर्धन : सर, मैं सिर्फ दो मिनट लूँगा।

माननीय अध्यक्ष : नहीं, अब आप समाप्त कीजिए।

डॉ. हर्ष वर्धन : सर, मैं दो मिनट में समाप्त कर रहा हूँ...(व्यवधान) सर, बैकाउंड तो बतानी पड़ेगी।

माननीय अध्यक्ष : नहीं। सब आपका बैकाउंड समझ गए हैं।

डॉ. हर्ष वर्धन : वर्ष 2016 में...(व्यवधान)
माननीय अध्यक्ष : सब समझ रहे हैं। एक बजने वाला है।

...(प्रवाहान)

डॉ. हर्ष वर्धन : वर्ष 2016 में नीति आयोग को कहा गया और नीति आयोग ने यह सुझाव दिया कि जिस प्रकार से नेशनल मेडिकल कमीशन बनाया जा रहा है, उसी प्रकार से होम्योपैथी और इंडियन सिस्टम्स ऑफ मेडिसिन के लिए भी किया जाए। ये जो आज दो बिल यहाँ चर्चा के लिए लाए गए हैं, इनके संदर्भ में मुझे इतना कहना है कि बहुत विस्तार से चिकित्सक के बाद इनको बनाने के बाद राज्य सभा में लाया गया था। वहाँ इनको डिपार्टमेंट रिलेटेड स्टैंडिंग कमेटी को भेजा गया। उनकी रिकमंडेंशन्स में से भी 14 रिकमंडेंशन्स को मानने के बाद इसको वापस कैबिनेट में लाया गया। कैबिनेट में लाये के बाद वहाँ से प्रस्तावित होकर यह दोबारा राज्य सभा में गया और राज्य सभा में विस्तार से चर्चा के बाद इन दोनों बिलों को यूनैनिमल पास करने के बाद आज ये दोनों बिल लोक सभा के सामने आए हैं। इन दोनों कमीशन्स के बनने के बाद जिस प्रकार से नेशनल मेडिकल कमीशन का एक हिस्टॉरिक रिफॉर्म भारत के अंदर आजादी के 70 साल के बाद इंटरडिस्काइन भारत की नीति आयोग को कहा गया और होम्योपैथी को भी, इन कमीशन्स के बनने के बाद एक बहुत अधिक प्रगति के पथ पर, ट्रांसपैरिसे के पथ पर, कर्पोरेट फ्री एजुकेशन और मेडिकल एजुकेशन के बड़े रिकॉर्ड्स की दिशा में हम आगे बढ़ाने में सफल होगे।

इसके साथ-साथ में यह भी सूचित करना चाहता हूँ कि सरकार आने वाले समय के अंदर योगा के बारे में भी इसी प्रकार का एक कमीशन बनाने के बारे में विचार कर रही है। इसे चाहता हूँ कि सदन इसके बारे में जो भी चर्चा करना चाहता है, वह कर और इसको यूनैनिमल पास करे, क्योंकि यह हमारी भारतीय चिकित्सा पद्धतियों के संदर्भ में बहुत बड़ा मेजर मेडिकल रिफॉर्म है।

माननीय अध्यक्ष : प्रस्ताव प्रस्तुत है:

"कि ऐसी चिकित्सा पद्धति के लिए, जो भारत के सभी भागों में क्वालिटी और सर्वसामान्य चिकित्सा शिखर तक पहुंच का सुधार करती है, जो पर्याय और उच्च क्वालिटी के होम्योपैथी चिकित्सा व्यापक सामान्य उपलब्धता को सुनिश्चित करती है; जो ऐसी सामर्पण और सार्वभौमिक स्वास्थ्य देख-देख का संवर्धन करती है"
जिससे सामुदायिक स्वास्थ्य परिप्रेक्ष्य को बढ़ावा मिलता है तथा सभी नागरिकों के लिए होम्योपैथी चिकित्सा व्यवसायियों की सेवाओं को सुगम और वहन करने योग्य बनाती है; जो राष्ट्रीय स्वास्थ्य संबंधी लक्ष्यों का संचरण करती है; होम्योपैथी चिकित्सा व्यवसायियों को उनके कार्य में नवीनतम चिकित्सा अनुसंधान को अंगीकृत करने और अनुसंधान में योगदान देने के लिए प्रोत्साहित करती है; जिसका लक्ष्य चिकित्सीय संस्थाओं का आवधिक और पारदर्शी रूप से मूल्यांकन करना है और जो भारत के लिए होम्योपैथी चिकित्सा रजिस्टर के रखरखाव को सुकर बनाती है तथा चिकित्सा सेवाओं के सभी पहलुओं में सभी नैतिक मानकों को प्रवृत करती है; जो परिवर्तनशील आवश्यकताओं के प्रति अनुकूल होने के लिए नमनीय है और प्रभावी शिकायत समाधान तंत्र को रखती है तथा उससे संबंधित या उसके आनुषंगिक विषयों का उपबंध करने वाले विधेयक, राज्य सभा द्वारा यथा पारित, पर विचार किया जाए।"

"कि एक ऐसी आयुर्विज्ञान शिक्षा प्रणाली का, जो क्वालिटी और सस्ती आयुर्विज्ञान शिक्षा तक पहुँच में सुधार करती है, देश के सभी भागों में भारतीय आयुर्विज्ञान प्रणाली के पर्याप्त और उच्च गुणवत्ता वाले चिकित्सा व्यवसायियों की उपलब्धता और सस्ती को सुनिश्चित करती है; जो ऐसी सम्पादित और सार्वभौमिक स्वास्थ्य देखरेख का समर्थन करती है; जो सामुदायिक स्वास्थ्य परिप्रेक्ष्य को प्रोत्साहित करती है तथा ऐसे चिकित्सा व्यवसायियों की सेवाओं को सभी नागरिकों के लिए उपलब्ध बनाती है; जो राष्ट्रीय स्वास्थ्य संबंधी उद्देश्यों का समर्थन करती है; ऐसे चिकित्सा व्यवसायियों को, उनके कार्य में नवीनतम चिकित्सा अनुसंधान अपनाने और अनुसंधान कार्य में सहयोग देने हेतु प्रोत्साहित करती है; जिसका उद्देश्य चिकित्सा संस्थाओं का आवधिक और पारदर्शी रूप से मूल्यांकन करना है और जो भारत के लिए भारतीय आयुर्विज्ञान प्रणाली के चिकित्सक रजिस्टर को बनाए रखने को सुकर बनाती है तथा चिकित्सकीय सेवाओं के सभी पहलुओं में उच्च नैतिक मानकों को प्रवृत्त करती है; जो परिवर्तनशील आवश्यकताओं से समाजसेवा बैठक के लिए नमनीय है और जिसमें एक प्रभावी शिकायत समाधान तंत्र सम्भालता है तथा उससे संबंधित या आनुषंगिक विषयों का उपबंध करने वाले विधेयक, राज्य सभा द्वारा यथा पारित, पर विचार किया जाए।"
DR. SHASHI THAROOR (THIRUVANANTHAPURAM): I have some concerns particularly about the National Commission for Indian System of Medicine Bill. India we know is a land of ancient and diverse medicine systems and while promoting the idea of healthy lifestyle where equal importance is given to physical and mental well being, the Indian system of medicine actually manages to focus on the overall wellness of the person, unlike the western system which essentially treats specific symptoms to tackle diseases. And also, as we have heard from the Minister, we have amalgamated the profound influences of medicinal geniuses from other civilisations, such as from Germany which developed Homoeopathy or those from Greece which has devised thought provoking techniques that added immense value to the field of Unani medicine. Now, AYUSH is doing what it can but the preventive and curative measures prescribed by our Indian systems, which have originated in the Vedic period, are inspired by nature and have been prescribed by celebrated authorities of our centuries, are still practised in the homes of our country. Coupled with the use of plant products as they have a medicinal basis and a history of stories of remarkable results, the popularity of these systems all over the country makes the responsibility of the Government to pass a good Bill all the more important.

Now, we know the Government created a Department of Indian Systems of Medicine and Homoeopathy in 1995, but our concerns about this go back well before that. The abundant potential that Indian medical systems have to offer at a time of COVID-19, the pandemic and all the stresses and strains on
the healthcare systems of our country, means that this issue is all the more important. This is why I am concerned, Mr. Speaker, that there are eight deficiencies. मैं संकेत में बोलूँगा, because of the time factor, I am trying to be brief. There are eight issues I would like very much the hon. Minister to take a good look at Para One, the Bill seeks to fortify and regulate the existing medical education system so that it is capable of churning out high quality medical professionals.

It has prescribed, as he mentioned, an effective grievance redressal mechanism, periodic assessment and so on, but it has ignored many other recommendations of the Standing Committee in its report on the Bill, which I think is a sad reflection on the Government’s penchant to bypass parliamentary institutions and processes.

First, Sir, Yoga and Naturopathy have been excluded. We know the Government is rightly proud of its role in popularising Yoga internationally with the United Nations International Yoga Day and so on. Naturopathy is also very well known and practised in our country as a drugless treatment of disease by applying the simple laws of nature to people’s wellness. But this Commission, which is supposed to represent an all-encompassing varied body in overseeing all the Indian systems of medicine, arbitrarily excludes both Yoga and Naturopathy. They otherwise fall under the ambit of the AYUSH Ministry as I understand it. The Standing Committee recommended creating a Board of Yoga and Naturopathy to provide representation to these two important fields. But the Ministry has not unfortunately done this in the Bill. I believe the hon.
Minister told the Rajya Sabha that there would be a separate Bill concerning Yoga and Naturopathy, but then I fail to understand the rationale behind bringing multiple legislations on the same issue when a simple provision in the current Bill would have adequately sufficed. If Yoga and Naturopathy are also Indian systems of medicine, as acknowledged by the AYUSH Ministry itself, why are they not included in a Bill that seems to cover the entire gamut of Indian systems? This is a very important issue because you are creating a convoluted process of multiple legislation unnecessarily.

Secondly, the Government has not only ignored the recommendations of the Standing Committee, it seems to have basically violated the Constitution in conferring to the Central Government itself the appellate jurisdiction provided by the legislation. An appeal can be preferred against any decision of this new National Commission to the Central Government which will be the final decision-making authority. So, while it is understandable that the Government is trying to do something to professionalise this – I am giving you just two sentences on each of my eight points – with the principle of separation of powers, the Government cannot create the Commission and also have the final say on these matters. The setting up of an appellate tribunal has been recommended by the Standing Committee and ignored by the Government.

Thirdly, Sir, there is no examination or training for existing teachers. They have talked about a National Teachers Eligibility Test for post-graduates of varied disciplines but they do not do anything to actually certify the standards of the current teachers of these disciplines. So, while including them
in an eligibility test meant for students might be unreasonable, some sort of minimum qualifying test and standards before registering as a certified practitioner would be in keeping with the professionalism implied in this Bill. Since National Teachers Eligibility Test is the only means of becoming a teacher once the Bill comes into effect, it would ruin the prospects of any practitioner who has a practical insight of the subject but does not have the degree and will therefore be made to pass the exam.

Fourthly, Sir, it leaves wide open risks of practising quackery because there are no clear boundaries in the interface it proposes between the Indian systems of medicine and modern systems or allopathic systems of medicine. If you allow practitioners of Indian systems to prescribe allopathic medicine and perform allopathic procedures, you are compromising the entire medical field in this country. I am surprised that Dr. Harsh Vardhan as an allopathic doctor himself would allow this to pass without clarity in the Bill to ensure that there is absolutely no way this can lead to quackery. And, importantly, Clause 34 of the Bill permits a practitioner of an Indian system of medicine to continue practising even in the absence of any recognised medical qualification. I think that this completely is a dangerous signal. I am sure that the medical profession in this country would be extremely concerned about the risk of quackery following.
Fifthly, Sir, an exit test should not be the only sufficient yardstick to achieve a practising licence. One needs, obviously, assessment processes which have been circumvented here. Sir, I see that you are anxious about the time. I am being very brief.

HON. SPEAKER: Please conclude.

DR. SHASHI THAROOR: Sixth, Sir, there are very arbitrary exemptions for Pre-Tib and Pre-Ayurveda courses in this Bill because it is perplexing to find that candidates desirous of pursuing these do not even have to write the NEET examination.

Seven, I mentioned, Sir, during the debate on Ayurveda that we need more research and documentation. This is completely not provided for in the Bill and I request that we can actually create ... (Interruptions)

The same rules apply across the Board. We need to have a Board of Research under the National Commission not provided for in the Bill.

Finally, Sir, there is a failure here to develop systems worthy of international recognition because we have a big challenge in getting Indian systems to be understood and recognized globally by insisting on certain standards and levels. This submission vitiates the core purpose of the Bill. Therefore, Sir, by excluding two vital Indian systems – Yoga and Naturopathy; by proposing ineffective entry and exit tests; and by most significantly failing to acknowledge the importance of research, I really believe the Government fails in its objective to promote the Indian systems of medicine through this Bill. And, therefore, it really should take these suggestions into account, broaden
the scope of consultation, look again at the Standing Committee reports, and give us an opportunity to transform this sector and make it truly world-class for the 21st century.

Thank you very much, Mr. Speaker.

माननीय अध्यक्ष : श्रीमती प्रतिमा मण्डल जी ।

आप एक मिनट में अपनी बात कह दें।

...(व्यवधान)

माननीय अध्यक्ष : कल्याण दा, आज सदन का पहला दिन है। सदन के पहले दिन सदन में कुछ प्रोडक्टिविटी दिखनी चाहिए, इसलिए मैं व्यक्तिगत रूप से आपसे आपह करूंगा किसे आज दोनों विषयों को पास करना है। यह मेरा आपसे आग्रह है।

...(व्यवधान)

माननीय अध्यक्ष : आज विशेष परिस्थितियों के अंदर में सभी माननीय सदस्यों से कहना चाहता हूं कि इस विषय पर बोलने वाले वक्ताओं को मैं ले करने की परमिशन भी देता हूं।

...(व्यवधान)

माननीय अध्यक्ष : आपसे मैं रिक्वेस्ट कर रहा हूं। कल्याण जी हमेशा बात मानते हैं।

Now, coming to Section 9(6), it states that in order to overcome the scenario of pending judgement, it is essential to fix the time period within which the Central Government will be obliged to resolve the matter. Also, there is a need to mention within the Bill whether or not the verdict of the Central Government is final or the aggrieved person has a right to approach the Judiciary.

Now, according to Section 15, sub-section 1, holding PG NET will be an added burden on both the students and the examiner. When NET is opted as the method for giving licence to the candidate, then why not for giving admission to PG courses? The rank in National Exit Test itself can be the parameter to get admission into a post-graduate course.

Now, Section 17 talks about National Teachers’ Eligibility Test for Homeopathy. There are many teachers who do not hold PG degree but are part of the system and they will remain in the system for quite a long period of time. So, there must be a provision stating some sort of refreshers’ course being conducted for them.

According to Section 14(1), now the meeting of autonomous board need not be so frequent. It hardly provides the scope of qualitative research within a months’ time. Thus, meeting should be held on a daily basis.
Now, coming to Section 14(3), here again, the time period within which the grievance must be redressed is not mentioned. Regarding Section 26(1), Sir, here is a crucial suggestion to improve the Homeopathy treatment in our country. The students must compulsorily be educated upon the new and basic technology of the medical field, that is, MRI, CT Scan, etc. So, this will be a holistic approach. Technology does not encroach in the field of medicine.

13.00 hrs

The National Institute of Homoeopathy at Kolkata has been striving to add to the legacy of this honourable system of medicine since 1975. The International Homoeopathic Conference-cum-Scientific Convention organized by Ministry of AYUSH on World Homoeopathy Day, 2020 was in collaboration with the National Institute of Homoeopathy, Kolkata at the Vishwa Bangla Convention Centre. Here, I would like to request the hon. Minister to carry on such collaboration and promotion of homoeopathy through the esteemed institute of our State.

As far as the National Commission for Indian System of Medicine Bill is concerned, we feel that there is no separate representation from Sowa-Rigpa for the field of Ayurveda, Unani and Siddha. The PMO has recently cleared the proposal of turning National Research Institute of Sowa-Rigpa into an autonomous body and renaming it as National Institute of Sowa-Rigpa. There must be a separate representation from this particular institution or from any other institution that conducts ‘Menpa Kachupa’ which is equivalent to bachelor
degree of Sowa-Rigpa. The aim of the Bill should be to bring in transparency but that is not achievable if almost all the Members are nominated by the Central Government. There must be more elected Members from the States. Thirdly, sections 15 and 16 talk about National Exit Test and Postgraduate Test. The NET itself can serve the requirement for all PG and NET as provided in the recent National Medical Commission Bill 2019. Fourthly, once again I would like to request the hon. Minister that there should be a training course followed by a minimum qualifying test. There are many teachers who do not have postgraduation degrees. The appellate jurisdiction over the decision taken by the NCISM is being given to the Central Government. This is absolutely against the basic structure of the Constitution which proposes a separation of powers. A separate tribunal must be set up to deal with the jurisdiction related to the Commission which must be headed by a retired judge of the Supreme Court or High Court.

SHRIMATI PRATIMA MONDAL: Sir, please give me one minute. Here it is to be noted that …(Interruptions)

माननीय अध्यक्ष: माननीय सदस्य, कृपया समाप्त कीजिए।

SHRIMATI PRATIMA MONDAL: Sir, please give me one minute. Here it is to be noted that …(Interruptions)

माननीय अध्यक्ष: मैं सदन से आया हूं कि दोनों विषयों के पारित होने तक सदन का समय बढ़ा दिया जाए, लेकिन वह समय भी 15 मिनट से अधिक नहीं होगा।
*SHRIMATI SUPRIYA SADANAND SULE (BARAMATI):* Naturopathy/Yoga should have been included, Section 17, talks about teaches test PG degree and part of system Please guide what is going to be the situation. Autonomous board will be there but who will manage it. Homoeopathy/Ayurveda must be encouraged and sufficient research should be done.

*Speech was laid on the Table.*
श्री अरविंद सावंत (मुबाई दक्षिण): माननीय अध्यक्ष जी, बहुत-बहुत धन्यवाद। नेशनल कमीशन फॉर इंडियन सिस्टम ऑफ मेडिसिन बिल और नेशनल कमीशन फॉर होम्योपैथी बिल, दोनों विषय पर हम एक साथ बात कर रहे हैं। मैं ज्यादा बात नहीं करूँगा, दो मिनट में मूलभूत बात कहूँगा। पहले तो मैं खासकर होम्योपैथी बिल का स्वागत करूँगा। हमारे हिंदुस्तान के संस्कृति रहे, आयुर्वेद तो घर-घर में रहा। मां के पास जड़ी-बूटी रहती थी। हम डॉक्टर के पास बहुत कम जाते थे। वही सब दवा करती थी। आप भी यह जानते होंगे। आज एक अच्छी बात लग रही है कि सरकार इस विषय को गम्भीरता से रेगुलेट करना चाहती है। जो गलितयां पीछे हो रही थीं, 1973 में हमने एक बनाया, 1970 में हमने मेडिसिन एक बनाया, लेकिन दोनों पर चर्चा के समय मुझे एक चीज ध्यान में आ रही है, कि आप नीट की परीक्षा लेने जा रहे हैं। आज सुबह बालू जी ने एक बात कही थी, उसी बात पर मैं खासकर ध्यान आकर्षित करना चाहता हूँ।

हम एजुकेशन सिस्टम में बहुत बदलाव ला रहे हैं। मैं उसका स्वागत करूँगा और उस बदल उस पर बोलूँगा। सबसे बड़ी बात यही है कि एसएससी बोर्ड, सीबीएसई बोर्ड, आईसीएसई बोर्ड और अब हमारा इंटरनेशनल बोर्ड आ गया। इन सारे क्षेत्रों में पढ़ने वाले बच्चे जब 12वीं कक्षा के बाद नीट की परीक्षा देने जाते हैं, तो उनका सिलेबस या करीकुलम जो होता है, उसमें इतना फर्क होता है कि उनको एजाम में तकलीफ आती है। नीट की परीक्षा में पहले कौन जाएगा, पहले देखें एमबीबीएस के लिए, नहीं मिला तो बाद में फिर अल्टरनेटिव। अल्टरनेट व्या है, बीएमएस, बीएचएसएस, बीडीएस। आप देखिए पेन्डेंटिक में हमारी हालत ऐसी हुई कि हमारे पास डॉक्टर उपलब्ध नहीं हैं। फिर हमने कहा कि बीएचएमएस वाले आ जाने, बीएमएस वाले आ जाने, सभी को बुलाया।

शशि धरार साहब ने यह मुद्दा उठाया कि प्रक्रिया करने समय क्या वे एलोपैथी में प्रक्रिया करेंगे? Will you allow them to do that? That is also another part of it. एलोपैथी डॉक्टर जो होम्योपैथी की भी प्रक्रिया कर रहे हैं, यह दुर्भाग्य की बात है कि जब पेन्डेंटिक के समय होम्योपैथी के लोग इन्ते सामने आकर कहने लगे कि हमें भी कुछ करने दो, हम इनको अच्छा
इलाज करके रोगमुक्त करेंगे। फिर भी हमारा जो बिलासित सिस्टम है जिसमें एलोपथी डोमिनेंट हैं, वह एलोपथी इनको नहीं करने देती। होम्योपथी को एलाज नहीं किया। आज भी होम्योपथी के डॉक्टर कहते हैं कि हमारे पास आज भी फैनैटिक कोरोना का इलाज है, लेकिन आईसीएमआर या जो रेम्युलेट्रीज बोर्डी है, वह इन्हें प्रविक्टस नहीं करने दे रही है, आप इस पर ध्यान दें।

पन्डूर नम्बर में आपने एक्जेक्ट टेस्ट कहा, इसे आप एक्जेक्ट जात कहिए, जब आप उसे डॉक्टर बना रहे हैं, उसे रजिस्टर कर रहे हैं, आप लाइसेंस दे रहे हैं, नेशनल लाइसेंस टेस्ट कहो। नेशनल रजिस्टर टेस्ट कहो, वह कहां से एक्जेक्ट हो रहा है? मुझे एक्जेक्ट टेस्ट अच्छा नहीं लगा। आप कितनी संस्थाओं को परमिशन देंगे, यह परमिशन कौन देगा। आपने टेस्ट में भी बोर्ड बना रखा है। एक एड्वाइजरी बोर्ड टेस्ट लेवल पर भी रहेगा। कितनी संस्थाएं बनेंगी? यह मशक्कम जैसे शुरु हो जाएगा जैसे इंजीनियरिंग कॉलेज में हुआ। वहां बच्चों के एड्मिशन के लिए बुला रहे हैं कि हमारे पास आ जाओ, हमारे पास आ जाओ। कुछ फैकल्टी के लिए बच्चे जाते हैं, बाकी कोई नहीं जाता। आपको इस पर भी रेम्युलेट करना होगा। आप इसकी लिमिट रखो, ऐसा न हो कि मशक्कम जैसे बीएचएमएस की इंस्टीट्यूट खोली गई या आयुर्वेद की इंस्टीट्यूट खोली गई, वहा बच्चे नहीं मिल रहे हैं, शुरु में ऐसा होता है। अगर आप सारी सावधानियां बरतेंगे तो में दोनों बिलों का समधन करता हूं और स्वागत करता हूं। आप अच्छा काम करें और आगे बढ़ें।

माननीय अध्यक्ष: श्री भर्तृहरि महताब, आप बैठकर ही बोलिए।

श्री भर्तृहरि महताब: अध्यक्ष महोदय, मैंने ले कर दिया है।
SHRI BHARTRUHARI MAHTAB (CUTTACK): We are meeting after 175 days. One is aware that the practice of Homeopathy in India was introduced in 1810 by a French Traveller Dr. Johann Martin Honigberger with the treatment of Maharaja Ranjit Singh. Later the Homeopathy was familiarised in India by missionaries and members of Indian administration. The current estimated market size of Homeopathy is over 10,000 crore in India, with 2.25 lakh registered homeopathy practitioners. This discipline has vast opportunity to grow in India under proper monitoring and regulation of the Ministry and the Central Council on Homeopathy to be recognised as complementary system of medicine alongside allopathy. In India, now the Homeopathic treatments are being offered by the insurance companies while the homeopathic medicines is getting a recognition in the AIIMS under integrated system of medicine with a homeopathic division.

Although the recent history of Homeopathy central council (HCC) has been tainted by the corrupt practices, which has spread a negative image of the department. To recover and remedy the reputation of the Homeopathy central council (HCC), the Ministry needs to tighten its grip over the management of the Homeopathic institutions and practitioners in India. Under this bill, the Central Government has introduced the use of information technology to improve the quality and functioning of the colleges, although the Bill does not specify any modification or standardisation of the curriculum.

* Speech was laid on the Table.
across the country. To strengthen the institutional value of Homeopathy, first the Central Council needs to be stabilised itself. This Bill, which is in place due to institutional failure to update State registers of homeopathy, portrays poor condition of the management.

The role and vision of the Central Council needs to be redefined with a roadmap to give a structure to the Homeopathy discipline, which is comprehensive of academic institutes, medical professionals and the medicine producers. A strong network of health and wellness centre with dedicated department of homeopathy can be imagined under this framework.

This Bill amends the Homeopathy Central Council Act, 1973, and replace the Homeopathy Central Council (Amendment) Ordinance, 2019, that was promulgated on March 2, 2019.

The 1973 Act was amended in 2018 to provide for the supersession of the Central Council. The Central Council was required to be reconstituted within one year from the date of its supersession. In the interim period, the Central Government constituted a Board of Governors, to exercise the powers of the Central Council. The Bill amends the Act to increase the time period for supersession of the Central Council from one year to two years. The tenure has been extended through the Ordinance since the council could not be reconstituted within one year due to non-updation of State registers of homeopathy.
Under this Bill, the Central Government has introduced the use of information technology to improve the quality and functioning of the colleges. There are many functions of the National Commission for Homeopathy. The functions of the NCH include framing policies for regulating medical institutions and homeopathic medical professionals, assessing the requirements of healthcare related human resources and infrastructure, ensuring compliance by the State Medical Council of homeopathy of the regulation made under the Bill and ensuring coordination among the autonomous boards set up under the Bill.

Reconstitution of Central Council of Homeopathy: This Bill is to replace the Ordinance passed in May to extend the tenure of the Board of Governance for another year effective from the May 17, 2019.

Advisory Council for Homeopathy: The appointed council will be the primary platform through which the States or Union Territories can put forth the reviews and concerns before the NCH. Further, the Council advise on measures to determine and maintain minimum standard of medical education.

To maintain the uniformity of the course, there will be a National Eligibility-cum-Entrance test for admissions to undergraduate homeopathy education in all the medical institutions under NCH. There will be a specific manner of conducting the common counselling for admission and a common final year National Exit Test. Further there will be a Uniform Post-graduate National Entrance Test which will serve as the basis for admission into postgraduate courses at medical institutions.
There will be a separate Department under the state medical councils to receive complaints relating to professional or ethical misconduct in the field of homeopathic practitioners. The State Medical Council and the Board of Ethics and the Medical Registration for Homeopathy have the power to take disciplinary actions against the medical practitioner including imposing a monetary penalty.

I would like to draw the attention of the House that requests for recognition for all the 237 colleges will be processed by July 15 and the Ministry will make all efforts to improve the quality of homeopathy education.

Although this Bill indicates upon improvisation in the quality of the Homeopathy institutions, there is no specific indication on how to improve the quality. To define a standardized curriculum of such 237 colleges offering course on Homeopathy is must. The institutions need to be monitored at the centers in terms of quality of education, infrastructure and the certified academic instructors.

One important issue is about the Central Council’s role and its responsibilities can be strengthened by bringing standardization of the Homeopathic medicine production under their purview.

Now I am coming to the Indian Medicine Central Council, IMCC Act, 1970 which was introduced to provide a structure and regulations to the Indian medical education, especially medical practices like Ayurveda, Unani, Siddha and Sowa-Rigpa and. Although the IMCC has not been implemented properly with multiple di-functionality and bottlenecks in the system itself.
To replace the IMCC for improving the functioning of the Central Council of Indian Medicine in 2005, the Government introduced Indian Medicine Central Council (Amendment) Bill, which is still pending in Rajya Sabha.

This Bill will introduce necessary regulatory reforms in the Indian System of Medical Education. It will also enhance transparency and accountability.

The main objective of establishing NCIM is to ensure adequate supply of skilled medical professionals and also increase ethical standards of medical standards of Indian System of Medicine. The Bill facilitates maintenance of register of Indian systems of medicine. It also encourages interface between different medicinal systems.

The Medical Council of India was first established in 1934 under the Indian Medical Council Act, 1933. This Act was repealed and replaced with a new Act in 1956. Under the 1956 Act, the objectives of MCI include:

Maintenance of standards in medical education through curriculum guidelines, inspections and permissions to start colleges, courses or increasing number of seats.

Recognition of medical qualifications.

Registration of doctors and maintenance of the All India Medical Register.

Regulation of the medical profession by prescribing a code of conduct and taking action against erring doctors.

The Medical Council of India has repeatedly been found short of fulfilling its mandated responsibilities.
Quality of medical education is at its lowest ebb. The current model of medical education is not producing the right type of health professionals that meet the basic health needs of the country because medical education and curricula are not integrated with the needs of our health system.

Medical graduates lack competence in performing basic health care tasks like conducting normal deliveries. Instances of unethical practice continue to grow due to which respect for the profession has dwindled.

Compromised individuals have been able to make it to the MCI, but the Ministry is not empowered to remove or sanction a member of the Council even if he has been proved corrupt.

Key features of the Bill include, constitution of the National Medical Commission. The Bill sets up the National Medical Commission. Within three years of the passage of the Bill, State Governments will establish State Medical Councils at the State level. The NMC will consist of 25 members, appointed by the Central Government. A search Committee will recommend names to the Central Government for the post of Chairperson, and the part-time members. The Search Committee will consist of seven members including the Cabinet Secretary and five experts nominated by the Central Government, of which three will have experience in the medical field.

Members of the NMC will include (i) the Chairperson, who must be a medical practitioner, (ii) Presidents of the Under-Graduate and Post-Graduate Medical Education Boards, (iii) the Director-General of Health Services, Directorate General of Health Services, (iv) five members (part-time) to be
elected by the registered medical practitioners from amongst themselves from States and Union Territories for a period of two years.

Functions of the National Medical Commission: Functions of the NMC include: (i) framing policies for regulating medical institutions and medical professionals, (ii) assessing the requirements of health-care related human resources and infrastructure, (iii) ensuring compliance by the State Medical Councils of the regulations made under the Bill, (iv) framing guidelines for determination of fees for up to fifty per cent of the seats in private medical institutions and deemed universities which are regulated under the Bill.

Medical Advisory Council: Under the Bill, the Central Government will constitute a Medical Advisory Council. The Council will be the primary platform through which the States/Union Territories can put forth their views and concerns before the NMC. Further, the Council will advise the NMC on measures to determine and maintain minimum standards of medical education.

The Bill sets up autonomous boards under the supervision of the NMC. Each autonomous board will consist of a President and four members, appointed by the Central Government. These boards are: (i) the Undergraduate Medical Education Board (UGMEB) and the Postgraduate Medical Education Board (PGMEB): These Boards will be responsible for formulating standards, curriculum, guidelines, and granting recognition to medical qualifications at the undergraduate and postgraduate levels respectively. (ii) The Medical Assessment and Rating Board (MARB): MARB will have the power to levy monetary penalties on medical institutions which fail to maintain
the minimum standards as laid down by the UGMEB and PGMEB. The MARB will also grant permission for establishing a new medical college, starting any postgraduate course, or increasing the number of seats. (iii) The Ethics and Medical Registration Board: This Board will maintain a National Register of all licensed medical practitioners, and regulate professional conduct. Only those included in the Register will be allowed to practice medicine. The Board will also maintain a separate National Register for community health providers.

Under the Bill, the NMC may grant a limited license to certain mid-level practitioners connected with the modern medical profession to practice medicine. These mid-level practitioners may prescribe specified medicines in primary and preventive healthcare. In any other cases, these practitioners may only prescribe medicines under the supervision of a registered medical practitioner.

There will be a uniform National Eligibility-cum-Entrance Test for admission to under-graduate and post-graduate super-specialty medical education in all medical institutions regulated under the Bill. The NMC will specify the manner of conducting common counseling for admission in all such medical institutions. The Bill proposes a common final year undergraduate examination called the National Exit Test for the students graduating from medical institutions to obtain the license for practice. This test will also serve as the basis for admission into post graduate courses at medical institutions under this Bill.
The greater question is why Doctors are so much against it. Section 32 of the bill authorizes the government to allow non-medical degree holders to practice medicine as community health providers. This provision has been vehemently opposed by Indian Medical Association that says it will legalize quacks in the country. This will allow anyone with limited exposure to modern medical system to recommend medicines. Compared to the present 70 per cent figure of elected representatives in the Medical Council of India (MCI), only 20 per cent members of the NMC will be elected representatives. Unlike MCI, whose decisions were not binding on state medical councils, the NMC Bill allows the commission's ethics board to exercise jurisdiction over state medical councils on compliance related to ethical issues. Also, while action can be taken against the MCI president only on the direction of a court, the NMC Bill enables the central government to remove the chairperson or any other member of the commission. National Exit Test (NEXT) has been conceptualised as a single test, which will act as a common final-year undergraduate medical exam and be used for granting medical license as well as admission to postgraduate courses. It has been argued that a single exam is being accorded too much weightage, and it can have an adverse impact on the career of medical aspirants. The Bill allows the commission to “frame guidelines for determination of fees and all other charges in respect of fifty per cent of seats in private medical institutions and deemed to be universities”. This increases the number of seats for which private institutes will have the discretion to determine fees. At present, in such institutes State Governments
decide fees for 85 per cent of the seats. The need of the hour is if the Government wanted to improve the health services in the rural areas then it should strengthen the existing paramedics. Nurses and midwives are trained for administering injections and similar functions and the Government should try to tap this trained manpower. Primary care can be taken by these paramedics and only complex medical problems should be referred to a doctor with specialised knowledge. This kind of model has worked in other countries where doctors only treat complex problems.
*SHRIMATI ANUPRIYA PATEL (MIRZAPUR):* I present my views in support of the National Commission for Indian System of Medicine (ISM) Bill, which seeks to create a new regulator replacing the Central Council of Indian Medicine, governing higher education in ISM. The Bill will help strengthen the ISM which are age old and time tested, safe and effective with lesser side-affects and are very much our proud heritage. Growing up as a child in an Indian Household we have all experienced our grandmother’s herbal prescriptions for any ailment we suffered from which always worked. We saw how during Covid pandemic Ayurvedic solution (e.g. Kadha drink) was promoted to boost immunity. There has also been global surge in the popularity of Yoga and Naturopathy. Our Hon’ble PM Shri Narendra Modi ji has become the face of Yoga worldwide. He even promoted Yoga in Covid times as a protective shield of immunity. WHO is also helping in the advancement of Ayurveda through its Traditional Medicine Programme. India being a land of origin of all these traditional systems of medicine has to responsibly contribute to its evolution. We need an effective central regulatory body for ISM. It is no hidden fact that the regulatory body CCIM failed to fulfil its objectives and got crippled with loopholes and inadequacies which called for a complete revamp, complete overhaul of the regulatory framework and governance of medical education for ISM. Issues like lack of transparency in granting recognition or derecognising institutes, inability to maintain uniform standards of education at

* Speech was laid on the Table.
UG and PG levels, ensuring ethics in practice of ISM, failure to create standard curriculum, lack of competent and qualified teachers came up. That’s why, by way of ordinance CCIM was superseded and for the interim period the Board of Governors was constituted to exercise the powers of the Council.

With the National Commission for ISM in place, emphasising on NEET and common counselling for admissions to all ISM institutions, emphasising on National Exit Test for grant of license to practice, emphasising on PG National Entrance Test, we can be hopeful that the pressing demand for standardisation, regulation and promotion of the ISM is being fulfilled.

We all understand how India has become a preferred destination for medical tourists from countries like Tanzania, Bangladesh, Mauritius, Africa, Middle East and South East Asia thus capturing close to 18% of global medical tourism market. Global attitudes towards ISM range from ridicule to unconditional reverence. We have a scope to promote ISM with respect to medical tourism but that would require serious efforts towards global advancement. With the National Commission on ISM even this possibility can be explored.

With this, I once again support the Bill and conclude.
**SHRI SYED IMITIAZ JALEEL (AURANGABAD) :** I wish to lay my speech on The National Commission for Indian System of Medicine Bill

The Bill aims at providing medical education system that improves access to quality and affordable education, ensures availability of adequate and high quality medical professionals and creates systems that promotes equitable and universal healthcare.

We stand exposed today and I mean our country how pathetic our medical system do whether it comes to huge huge shortage of medical professionals or lack of medical infrastructure whether it was ventilators, oxygen tanks, masks, that we all faced during the last 6 months.

If at all the Bill should target anything, it should aim at opening more and more medical colleges. Generating more and more qualified medical professionals nursing staff and creating the best of medical infrastructure.

Apart from Allopathy govt should promote Ayurveda and Unani medicine too.

*Speech was laid on the Table.*
SHRI N.K. PREMACHANDRAN (KOLLAM): The Bill intends to constitute a National commission for Homoeopathy for the development and regulation of all aspects relating to medical education, medical profession, medical institution and Homoeopathy and to constitute an Advisory Council to advise and make recommendation to the Commission. I support the Bill subject to certain limitations.

I support in the sense that,
(a) it is comprehensive legislation covering all aspects of medical education, professional institutions, it was our demand when the Central Homoeopathy Council (Amendment) Bill was discussed.
(b) further it is equal to that of National Medical Commission Bill. Replica of NMC Bill.

A heated debate is going on regarding use of Homoeo Medicine to combat Covid-19. Homoeopathy is a therapeutic system of Medicine developed in the 18th Century by a German Physical Doctor Samuel Hahneman. It is a holistic system of medicine that stimulates and encourages one's own natural healing forces of recovery. Homoeopathy is safe, economic, gentle and effective. It has already established a name in treating acute chronic and even genetic diseases. Nowadays, deaths are commonly caused due to complications of side effects of medicine rather than disease. The significance of Homoeopathy treatment is that it does not have side effects.

* Speech was laid on the Table.
A recent study conducted by IMRB on “Acceptance of Homoeopathy in India” across Mumbai, Bangaluru, Hyderabad, New Delhi, Kolkata, Chennai, Pune and Ahmedabad has revealed that 59% of people have shifted from Allopathy to Homoeopathy. At least 77% believe Homoeopathy is the best form of treatment for long terms treatment. But it is quite unfortunate that there are lot of complaints from various parts of the country on the quality of Homoeopathic education due to mushroom growth of self financing Homoeopathic Medical Colleges. Commercialisation of education has drastically affected the standard of Homoeopathic Education.

Coming to the Bill, the Standing Committee on Health and Family Welfare chaired by Shri Ram Gopal Yadav in their report made so many recommendations. But most of the recommendations are missing in the Bill.

My first objection is
(1) The propose NMC for Homoeopathy do not have representative character with respect to elected/nominated and appointed Members.
Further, it may be seen that the representation of the doctors community is just 3 in number. The representation of Medical professionals in Homoeopathy should be increased.

The same defect is seen in the Autonomous Boards, namely i) Homoeopathic Education Board, ii) Medical Assessment and Rating Board, iii) The Board Ethics and Registration. Democratic character is lost – NMC Autonomous Boards and Advisory Council.
(2) National Examination

(a) National Eligibility cum Entrance Test – NET for admission to the UG Course in Homoeopathy Medical College.

(b) Institution – National Exit Test – NEXT, i.e., First undergraduate Medical Exam – NEXT
- for granting license to practice as Medical practitioner and for enrolment in the Register.

(c) PG-NET
Post graduate NE Test for admission to PG Course.

(d) National Teachers Eligibility Test – NET for teaching profession.

Comparison with NMC

(3) Fee Structure
Both Bills are silent about the fee structure. There is no provision to regulate the fee structure.
It will lead to commercialisation of Education is lost because of mushrooming growth of private Homoeopathy Medical Colleges.

(4) Not complying the Federal principles of Constitution.
Health is a State subject. Medical Education is Concurrent subject.

Undermining the Authority of the State

Eg. NMC – out of 3, a member represents State.
NC-ISM-29-6 State represent.
NCH – 20 – 5 representation.
i.e. Central Centric legislation greater sense of the participation of the State is required.

(5) National Health Policy 2017

Provides for Integrated health system/integrated system of medicine.

Instead of Integrating various health systems we are disintegrating.

Except in Clause 52 of the Bill

Govt setting of the Commissions

NMC

NMC-ISM

NMC-Homoeopathy

At least once in a year,

  Modern System of Medicine
  Indian System of Medicine
  Homoeopathic System of Medicine.

Indian System of Medicine including Homoeopathy require Modern research.

Unfortunately, these Bills are not providing much focus to the Modern research education of ISM and Homoeo.
*DR. BEESETTI VENKATA SATYAVATHI (ANAKAPALLE):* I present my views on behalf of YSR Congress Party to put forth our views and suggestions regarding The National Commission for Indian System of Medicine Bill, 2020.

At the outset I would like to congratulate the Government for tabling this bill and deliberating on it as now the entire world is aware of the benefits of the Indian System of Medicine and we support the Central Government’s initiatives to streamline this sector.

As we are discussing this Bill in the midst of this ongoing COVID-19 pandemic, the entire nation has now known the benefits of the Indian System of Medicine especially Ayurveda, Sidha & Unani as a preventive for COVID-19. So, in that regard, I welcome this Bill whole heartedly.

As is well known, the Bill seeks to repeal the Indian Medicine Central Council Act of 1970 and provide for a medical education system which ensures:

(i) availability of adequate and high quality medical professionals of Indian System of Medicine,

(ii) adoption of the latest medical research by medical professionals of Indian System of Medicine,

(iii) periodic assessment of medical institutions and an effective grievance redressal mechanism.

*Speech was laid on the Table.*
I would like to bring to your notice the main points recommended by the Standing Committee on Health and Family Welfare which had studied this Bill in detail. The Committee observed that the strength of the NCISM and the representation from States as proposed in the Bill must be increased for its effective functioning. It noted that there were eight lakh registered AYUSH doctors in India. Of these, 56% of doctors belong to Ayurveda, 6.4% to Unani and 1.4% to Siddha and Naturopathy.

The Bill provides for three members to be elected from Ayurveda and one each from Unani, Siddha and Sowa-Rigpa. To ensure proportionate representation of doctors in the NCISM, the Committee recommended increasing the representation of Ayurveda doctors from three members to six members. The Committee recommended that the total strength of the NCISM be increased from 29 members to 4 members. These 44 members will include the Chairperson, 20 ex-officio members and 23 part-time members. I would like to request the Hon'ble Minister to include this recommendation of the Standing Committee and make the appropriate changes.

In addition to that the Bill sets up certain autonomous boards under the supervision of the NCISM. These boards are:

(i) the Board of Ayurveda and the Board of Unani, Siddha and Sowa-Rigpa (which is almost similar to Ayurveda and mostly an ancient medical system practiced in Northern States and some parts of Ladakh region),

(ii) the Medical Assessment and Rating Board for Indian System of Medicine, and
(iii) the Ethics and Medical Registration Board.

However, once again, as Yoga is also being promoted in a big way by the Central Government, I would like to request the Hon’ble Minister through you Sir, to provide for a central regulatory framework for Yoga and Naturopathy, which the Standing Committee has also recommended. In fact sir, the Committee has recommended setting up a Board of Yoga and Naturopathy under NCISM. It also proposed the constitution of a Board of Research to facilitate research programmes in Indian System of Medicine, Yoga and Naturopathy. I believe, this would go a long way in adopting a scientific approach to our understanding of YOGA.

Apart from that, I would like to bring to the notice of the Hon’ble Minister the following key points.

Regarding Fee regulation, as we all know the States have an existing process to regulate fees charged by private medical colleges. This is done by taking into account local factors, reservation quota and other issues prevailing in respective States. However, there is no provision in the Bill for regulation of fees of Indian System of Medicine colleges. The absence of fee regulation may result in charging of high fees by private medical colleges. In this regard, I strongly urge the Government to adopt the recommendation of the Standing Committee in this regard and recommended fee regulation for at least 50% of seats in private medical colleges, and deemed-to-be universities which will go a long way in helping meritorious and deserving students from economically disadvantaged background to get admission.
Regarding Advisory Council, under the Bill, the Central Government will constitute an Advisory Council for Indian System of Medicine. The Council will be the primary platform through which the States/Union territories can put forth their views and concerns before the NCISM.

Once again, in the backdrop of our strong federal culture and as noted by the Standing Committee also, there is no representation of State Medical Councils in the Advisory Council. Hence, on behalf of our party, I would like to strongly recommend to the Hon’ble Minister that there should be a provision for ensuring representation of State Medical Councils.

Regarding Teacher’s examination, this Bill also proposes a National Teachers’ Eligibility Test for postgraduates of each discipline of Indian System of Medicine who wish to take up teaching that particular discipline as a profession. However a glaring anomaly again which is noted by the Standing Committee is that it does not apply to teachers appointed before the enactment of this Bill. Speaker Sir, there are several teachers in the system who do not hold a postgraduate degree but are part of the education system. For such teaching professionals, there must be a provision for a training course, followed by Minimum Qualifying Test. This would ensure that their knowledge base is widened and updated.

Before concluding, I hope that the Government would take note of these recommendations from YSR Congress Party and make appropriate changes.
and pass the Bill so that the Indian System of Medicine can be at par in the international level especially when it comes to alternative systems of medicine. I wish these recommendations will be beneficial for the growth of this sector.
SHRI JAYADEV GALLA (GUNTUR): This Bill is similar to the earlier one that the House discussed relating to regulation and promotion of homoeopathy in the country. So, I welcome this Bill. But there are some issues which I wish to highlight for consideration of the hon. Minister.

There is a proposal to set up a 50-bedded AYUSH hospital in AP. Kindly let me know the present status of the same. Secondly, there are huge vacancies in the AYUSH hospitals and colleges and I wish to know the status of the same.

Under Ayushman Bharat, the Ministry proposes to operationalise 4,200 AYUSH Health and Wellness Centres in 2019-20, but the budget has been reduced to just Rs. 13 crore from the allocated Rs. 150 crore. So, I request the hon. Minister to kindly explain the status of the same with a particular reference to AP.

The next and the most important point is about taxation on AYUSH products. If you look at GST on AYUSH products, it is on the higher side at 12 per cent and at this rate, it is not easy to propagate, promote and push sale of AYUSH products. So, what has the Ministry done to take this before the GST Council to bring it down to five per cent?

Finally, herbal cultivation is very important for promoting, propagating and spreading Indian Systems of Medicine. The Ministry has identified herbal hubs in the country and planned earlier to extend herbal cultivation to 10 lakh

*Speech was laid on the Table.*
hectares in the coming two years with an investment of Rs. 4,000 crore under Atmanirbhar Bharat Package.

So, what is the Ministry planning to do in this regard and what special emphasis is being made to make Seshachalam forest areas in Chittoor District of AP a herbal hub as there is a huge potential for medicinal plants?

With these observations, I support the Bill. Thank you.

I now come to the National Commission for Indian System of Medicine Bill. I thank you for giving me an opportunity for speaking on a Bill during this COVID pandemic relating to health. This is just one in a series of Bills – next, we have one more followed by three Ordinances – the Government is bringing in this Session for approval of the House. I welcome them.

Since the time of the House is curtailed for just four hours, the time is also curtailed for discussions on legislations. So, I would prefer to be brief and pointed.

The first positive aspect of this Bill is that Homeopathy will have its own set up, its own National Eligibility cum Entrance Test (NEET) UG for admission into Homeopathy colleges across the country. Clause 14 of the Bill deals with it. This is a welcome move. It will be on the lines of NEET UG exam which was conducted just yesterday. But, if you look at Clause 16 of the Bill, which deals with the admission into PG courses in Homeopathy, there is no exam like NEET PG, which is now there for MBBS students. Here, you just have National Entrance Test for admissions into PG course. The wording here is different, the pattern is different and even the process of admission is different when
compared to UG. So, I would like to know from the hon. Minister what are the reasons that Government is not proposing to have NEET PG for Homeopathy undergraduates.

Secondly, the House must be aware that this Bill is as a consequence of recommendation made by NITI AYOG four years ago. Look at its composition, which is the heart and soul of this Bill, I am sorry to say that it appears to be a body, to a large extent, controlled by the Government. There is no doubt that it enhances the number of Members to 20. But, out of these 20 members, 16 are nominated by the Central Government.

So, in every respect, it appears to be controlled by the Government which impacts the autonomy of the Commission. So, I request the hon. Minister to reconsider this.

The third point is that under Sub-Clause (4) of Cause (4), you are saying 5 members would be appointed from States on rotation basis for two years. But, for other members the term of office is four years. But, in Clause 6, you are saying that they will have four years term. There is a conflict between these two clauses. Hence, I request the hon. Minister to clarify this.

The next point is about representation of States. Under Clause 4(4)(b) you are appointing 5 members on rotation from States for two years. So, on any given day, you have 5 members representing 5 States on the Commission for two years. It means, if AP gets its chance in 2020, then it will get its next opportunity to be on the board after 24 years, because you are appointing on rotation. So, AP will get its next term in 2044. So, I feel, it is not in the spirit of
the Bill and is not in the interest of research in the field of Homeopathy. So, I request the hon. Minister to give representation of every State on the Board so that States will also have an opportunity to share their views, be it relating to research or promotion or expansion of Homeopathy in the country.

Finally, as it has been stated that within three years the National Medical Commission would be established. But no permanent set up is there so far. Even under this Bill, there is no mention of a fixed time line within which you will set up the Commission. Clause 1(3) says that the Bill shall come into force on such date as the Central Government may notify and different dates would be given for different provisions. It means, all provisions will not come into force in one go. So, I request the hon. Minister to fix a timeframe for implementing every provision of this Bill.

With these observations, I support the Bill. Thank you.
*SHRI E.T. MOHAMMED BASHEER (PONNANI): I place my suggestions on the Bill to repeal the Homeopathic Central Council Act, 1973. I suggest for the introduction of the National Commission for Homoeopathy with powers to the National Commission for Homoeopathy. There is a need for formulation of the State Medical Commission Council, various autonomous boards with respect of standardization and setting up the new medical institutions. There is a need for ensuring medical ethics, conduct entrance examination and National Eligibility cum Entrance Examination for Graduation and Post-Graduation.

My Concern is regarding reservation, which is to be strictly adhered to. There is a lack of proper representation to elect medical professionals. 80 per cent of them are nominated. The election component should have due weightage. As per the Act, the Central Government is the appellate authority and the decision taken by the National Commission for Homoeopathy. It is not advisable. It should act as a medical appellate tribunal headed by a sitting Judge or retired Judge of High Court. The absence of a fee regulation mechanism is another inconsistency in the Bill and the same is to be corrected. There should be an Advisory Council. There is no representation from the State Medical Council. There should be a National Teacher’s Eligibility list. This is a good idea but what about existing teachers?

* Speech was laid on the Table.
SHRI KODIKUNNIL SURESH (MAVELIKKARA): I am grateful for this opportunity to present my views about this important Bill, the National Commission for Homoeopathy Bill, 2020, passed in the Rajya Sabha on 18 March 2020.

Coming to the National Commission for Homoeopathy Bill, 2020, this Bill seeks to repeal the Homeopathy Central Council Act, 1973 and aims to provide availability of adequate and high quality homeopathic medical professionals. The Bill seeks to sets up the National Commission for Homeopathy (NCH), which will consist of 20 members, appointed by the Central Government.

Apart from these aims, the Bill further seeks to achieve, I quote, “To promote equitable and universal healthcare that encourages community health perspective and makes services of Homoeopathy medical professionals accessible and affordable to all the citizens that promotes national health goals.”

In this introduction of the Bill, the fundamentals of this Bill are laid out, However, the question remains whether enough support has been granted to Homeopathy in the country, even when Homeopathy is religiously followed by over 10 crore people in India and has over 2.25 lakh registered homeopathy practitioners with 20,000 new homeopaths being added every year.

*Speech was laid on the Table.*
The Bill, upon examination is found to be lacking representation and inclusion. Therefore, I suggest the following amendments to be made accordingly.

Apart from the head office in New Delhi, regional offices of the commission must be established with a regional office established in Kerala.

The National Commission of Homeopathy, in addition to the proposed members must ensure representation of a minimum of two Members of Parliament from Lok Sabha and Rajya Sabha.

The National Commission as well as regional offices and proposed boards (Homeopathy Education Board, Medical Assessment and Rating Board, Board of Ethics And Registration For Homeopathy) under the new legislation must have mandatory representation of experts and members belonging to the SC/ST category and practitioners of traditional homeopathy, students of homeopathy among others.

The advisory committee of experts for each autonomous board as envisaged in the Bill must be described in detail. The mandatory qualifications and standing of the experts must be codified as is necessary.

The Government has not done enough to encourage and promote homeopathy in India. This remains the sad reality as I can speak from my personal experience as in my constituency Mavelikkara, the National Homoeopathy Research Institute in Mental Health Kottayam District is located.
The Institute has a 100-bedded IPD facility with an average attendance of 700 patients in general OPD and having 15 ongoing research projects in various diseases conditions.

Despite these advancements in growth, I am disappointed that till this day not even one post is sanctioned or fund allotted to its development. The newly introduced Post Graduate course is run by the contractual appointees, even its Professors and Principal. It needs special fund and attention if the Government is serious on development of Homoeopathy in the country.

I also understand they have prepared a master plan for its development with about Rs.200 crore. But only hostel facility has been sanctioned for the purpose. I request the Government to immediately release appropriate fund for the implementation of the master plan and also sanction necessary posts which are pending since past one year.

If the Government is serious about promoting homeopathy, it must at least try to bring development and progress to existing institutions.

I would also like to point out that in the case of Homeopathic education, there are about 250 undergraduate colleges in the country, most of them in the private sector. The AYUSH Ministry brought NEET eligibility for admissions. NEET examinations are conducted for Allopathy, Dental etc. With the present state of acceptability, all the best students opt for Allopathy as first choice and the students to AYUSH courses are normally from the lower rank. So, does the Ministry of AYUSH want the second or third rung students for their courses?
There are reports that the Ministry of AYUSH is deliberately making efforts not to get adequate students in Homeopathic colleges by keeping the cut-off marks for admission high. The permission to the colleges is given by Ministry of AYUSH, their number of seats are decided by them, the free structure is decided by the State Government, the education regulations and the minimum standards are decided by the Ministry. Therefore, they should facilitate the institutions to have students sanctioned by them.

Any shortfall on admission has serious consequences on maintenance of standards and optimum facilities. Therefore, I request the Government should see that every college gets opportunity to admit the sanctioned strength without much hassle.

I would also invite your attention to the fact that we need to think and create a framework to attract more capable students who are interested to study Homeopathy to take this stream of medicine system. But, unfortunately In India there is a total imbalance in the number of education institutions. A State like Kerala, where there are more than 1000 state run dispensaries have only 5 UG colleges with an admission capacity of about 250.

But in Maharashtra, where there is not even one Government dispensary, they have more than 50 UG colleges in Homeopathy and about 50,000 qualified Homoeopaths. I suggest that the Government may constitute an Education Commission for Homeopathy to understand the needs and systemic gaps in Homeopathy institutions, the number of admissions and to
revise the capacity building for the system. I would suggest that simply by changing the Act or bringing amendments, we will not get an impetus of development.

Even when passing this important bill, the Government is forgetting the principle of organizational capacity building. As I understand, the only post of Advisor (Homeopathy) who could be the voice of the profession and administration is lying vacant for a long time. There are eligible officers to be promoted to the post. Why the Ministry of AYUSH with a technical person as Secretary is not taking urgent measures to get an expert in the position?

I request the post may be filled up immediately. Even in Central Council for Research in Homeopathy (CCRH), various promotion posts have not been filled up and employees of CCRH are compelled to retire from the entry post itself without any encouragement. Government should take appropriate action for this.

Another aspect I would like to bring to the notice of the Government that efforts are being made by the Ministry of AYUSH to downplay the importance of Homoeopathy. One example is that the recent decision to close down the Homoeopathic Pharmacopeia Laboratory. This was the only laboratory established for laying standards of Homeopathic medicines. This has been abolished and merged with the Pharmacopeia Commission of Indian Medicine on the pretext of enhancing efficacy. If at all the motive was to enhance the efficacy, the Ministry would have augmented its
facilities. Closing down a well-functioning laboratory was not in good taste which badly affects the quality and standard of Homeopathy Medicines.

In Homeopathy there are about 390 Manufacturing units and all the samples of these medicine manufacturers were being tested by this Lab. By abolishing this Lab, a great injustice has been done towards the system.

I request the Government to look into the matter, revive the Homoeopathic Pharmacopeia Laboratory, and establish regional Drug testing labs for Homeopathic Medicines. Such short-sighted efforts which have far-reaching implications without having expert consultation may not be encouraged.

Regarding the reach and accessibility of homeopathic medicines at affordable costs, the Government must make urgent regulatory efforts. The Government must establish exclusive homeo medicine retail shops so that accessibility of affordable homeo medicines in enhanced.

I am further adding an important point that segregation and exclusion of alternate medicine systems are still practiced by the Government, even during the Covid pandemic.

Even when there have been several success stories of using Homeopathy in preventing and treating the pandemic, the Government has not used the system in preventing and treating COVID 19, but completely relied on the ICMR guidelines. About 80 per cent of the COVID positive cases are asymptomatic or with mild symptoms. These could be well treated by
Homeopathy or any other AYUSH systems. Even there have been several reports of Homoeopaths treating symptomatic cases across the globe.

There is a nearly equal number of qualified practitioners and institutions in AYUSH to that of Allopathy, but the Government completely relied on ICMR and allopathic system. This has happened when World Health Organization itself stated that there is no medicine or vaccines in allopathy and allowed repurposed allopathic medicines, with known side effects. Whereas several Homeopaths claimed that they could manage cases safely with their existing medicines as this is a symptoms-based system approach in Homoeopathy. In my State even the State Government rejected proposals for Research in COVID through Homeopathy.

The National Homeopathy Research Institute in Mental Health under the Central Council for Research in Homeopathy, Ministry of AYUSH, with 100 bed Post Graduate Institute is converted into COVID first line treatment Centre and giving allopathic treatment though homoeopathic doctors being posted for duty. Homoeopaths are not allowed to treat here also for COVID. I request the Ministry of AYUSH may instruct the Government of Kerala to allow the Homoeopathy treatment to COVID-19 cases as done in various other states of India.

To conclude, I must say that every civilization embraces its tradition and adopts different streams of thoughts to achieve stable progress and promoting homeopathy must become a stated national policy.
**श्री जगदम्भिका पाल (डुमरियागंज):** आज में नेशनल कमीशन फॉर होम्योपैथी बिल 2020 एवं नेशनल कमीशन फॉर इंडियन सिस्टम ऑफ मेडिसीन बिल 2020 के बारे में अपने विचार व्यक्त करता हूं। सरकार द्वारा उक्त विधेयक को लाने का कारण सामाजिक स्वास्थ्य के दृष्टिकोण से समान और सार्वभौमिक स्वास्थ्य को बढ़ावा देने का उद्देश्य है। इसमें भारतीय आयुर्विज्ञान चिकित्सा पेशेवर की सभी सेवायें नागरिकों तक पहुँचाने का लक्ष्य है। इससे राष्ट्रीय स्वास्थ्य लक्ष्य को बढ़ाना देना है।

अतः में उक्त विधेयक के पारित करने का समर्थन करता हूं। सरकार ने राष्ट्रीय होम्योपैथी आयोग विधेयक 2020 में उल्लेख है कि इसके इस्तेमाल से प्रतिरोधक शक्ति में लाभ प्राप्त होता है। भारत में होम्योपैथी के 225 अस्पताल और 7259 औषधालय है, लगभग 3 लाख होम्योपैथी का इस्तेमाल लगभग 3 करोड़ 52 लाख से ज्यादा लोग इस्तेमाल करते हैं। में इसका समर्थन करता हूं।

* Speech was laid on the Table.
SHRI MAGUNTA SREENIVASULU REDDY (ONGOLE): Thank you very much for giving me the time to speak. Firstly, I must congratulate the Lok Sabha Speaker and the Lok Sabha Secretariat for making excellent arrangements. While coming inside the Parliament, I was worried that now the hon. Speaker will speak with the mask on his mouth. All the Members here want the hon. Speaker to always smile. We wanted to see the smiling Speaker without the mask. Yours is a signature smile, Sir.

We are thankful to you for giving us the opportunity to speak. With regard to the National Commission for Homeopathy Bill, 2020, I would like to say that during COVID pandemic, homeopathy has become more important. People are now finding alternatives for allopathy. They are going for what we call in Andhra as Kashayams. It is called Kadha here. In Tamil Nadu it is called Kabasura Kudineer and Nilambu in Kerala. This is used to boost the immunity of a person. We want that no one should test COVID positive. I will not take much time.

You know, Sir, that YSR Congress Members are well disciplined. We all behave well in the Lok Sabha. My only request to you, Sir, is that all the suggestions made by the Standing Committee should be implemented. As my colleagues have already stated, it is very much required to include yoga and naturopathy in this Bill. We wholeheartedly support this Bill. Our hon. Chief Minister, Shri Jaganmohan Reddy wants this to be conveyed in this august House. Thank you, Sir.
DR. KALANIDHI VEERASWAMY (CHENNAI NORTH): Thank you very much for giving me the opportunity to speak on this important Bill. I would like to pay homage, at this point, to Anitha and 11 other students who have committed suicides because they were not able to enter into NEET. As the previous speaker has mentioned, we have different forms of school education. I would like to say that a level playing field is needed for any person to enter into any professional course. I feel, as long as you have different syllabuses for school education, it is unfair to have NEET. I would request that this NEET be abolished till the Government either start CBSE schools throughout the country or have a common system of education for all the students. By not providing a level playing field, the Government is depriving a number of backward and socio economically deprived people from entering into the medical colleges.

When most of the countries are in the process of evaluating alternative sources of medicines like Homoeopathy, Ayurveda, Unani, Siddha, and all these things, I am surprised that we are not doing enough research into these things to see that if these things are really relevant and if they are really working. When you look at Homoeopathy, there are a lot of claims that it acts as nothing other than a placebo. I am sure that the hon. Health Minister will agree on this that there are a lot of controversies. To dispel this controversy, I feel that we should have adequate research into all fields of medicines.

Similarly, we also have this Indian Pharmacopoeia. When the so-called allopathy is having the Indian Pharmacopoeia, whether all the other medicines are also tested, whether the efficacy of these medicines are proven and
accepted by our country and by the Pharmacopoeia, and then, provided to the people, is questionable.

Now, I come to the last point. Around three centuries back, when all these medicines were evolving, allopatherapy was very backward at that point of time. But today, we do not prefer to call it as allopatherapy. We would prefer to call it as a modern medicine or more recently, we call it as evidence-based medicines. When we talk about evidence-based medicines, the amount of research, which is being done and proven, is convincing and this medicine is accepted the world over.

I am sure that there are umpteen number of patients who are being treated by Homoeopathy. There are lakhs of doctors and there are crores of patients who are being benefitted. But we do not know whether these are really effective or whether they are acting as a placebo.

So, I request the hon. Health Minister to make sure that adequate research is done before any treatment is given to the people.
DR. SUBHAS SARKAR (BANKURA): I am grateful for having given me an opportunity to present my views on National Commission for Indian System of Medicine Bill, 2020.

In this global pandemic Covid-19 situation, 135 crore Indian people are fighting hard under the leadership of Shri Narendra Modi and his efficient Cabinet. Nobody is in starvation. People of India have become astonished on Prime Minister’s declaration of Rs. 20 lakh crore package on 12th May. Can we imagine how many hours of effort have been taken to analyse and determine such a noteworthy decision? In one way, Government is fighting in a war footing but on the other hand is not lagging behind in its usual transformational work.

Today’s Bill is the transformation work of the country. घर की आग भी निभाना और रसोई भी चलाना। मोदी जी हैं, तो मुमकिन है।

Ayush Ministry has rightly introduced the National Commission of Indian System of Medicine Bill, 2020 to improve overall standards of education and practices of Indian System of Medicine on the same thought process of National Medical Commission, 2019.

The traditional systems of medicine are well patronized in the country. At present, there are 414 ASSU Colleges (Ayur-414; Sidda-13; Unani-55; Sowarigpa-03) with 32,441 UG seats and 4,960 PG seats. Around 2,94,162 —

* Speech was laid on the Table.
Ayurveda, 2,38,672 - Unani, 5,685 - Siddha practitioners are available in the country.

Indian system of Medicine was totally ignored in Independent India till 2014.

The Ministry of AYUSH have two statutory regulatory bodies, namely, and Central Council for Indian Medicine and Central Council of Homoeopathy to regulate the Ayurveda, Siddha, Unani, Sowa-Rigpa and Homoeopathy education respectively.

The Indian Medicine Central Council Act, 1970 (48 of 1970) was made to provide regulation to the education standards of Ayurveda, Unani, Siddha, and Sowa-Rigpa systems of medicine, maintenance of the Central Register of practitioners and for matters connected therewith.

The said Indian Medicine Central Council Act has many short comings. None to nourish, it is the physically challenged baby.


1. Majority of Members are elected and all members can be re-elected.
2. No upper age limit for becoming Member.
3. Members continued tenure after tenure thereby establishing nexus with the colleges.
4. Only the Executive Committee is the main functioning body.
5. Inspections conducted mostly by Members.
6. No test is required before registration. The Degree of the University entitles for registration and practice.

7. Power to supersede the Council in case of non-functioning of Council.

8. Conditions for removal of President and Members is not available.

9. Members of the Council not considered accountable as they are not in regular Government service.

1970 से 35 साल रज करने वाला सरकार शो गए थे।

In 2005, the Central Government introduced the Indian Medicine Central Council (Amendment) Bill, 2005 in Rajya Sabha. That was like old drinking water with fungus in a new bottle. It is proposed only to address the membership issue and empowering the Central Government to issue directions.

During the 16th Lok Sabha under the leadership of Shri Narendra Modi Ji, the Central Government constituted a Committee chaired by Vice-Chairman, NITI Aayog to review the Indian Medicine Central Council Act and the said Committee has recommended for enactment of the National Commission for Indian System of Medicine Bill, 2018 on the same lines as that of the National Medical Commission Bill, 2018.

Accordingly, the National Commission for Indian System of Medicine Bill, 2019 was introduced in Rajya Sabha on 7th January, 2019. The Bill provides for eleven points:
1. Constitution of a National Commission for Indian System of Medicine for development and regulation of all aspects relating to education, medical profession and medical institutions of Indian System of Medicine and an Advisory Council to advise and make recommendations to the Commission;

2. Constitution of four Autonomous Boards, namely:

1. the Board of Ayurveda to regulate Ayurveda education at undergraduate and post-graduate levels and to determine standards thereof;

2. the Board of Unani, Siddha and Sowa-Rigpa to regulate education at undergraduate and postgraduate levels and to determine standards thereof;

3. the Medical Assessment and Rating Board for Indian System of Medicine to carry out inspections and to assess and rate the medical institutions; and

4. the Board of Ethics and registration for Indian System of Medicine to regulate professional conduct and promote medical ethics amongst practitioners and professionals of Indian Medicine and to maintain a national register of all licensed practitioners of Indian Medicine;

5. holding of a Uniform National Eligibility-Cum-Entrance Test for admission to undergraduate medical education;

6. holding of a National Exit Test for granting licence to practice as medical practitioner of Indian System of Medicine;
7. holding of a uniform Post-Graduate National Entrance Test for post graduate courses;
8. holding of National Teachers’ Eligibility Test for Indian System of Medicine for appointment as teachers thereto;
9. the manner of seeking permission for establishment of new medical institution;
10. the manner of maintaining National Register and State Register of Indian System of Medicine;
11. recognition of medical qualification granted by Universities and medical institutions in India and outside India and withdrawal of recognition or de-recognition of qualification;
12. holding of joint sitting of the Commissions of other medical education to enhance interface between Indian System of Medicine, Homoeopathy and modern system of medicine;

The NCIM Bill, 2019 was subsequently referred by the hon. Chairman, Rajya Sabha to the Department-Related Parliamentary Standing Committee on Health and Family Welfare for examination and report.

The Rajya Sabha Secretariat vide its letter dated 27th November, 2019 has forwarded the copy of 115th Report of the Department-Related Parliamentary Standing Committee on Health and Family Welfare on the
National Commission for Indian System of Medicine (NCIM) Bill, 2019 for further consideration by the Ministry.

The Standing Committee presented its final report (115th Report) on the Bill and recommended amendments/modifications. The Minister, after considering the recommendations of the Standing Committee and also taking into consideration the National Medical Commission Act, 2019 and its own views on the need for modification to achieve the purpose, proposes certain amendments/additional clauses to the National Commission for Indian System of Medicine Bill, 2019. The Committee in its Report has agreed to the proposal of the Ministry with some recommendations/suggestions.

The Report of the Parliamentary Standing Committee was examined and accordingly aligned with the provisions of the National Medical Commission Act, 2019. The following major official amendments were proposed:

i. The definition of Indian Medicine has been amended as per the suggestion of the Standing Committee. Added the following words: - “supplemented by such modern advances, scientific and technological development as the Commission may, in consultation with the Central Government, declare by notification from time to time.” (Clause 2(h))

ii. The Members of the Commission has been increased from the existing 29 members to 39 (Clause 4).

iii. Ex-officio Members have been increased from 12 to 15. (Clause 4(1)(c))

iv. Director-General, Central Council for Research in Ayurveda Sciences, Director-General, Central Council for Research in Unani, and Director-General,
Central Council for Research in Siddha have been added as ex-officio members in the Commission. (Clause 4(3))

v. Part-time members have been increased from 16 to 23. (Clause 4(1)(c))

vi. Part-time members in the Commission from State/UT Vice Chancellors of Universities have been proposed to increase from existing 6 to 10. (Clause 4(4)(b))

vii. Elected representatives of States/Union Territories have been increased from existing 6 to 9 for a period of two years. (Clause 4(4)(c))

viii. Tamil and Urdu have been added along with Sanskrit as a qualification for members in the Commission and Search Committee. (Clause 5(1)(d))

ix. Period of appeal to the Central Government against decision of the Commission has been reduced from thirty days to fifteen days. (Clause 9)

x. Provision for determination of fees and other charges for 50 per cent of all seats in private and deemed universities to be fixed by the Commission as in NMC Act, 2019. (Clause 10 (1))

xi. In Advisory Council, the elected representatives of State or Union Territory Medical Councils, Chairman-UGC and Chairman-NAAC have been added. (clause 11)

xii. If the Vice Chancellor of University does not possess the qualifications of Indian System of Medicine, then the State Government or the Ministry of Home Affairs shall nominate a member who shall be the Dean or Head of the Faculty of Indian System of Medicine from any State/Union Territory Government College. (Clause 11)
xiii. Provisions for specifying the manner of conducting the admission of such students (Pre-Tibb/Pre-Ayurveda courses) shall be in such manner, as may be specified by regulations. (Clause 14);

xiv. Period of appeal to the Commission against decision of any Autonomous Board has been reduced from sixty days to thirty days. (Section 24)

xv. Provision for obtaining permission from the Medical Assessment and Rating Board for starting new PG courses and increase of seats has also been proposed. (Clauses 28 and 29)

xvi. New Section specifying criteria for approving or disapproving the scheme for starting of colleges, starting of new Post-Graduate course and increase of seats has been proposed as that of NMC Act, 2019, after clause 28.

xvii. The period of six months has been reduced to three months for passing orders by the Medical Assessment and Rating Board for permissions of new colleges, starting new higher course and increasing seats. (Clause 29(3))

xviii. The period of superseding the Commission has been reduced from one year to six months as in NMC Act, 2019. (Clause 50).

The National Commission for Indian System of Medicine Bill, 2019 along with the above proposed official amendments were passed in the Rajya Sabha on the 18th March, 2020 as ‘The National Commission for Indian System of Medicine Bill, 2020’, which is now due for consideration and passing in the Lok Sabha.
Extensive discussion at different levels for a long period has been completed.

Many so-called educated people speak that only modern medicines have scientific approach and no other medicinal fields have any scientific basis. For them as well as many members of modern medicine who are present here, let me say, we are aware of action potential, transport of Na+, K+ and also reverse transport of the same. But we never get answers of all. Why? Simply, we observe fact and findings through our presently discovered scientific knowledge.

I, being practitioner and student of Modern Medical Science, would like to speak that it is for the first time there is meticulous endeavour for scientific standardization of Indian System of Medicine in the light of Modern Medicine & rays of National Medical Commission, 2019.

We have 62 universities across the country and they are providing affiliation to ISM colleges. There are 5.5 lakhs registered practitioners in the country.

In Covid situation, many actions starting from 6th March advisory and 21st April, 2020 Notification to approve and operationalize Ayush Research, Ayush Sanjivani mobile App and even yesterday issues of post-Covid management protocol are remarkable.
The Bill will upgrade education and practice of Indian System of Medicine which will also attract students from abroad.

I am requesting all the Members to accept and pass the Bill unanimously. तब ये भी बनेगा आत्मनिर्भर भारत का एक पहलू। बहुत-बहुत, धन्यवाद।
DR. UMESH G. JADHAV (GULBARGA): I am thankful for giving me an opportunity to express my views on the National Commission for Indian System of Medicine Bill, 2020. I fully support this Bill.

First of all, I would like to express my gratitude and salute to all the doctors and nursing staff in the country, who are working day and night to fight with this pandemic and taking utmost care of the COVID patients. I myself, my wife, my son, my daughter-in-law, my daughter, my drivers, my Pas and my gunmen were all affected with COVID 19, and we were all admitted in Bengaluru Government Bowring Hospital. I am standing here just because of these dedicated doctors and nursing staff, who had taken care of us with utmost dedication. It is like my rebirth, and fortunately, today, I am speaking in this House in support of the medical professionals.

I being a surgeon, studied allopathy, which is called as modern medicine. But today, the whole world is looking towards the traditional form of medicine or we can say, the Indian System of Medicine, to boost their immune power to fight with this Coronavirus as it is suggested throughout the world that till the vaccine comes for this pandemic, the best way to stay away from this virus is to boost the immune system through the traditional forms of medication such as Ayurveda, Unani, Homeopathy, Siddha and Yoga, which were earlier called as Un-Modern Medicines.

* Speech was laid on the Table.
So, this Bill boosts the confidence in people to do researches in these above-mentioned branches of medicines.

I would like to thank our beloved Prime Minister of India, Shri Narendra Modi-ji and our hon. AYUSH Minister, Shri Sripad Naik-ji for bringing this Bill, which will not only strengthen the traditional form of medicine but also ensure availability of quality medical education system and medical professionals of Indian System of Medicine as also adoption of the latest medical research and other objectives. Due to some reasons, we have stopped using the oldest system of medicine and we have been driven to modern of science and technology in Allopathy. Indian Systems of Medicine have not been promoted properly by the Governments over the years in the past.

It was our beloved late Shri Atal Bihari Vajpayee-ji, the then Prime Minister of India, who had pioneered in 2003 by starting AYUSH Department. Since 2014, after the inception as an independent Ministry under the able guidance of our beloved Prime Minister, Shri Narendra Modi-ji, there has been a tremendous promotion and growth in the Indian Systems of Medicine as we all are celebrating the National Ayurveda Day on Dhanteras, the National Unani Day on 11th February and the International Yoga Day on 21st June. Now, we can witness the changes as our Indian Systems of Medicine are not only becoming famous in India but also gaining huge popularity across the world.
This Bill will give equal status on par with other medical systems as it will boost the morale and psychology of AYUSH practitioners throughout the country. As I mentioned earlier, Allopathy is being called Modern, and Ayurveda is being called as Un-Modern. But this Bill will now bring them together on one platform where no one would differentiate between Modern and Un-Modern.

The autonomous bodies, which are proposed in this Bill can take their own decision to bring in new reforms in the Indian Systems of Medicine and achieve newer height. This Bill will bring down all the obstacles and hurdles in the development of Indian Systems of Medicine.

The reason for bringing this Bill is that the said Indian Medicine Central Council Act has not kept pace with time. Various bottlenecks have crept into the system with serious detrimental effects on medical education and by implication on delivery of quality health services. In order to streamline the functioning of the Central Council of Indian Medicine, to bring transparency in the mechanism for grant of permission to medical institutions and to improve the standards of medical education in the Indian Systems of Medicine, this Bill is very much necessary.

The National Commission for Indian System of Medicine will help framing policies for regulating medical institutions and medical professionals of Indian Systems of Medicine. The other main functions of the National Commission for Indian System of Medicine are: ensuring compliance by the
State Medical Councils of Indian Systems of Medicine of the regulations made under this Bill; and also ensuring coordination among the autonomous boards set up under this Bill.

This Bill provides for constitution of autonomous Boards such as Board of Ayurveda, Unani, Siddha and Sowa-Rigpa, which are responsible for formulating standards, curricula, guidelines for setting up medical institutions, and granting recognition of medical qualifications at the undergraduate and postgraduate levels in their respective disciplines. The Medical Assessment and Rating Board for Indian System of Medicine would assess and grant permission to the educational institutions of Indian systems of Medicine. Similarly, the Ethics and Medical Registration Board will maintain a National Register of all licensed medical practitioners and deal with the ethical issues.

In order to ensure transparency, this Bill also proposes a common final year National Exit Test for the students graduating from medical institutions to obtain their license to practice. Further a National Teachers’ Eligibility Test has been proposed in this Bill to assess the standard of the teachers before their appointments and promotions.

Also, the Advisory Council for Indian System of Medicine will be the primary platform through which the States/Union Territories can put forth their views and concerns before the NCISM. Further, the Council will advise the NCISM on measures to determine and maintain the minimum standards of medical education.
Therefore, once again, I would like to congratulate our beloved Prime Minister of India, Shri Narendra Modi-ji and our hon. AYUSH Minister, Shri Shripad Naik-ji for bringing the National Commission for Indian System of Medicine Bill, 2020.

With these few words, I conclude. Thank you very much.
DR. MOHAMMAD JAWED (KISHANGANJ) : I oppose this Bill because of the following reasons:

Lack of external oversight to ensure that NCH does not fail to meet Legislative Objectives: The current National Commission for Homoeopathy Bill was introduced in order to replace Homoeopathy Central Council Act, 1973 after the failure of the Homoeopathy Central Council to perform its required duties. The current Bill lays out the duties of the new NCH in detail as well as the details for the appointment of committee members. However, there remains a lack of oversight from external sources to ensure that the NCH will not fail in the same way the Homoeopathy Central Council did. The NCH will oversee the autonomous boards. Therefore, for the continual and quality functioning of Homoeopathic education and services it is essential to ensure that the NCH meets its legislated duties.

Lack of integration of Homoeopathy into general healthcare service: The NCH aims to promote Homoeopathy as a readily available and affordable option across the nation. However, the Bill does not provide a framework for how the promotion of Homoeopathy will take place, particularly alongside allopathy options.

Now I come to the Bill which seeks to repeal the Indian Medicine Central Council Act, 1970 and regulate the Indian system of Medicine under a new law.

*Speech was laid on the Table.*
to ensure and improve access to quality and affordable education in this field as well as to ensure uniform standards of practice by professionals.

Why is this Bill problematic? Firstly, the Bill does not include yoga and naturopathy within its ambit. *Adarniya Pradhan Mantri ji itna yoga ka prachar kartey hain.* Modi ji wants the world to learn yoga from India, but failed to include yoga and naturopathy in the new draft despite the Parliamentary Standing Committee on Health & Family Welfare noting in its Report that both systems have been excluded from the scope of the Bill without sufficient reasoning.

Secondly, as regards Exit Test, the criteria of an Exit Test -- which all Graduates will have to clear before getting a practicing license -- cannot be a benchmark for the eligibility of a student to practice Ayurveda, Unani, Siddha and / or Sowa-rigpa. The duration for Bachelor of Medicine and Bachelor of Surgery (MBBS) is 5.5 years. The total seats are 41,388, but the no. of students who give exam is approximately seven lakhs. The duration for Bachelor of Dental Sciences (BDS) is 4.5 years. There are around 26,000 seats in both private and Government. The duration for Bachelor of Homeopathic Medicine & Surgery (BHMS) is 5.5 years. The duration for Bachelor of Ayurvedic Medicine and Surgery (BAMS) is 5.5 years. The duration for Diploma in Homeopathic Medicine and Surgery (DHMS) is 4 years. The duration for Bachelor in Unani Medicine (BUMS) is 5.5 years. The duration for Bachelor of Veterinary Sciences & Animal Husbandry is 5 years. The duration for Bachelor of Pharmacy is 4.5 years. The duration for Diploma of
Pharmacy is 2 years. The duration for Bachelor of Occupational Therapy is 4.5 years. The duration for Bachelor of Medical Laboratory (BMLT) is 3-4 years. The duration for Bachelor of Physiotherapy is 4.5 years. The duration for Bachelor of Science in Nursing is 4 years. The duration for Bachelor of Naturopathy & Yogic Sciences (BNYS) is 5.5 years. It would be impossible to determine all skills in a student from just one exam.

Thirdly, there is potential legitimization of quackery. The Indian Medical Association has expressed concerns that granting AYUSH the ability to prescribe allopathic medicines and perform allopathic procedures will effectively amount to official legitimisation of quackery. This will compromise the functions of the medical field and reduce its efficacy.

Fourthly, there is exclusion of pre-Tib and pre-Ayurveda courses from the ambit of National Entrance Test. The Bill also fails to regulate pre-Tib and pre-Ayurveda courses, which is an oversight noted in the Standing Committee Report as well. This may lead to these courses being viewed as an easier alternative to enter the field without the same higher standards as other courses. Further, the Ayurvedic Medical Association of India has contended that the most common system of Indian medicines is Ayurveda, but it has a very disproportionate representation under the provisions of the new Bill thereby resulting in loss to their interests.

*Neem Hakeem Khatra-e-Jaan.* It is a dangerous trend, and we will be putting our people to mental risk. Thank you.
माननीय अध्यक्ष: माननीय मंत्री जी, आपने सारे विषय के बारे में बोल तो दिया है, क्या आप कुछ कहना चाहते हैं?

डॉ. हर्ष वर्मा: महोदय, इसमें इश्वर रेज कराए हैं, थोड़ा तो बोलना चाहिए।

माननीय अध्यक्ष: नहीं, अब मद संख्या 21 ती जाती है।

प्रश्न यह है:

"कि ऐसी चिकित्सा पद्धति के लिए, जो भारत के सभी भागों में क्वालिटी और सर्वत्र चिकित्सा शिक्षा तक पहुंच का सुधार करती है, जो पर्याप्त और उच्च क्वालिटी के होम्योपेथी चिकित्सा व्यवसायियों की उपलब्धता को सुनिश्चित करती है; जो ऐसी साम्यपूर्ण और सार्वभौमिक स्वास्थ्य देखरेख का संचरण करती है जिससे सामुदायिक स्वास्थ्य परिप्रेक्ष्य को बढ़ावा मिलता है तथा सभी नागरिकों के लिए होम्योपेथी चिकित्सा व्यवसायियों की सेवाओं को सुगम्य और विश्वसनीय बनाती है; जो राष्ट्रीय स्वास्थ्य संबंधी लक्ष्यों का संचरण करती है; होम्योपेथी चिकित्सा व्यवसायियों को उनके कार्य में नवीनतम चिकित्सा अनुसंधान को अंगीकृत करने और अनुसंधान में योगदान देने के लिए प्रोत्साहित करती है; जिसका लक्ष्य चिकित्सीय संस्थाओं के आविष्कार और पर्याप्त और पारदर्शी रूप से मूल्यांकन करना है और जो भारत के लिए होम्योपेथी चिकित्सा रजिस्टर के रखरखाव को सुकर बनाती है तथा चिकित्सा सेवाओं के सभी लाभदायक में भाही नैतिक नागरिक को प्रवृत्त करती है; जो परिवर्तनशील आवश्यकताओं के प्रति अनुकूल होने के लिए नम्मजी है और प्रभावी शिकायत समाधान तंत्र को रखती है तथा उससे संबंधित या उसके आनुवंशिक विषयों का उपबंध करने वाले विचारक, राज्य सम्मा द्वारा यथा पारित, पर विचार किया जाए।

प्रस्ताव स्वीकृत हुआ।

माननीय अध्यक्ष: अब सभा विचारक पर खंडवार विचार करेगी।

खंड 2 से 59

माननीय अध्यक्ष: प्रश्न यह है:

"कि खंड 2 से 59 विचारक का अंग बने।"

प्रस्ताव स्वीकृत हुआ।

खंड 2 से 59 विचारक में जोड़ दिए गए।
खंड 1, अधिनियम सूची और विधेयक का पूरा नाम विधेयक में जोड़ दिए गए।

माननीय अध्यक्ष: माननीय मंत्री जी प्रस्ताव करें कि विधेयक पारित किया जाए।

DR. HARSH VARDHAN: I beg to move:

"That the Bill be passed".

SHRI N. K. PREMACHANDRAN (KOLLAM): This may not be the precedent for passing the other Bills. ...(Interruptions)

माननीय अध्यक्ष: प्रश्न यह है:

"कि विधेयक को पारित किया जाए।"

प्रस्ताव स्वीकृत हुआ।

माननीय अध्यक्ष: अब मद संख्या 22 ली जाती है।

प्रश्न यह है:

"कि एक ऐसी आयुर्विज्ञान शिक्षा प्रणाली का, जो क्वालिटी और सर्वश्रेष्ठ आयुर्विज्ञान शिक्षा तक पहुँच दे सकेगी, देश के सभी भागों में भारतीय आयुर्विज्ञान प्रणाली के पर्याप्त और उच्च गुणवत्ता वाले चिकित्सा व्यवसायियों की उपलब्धता और सर्वश्रेष्ठ को सुनिश्चित करती है; जो ऐसी साम्यापूर्ण और सार्वभौमिक स्वास्थ्य देखभाल का समर्थन करती है; जो सामुदायिक स्वास्थ्य परिपक्वता को प्रोत्साहित करती है तथा ऐसे चिकित्सा व्यवसायियों की सेवाओं को भारतीय आयुर्विज्ञान शिक्षा निदेशक का आवश्यक और पारंपरिक रूप से पूर्वाभास के साथ सुनिश्चित करती है; जो संपूर्ण व्यवस्थाएं जो ऐसी, क्षेत्रीय और राज्यीय निपटान का प्रति सहभागी निपटान के साथ सहयोग देने के लिए नवीनतम उपकरणों को विकसित करती है और जो भारत के लिए भारतीय आयुर्विज्ञान प्रणाली के चिकित्सक जंगलों को बनाए रखने को सुरक्षित बनाती है तथा चिकित्सकीय सेवाओं के सभी पहलुओं में उच्च नैतिक मानकों को प्रकटित करती है, जो परिवर्तनशील आवश्यकताओं से सामान्य
बैठाने के लिए नमीय है और जिसमें एक प्रभावी शिकायत समाधान तंत्र सम्मिलित है
तथा उससे संबंधित या आनुपातिक विषयों का उपबन्ध करने वाले विधेयक, राज्य सभा
द्वारा यथा पारित, पर विचार किया जाए।

प्रस्ताव स्वीकृत हुआ।

माननीय अध्यक्ष : अब सभा विधेयक पर खंडवार विचार करेगी।

खंड 2 से 59

माननीय अध्यक्ष: प्रश्न यह है:

“कि खंड 2 से 59 विधेयक का अंग बने।”

प्रस्ताव स्वीकृत हुआ।

खंड 2 से 59 विधेयक में जोड़ दिए गए।

खंड 1, अधिनियमन सूत्र और विधेयक का पूरा नाम विधेयक में जोड़ दिए गए।

माननीय अध्यक्ष: माननीय मंत्री जी प्रस्ताव करें कि विधेयक पारित किया जाए।

DR. HARSH VARDHAN: I beg to move:

“That the Bill be passed”.

माननीय अध्यक्ष: प्रश्न यह है:

“कि विधेयक को पारित किया जाए।”

प्रस्ताव स्वीकृत हुआ।

—-
SHRI KALYAN BANERJEE (SREERAMPUR): Sir, today we have agreed to do it but it should not be taken as a precedent in future.

SHRI N. K. PREMACHANDRAN: Sir, this may not be taken as a precedent for other Bills.

माननीय अध्यक्ष: माननीय सदयगण, मैं आप सभी को बहुत-बहुत धन्यबाद देता हूं कि आज सदन की कार्यवाही के अंदर सभी माननीय सदस्यों ने जिस सक्रियता और जीवंतता के साथ हिस्सा लिया, यह हमारे लोकतंत्र को और मजबूत करने का काम करेगा। जिन माननीय सदस्यों ने इन विषयों पर सहयोग किया, मैं प्रयास करूंगा कि उन सभी दलों के उन माननीय सदस्यों को अन्य विषयों पर पर्याप्त समय और पर्याप्त अवसर मिले, ताकि पर्याप्त चर्चा हो सके।

सभा की कार्यवाही मंगलवार, दिनांक 15 सितंबर, 2020 को तीन बजे तक के लिए स्थगित की जाती है।

13.17 hrs

The Lok Sabha then adjourned till Fifteen of the Clock on Tuesday, September 15, 2020/Bhadrapada 24, 1942 (Saka)