

Progress on the Food Front

THE general impression that the food situation in the country has shown considerable improvement since the critical days of the war and post-war years is borne out by recent reports issued by the Ministry of Food and Agriculture. A review of the food position since 1939 in respect of both production and availability, highlights three important factors. First, from the position of a net importer of food grains in the pre-war days, the country has been able to reach a state of self-sufficiency, if not one of substantial surpluses. Second, the increase in production has, for the first time, in the agricultural year 1954-55, assured every Indian a per capita cereal supply amounting to 14.4 ozs, which is 0.4 ozs higher than that required to make a balanced diet as laid down by the Nutrition Advisory Committee, and exceeds the target of 13.71 ozs, for 1955-56, laid down in the First Five Year Plan. Lastly, it is claimed that the improvement in food production is due, in a large measure, to permanent improvements in farming, such as better irrigation, improved methods etc.

The agricultural year 1954-55 witnessed an increase both in the production and acreage of cereals in comparison with 1949-50, the base year (for food production) for the First Five Year Plan. The total production of cereals during the year under reference, at 55.3 million tons represents an increase of 9.3 million tons over that of 1949-50. The area under cereals also increased from 193.6 million acres to 209 million acres in the same period. Against an increase of about 7 per cent in acreage, production rose by about 20 per cent, indicating an improvement in the average yield per acre.

There has been some difference of opinion on the question as to the extent to which the improvement in food production achieved in recent years is due to fortuitous circumstances and to progress in farming. The Planning Commission's Progress Report, for 1953-54, while analysing the probable influence that various factors had on the improvement in food production, expressed the view that though favourable weather was an important contributory factor, at least fifty per cent of the increased production must have been due to permanent improvement in farming,

which would be retained in any average year. The Report of the ECAFE for 1954 has also lent support to this view. While it is difficult to be dogmatic on this question, it may not be far out of the mark to say that improved farming is as important as, if not more important than, better weather, in brightening the food situation in India. In fact, in view of the increased average yield, recorded in the period 1949-50 to 1954-55 and in the context of abnormal conditions—floods in UP and West Bengal and drought in Bihar—in 1954-55, considerable credit for the improvement can be given to factors such as better irrigation, liberal use of fertilisers and quality seeds, and better farming methods.

Land Reclamation

ANOTHER sphere in which considerable progress has been achieved in recent years is in respect of land reclamation. Under the reclamation programme of the Community Development Projects, over half a million acres have been reclaimed since 1952. The programme provides also for the supply of improved agricultural aids, like quality seeds, manure and water for irrigation. Over five lakh demonstration plots have been laid all over the country with a view to driving home to the farmers, the advantages of improved seeds, use of fertiliser and compost etc. The minor irrigation programme under the Community Development Scheme to reduce the farmers' dependence on the monsoon, has also made good progress, and an additional one million acres of land are served under this programme.

The reclamation programme under the Community Development and Extension Service Schemes, has been carried out in four stages, viz., in

- (a) Community projects or blocks started in October 1952, (1952-53),
- (b) Community Development Blocks begun working in October 1953 (1953-54),
- (c) National Extension Service Blocks started in October 1953 (1953-54) and
- (d) National Extension Service blocks started in October 1954.

In the first stage i.e. in 1952 about 2½ lakh acres of land were reclaimed; in the next year, 40 thousand acres were reclaimed; under the Extension Service plan started in

1953, 2 lakh acres were brought under the plough; and in the last phase of the programme 48 thousand acres were reclaimed.

First Urban Health Unit

WEST BENGAL enjoys the distinction of trying novel experiments. It is there that the Village Exchange Scheme, which was described in these columns last week, has been put into operation with the help of the Community Development Agency. It is again in Calcutta, that the first urban health unit is expected to commence working in November 1955.

The health unit has been sponsored jointly by the Government of India, the UNICEF, WHO, the Government of West Bengal and the Corporation of Calcutta. The capital cost of the scheme is estimated at Rs 15 lakhs, with a recurring expenditure of Rs 8 lakhs per annum. The scheme will be based on a joint agreement between the Calcutta Corporation, the West Bengal State and the Union Ministry of Health. The buildings for housing the clinics, laboratories etc. are said to be practically ready.

The scheme will cover about 68,000 residents (or 13,000 families) of Ward No 24 in Calcutta. Health and welfare services for these people will be provided and arrangements are to be made for the care of industrial workers, expectant mothers, children, and those suffering from tuberculosis, venereal disease and leprosy. A maternity home with a 30-bed capacity and a nursery will also be provided in the locality.

The health unit is also intended to serve as a demonstration centre for students under training in the All India Institute of Hygiene and Public Health, and the work of the unit is to be carried out jointly by the Institute and the Corporation. The latter will provide the routine health services in the area and the Institute will meet the cost of such additional services as may be necessary for teaching purposes.

There will be a local health council consisting of representatives of business, the medical profession, welfare organisations and residents of the area for enlisting the co-operation of the people in running the unit. The unit is expected to provide a medium through which official and non-official agencies can co-operate in the effort to reach a common goal.