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UNITED NATIONS CHILDREN'S FUND
Programme Committee

Recommendation of the Executive Director for an Allocation
SYRIA

Maternal and Child Welfare Services and Training

1. The Executive Director recommends an allocation to Syria of \$64,000 to cover equipment, transport, drugs and diet supplements, and training stipends for the continuation and expansion during 1958 and 1959 of the maternal and child welfare programme. Three allocations totalling \$107,000 were previously approved by the Board for the programme (E/ICEF/R.156, E/ICEF/R.382 and E/ICEF/L.780). The latest of these allocations was approved in September 1955 and was entirely related to the school health and nutrition aspect of the MCW services. Matching on the part of the Government for the proposed allocation would be equivalent to US\$310,000.

2. A major objective of the Government is ultimately to integrate the MCW programme into the country's permanent health organization. A qualified paediatrician will be appointed to act as Programme Co-ordinator. The UNICEF aid proposed in this paper would provide: -

- a) equipment for four main provincial MCW centres;
- b) equipment, drugs and diet supplements and transport for MCW "Units" in five provinces. (The "Units" include the provincial MCW centre, the adjoining provincial hospital and at least three village sub-centres);
- c) stipends for three tutors who will provide midwifery training to public health nursing auxiliaries (health visitors) who will work in the provincial centres and village sub-centres;

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- d) simple midwifery kits to village dayahs (traditional birth attendants) who after training through the village sub-centres have passed an examination;
- e) equipment for a hospital paediatric ward in which nurses from the School of Nursing at Aleppo (in northern Syria) are trained, and transport for the students to various training facilities;
- f) drugs and diet supplements to five privately-sponsored MCW centres whose work is being co-ordinated with that of the Government programme and whose staff have received training.

Present medical establishment

3. Syria, with a population of $3\frac{1}{2}$ million is composed of nine provinces (Mohafazats) which are sub-divided into 37 districts. The birth rate is approximately 30 per 1,000 but the infant mortality rate is between 100 to 200 per thousand live births. Under the Ministry of Health organization there is a doctor in each province, assisted in the districts by local medical officers, nurses, midwives and other auxiliary personnel. There are 36 rural district dispensaries, 34 municipal dispensaries established and financed by the towns and 19 financed by the Ministry of Health. None of the above offer MCW or public health services. There are three government hospitals and a few private hospitals. UNICEF has provided maternity ward and nurse training and paediatric ward equipment in two of the government hospitals.

4. While there were a few centres operated by foreign groups providing MCW services, UNICEF's assistance in 1952 provided the government with its first opportunity to provide these services on what might be said to be a national scale. Eight centres have now been equipped and are in operation in six of the nine provinces and it is these that form the nucleus for the expanding network described in this recommendation. UNICEF has supported these as well as other centres with drugs and diet supplements.

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The training programme

5. The Maternal and Child Health Training and Demonstration Centre in Damascus (supplied with training material and equipment by UNICEF), was originally established to offer MCW training to nurses and nurse-midwives who were working in district dispensaries. This was found not to be a practical solution. With the help of WHO advisers and consultants over a three-year period, the Centre has been reorganized to train health visitors in twelve month courses. The Centre is also a key part of the public health training programme for both medical students and nurses. UNICEF has also assisted in equipping two government hospitals which provide maternity and paediatric training (see para. 3).

6. Although formally concluded in April 1955, WHO's assistance to the Damascus training programme has been continuously made available in the form of consultant services and fellowships. The WHO Regional MCW Adviser visited Syria in January 1956 and assisted the Director of the MCW Services in the preparation of a basic plan for the continuation and the expansion of the programme. Consultations have been going on for some time between the Government and WHO on the launching of an environmental sanitation programme in conjunction with a health unit to be set up in a rural area of the Damascus Mohafazat (Province). The intention is to establish a close co-ordination between the MCW programme and environmental sanitation activities.

Proposed plan of operations

7. The new plan of operations would cover the programme for the years 1958 and 1959. The revised objectives of the programme would be:

- a) to maintain and consolidate the maternal and child welfare services established since 1952 and to firmly integrate these services in the country's permanent health set-up;
- b) to implement the second phase in the expansion of the programme through the establishment of at least one main MCW centre in each province and the development of five provincial centres into "MCW units" consisting of hospital services, the main MCW centre and three village sub-centres.

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- c) to continue the training in MCW work of medical officers, nurses, midwives and auxiliary personnel in adequate number and to constantly adjust this training to the requirements of the programme as it expands. Wherever feasible an attempt will be made to integrate the work of the centres and sub-stations **with already existing dispensaries at the village level.**

Main provincial centres

8. There are now eight main provincial centres as follows:

Town	a/:	<u>Damascus</u>	<u>Aleppo</u>	<u>Homs</u>	<u>Hama</u>	<u>Lattakia</u>	<u>Dersa</u>
Number of Centres :		2	2	1	1	1	1

9. The staff in each of these centres consists basically of one medical officer, one midwife, one public health nurse and two to three auxiliary public health nurses (health visitors). The Government plans to open four additional centres of this type in Sweida, Qamishli, Deir-ez-Zor and the Midan district of Damascus during the second half of 1957, thus bringing up to twelve the total number of main centres and providing at least one for each province.

10. UNICEF would provide technical equipment and supplies to the four new main centres during 1958.

MCW units

11. The second phase of the expansion would cover the period 1958-1960 during which it is planned to establish progressively nine MCW units in the country's nine provinces (Mohafazats). At the present stage UNICEF's assistance is proposed for the first two years of this new phase of the expansion. Each of the projected MCW units would have a central facility consisting of the Mohafazat main centre and the adjoining Government Hospital. To each central facility would be linked three small MCW sub-centres to be established in villages of the Mohafazat, selected with careful consideration for their geographical position and the density of the population in their vicinity so that a rational distribution of the services may be ensured to the largest proportion of the rural communities.

a/ Demonstration and Training Centre of Damascus not included in this tabulation.

12. UNICEF aid for the main MCW centres has been referred to in paragraph ten. In addition for five such units UNICEF would provide maternity ward equipment for hospitals and a station wagon/ambulance to be used by the Centre doctor for his regular visits to the sub-centres and for the transport of abnormal maternity cases and other patients to the hospitals. It is anticipated that expansion of the MCW Unit system to the remaining four provinces might take place in 1960 and be the subject of further requests for UNICEF assistance. The following is an outline of the plan for the establishment of the nine MCW Maternal and Child Welfare Units:

<u>Year:</u>	<u>1958</u>	<u>1959</u>	<u>1960 (provisional)</u>
<u>Number of Units:</u>	2	3	4
<u>Mohafazats:</u>	Deraa and Lattakia	Aleppo, Homs and Hama	Damascus, Deir-ez-Zor, Qamishli and Weida

Village sub-centres

13. For 1958 it is agreed that village sub-centres would be established at Nawa, Azraa and Bosra in the Deraa area and at Seraya, Haffe and Jableh in the Lattakia area. The villages in the other Mohafazats where centres are to be established in 1959 and 1960 would be selected in consultation with the Mohafazat Health Director and the medical officer in charge of the Mohafazat main MCW centre. Under the present recommendation standard technical equipment for fifteen village centres would be provided by UNICEF together with drugs, diet supplements and soap during 1958 and 1959. Kits would be provided for traditional birth attendants (para. 15c) and sewing machines would be provided for mothers' classes (para. 15d). The Government would furnish the non-technical equipment and all items not provided by UNICEF.

14. It is planned that the premises which would house the individual village sub-centres consist of four rooms, including a comparatively large space to serve as waiting room. These premises will be provided by the village municipality wherever possible. Rents and related costs will be deducted from the ten per cent proportion of the municipality's budget which, by law, is earmarked for health activities.

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15. The staff of each village sub-centre will consist of two public health nursing auxiliaries (health visitors). These health visitors, as well as health visitors in the main provincial centres, will receive a three months training course in midwifery as a part of their twelve-month training course. This training will be provided by the Nashabieh Community Development Centre of the Near East Foundation. UNICEF would provide stipends for three tutors at this school.
16. The health visitors will live and work in the village centre and their services will be constantly available to the mothers and children of the village. The medical officers in charge of the Mohafazat main centres will supervise the village sub-centres in their respective areas and will assume full technical responsibility for these centres. The medical officers will delegate to a senior nurse in the main centre part of the responsibility for the work, supervision and in-service training of the health visitors.
17. The principal functions of the health visitors will be the following:
- a) Care within the limits of their competence to mothers before, during and after delivery and to their children from birth till the age of six, with particular attention to the weaning period. The first step in this connexion would normally be taken by the health visitors when they call on the private homes to get acquainted with the mothers and their children. During these visits, they will inform the mothers of the objectives of the maternal and child welfare services and will give them such advice as will be appropriate on child care and on health and nutrition in general. They may also help the mothers in matters of home economics. The mothers would later on visit the village centre with their children at a date coinciding with the weekly visit to the village of the doctor of the Mohafazat main centre. The workers will prepare reference cards for the mothers and their children on which will appear the technical observations of the doctor relative to each case, the instructions to be followed and the services rendered. The visit of the mothers and the children to the centre will be repeated as necessary and, during follow-up visits to their homes, the workers will attempt to assure that the doctor's instructions are fulfilled. Emergencies and cases requiring hospitalization or dental care will be referred to the Mohafazat Hospital (see paras. 11-12) which maintains close working relations with the main MCW centre of the Mohafazat.

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- b) Distribution of milk, vitamins and drugs to mothers and children in accordance with the instructions of the doctor. The health visitors will also give soap to the mothers during home visits so as to help them improve the standards of health and hygiene within their household.
- c) Training of local unlicensed village dayahs (traditional birth attendants). The prime responsibility for this work will be assumed by the doctors of the Mohafazat MCW centres who will devote part of their weekly visits to the villages to this training. The health visitors will keep in touch with the dayahs and will help them put in practice the instructions given to them. Special attention will be directed to the young dayahs who will be encouraged to visit the village centres regularly so that they may be initiated into the principles and practices of maternal and child welfare in general. At a later stage, those dayahs who have followed the instructions of the village centres will be given a simple examination by a committee consisting of the Mohafazat Health Director or his delegate, the doctor of the Mohafazat MCW centre and a representative of the Damascus Demonstration and Training Centre. The dayahs who would pass this examination satisfactorily would be given a simple midwifery kit. It is estimated that about six dayahs would be trained through each of the projected village centres during 1958 and 1959.
- d) Organization of periodical meetings at the centres during which mothers will be given information and advice by the health visitors in the fields of mothercraft and homecraft, health, nutrition and general hygiene. Sewing machines to be provided by UNICEF would be used during these sessions. The health visitors will also encourage the mothers to undertake group activities that may help promoting the health, social and economic standards of their communities.
- e) Co-operation with the Mohafazat Sanitary Inspector in measures aiming at the improvement of the general conditions of hygiene in the villages, particularly in respect of food handling, water sources, latrines and garbage disposal. The health visitors will be given greater responsibilities in this field once the Government plans for the implementation of a national environmental sanitation programme would materialize.

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Orientation training of doctors, nurses and midwives

18. While, by necessity, part of the programme's responsibilities must be entrusted to the public health auxiliaries (health visitors), it is recognized that constant efforts should be made for the addition of qualified nurses and midwives whenever possible. The three-month training in public health for qualified nurses and midwives joining the programme will be continued at the Damascus Demonstration and Training Centre which has previously received UNICEF aid. Doctors will also continue to get a three-week training at Damascus Centre prior to their appointment to the projected main centres.

Nurse-midwifery training

19. With the technical advice of WHO experts, the School of Nursing at Aleppo (Northern Syria) has been endeavouring to promote its training activities in the paediatric and public health fields. The school has established good working relations with the various public health programmes functioning in that area, particularly the MCW, the anti-mycosis and anti-tuberculosis programmes. It has also made arrangements for the establishment of a 20-bed ward for children in the National Hospital at Aleppo where its students would get good in-service training in clinical paediatrics.

20. UNICEF would provide equipment for the ward and a station wagon for transport of the students to the various outside training facilities. Upon graduation a number of these students would be available for work in the MCW units in the northern provinces.

Aid for voluntary agency centres

21. An effort has been made to co-ordinate the activities of voluntary agencies providing services to mothers and children with those of the national MCW programme. Two centres sponsored by such agencies have sent their staff in 1956 for training at the Government MCW centres in Damascus and Homs, and have subsequently been able to align their work with that of the national programme.

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Drugs and diet supplements will be provided to these centres by UNICEF. It is also expected that three other voluntary agencies will follow these arrangements in 1958 and 1959 and receive drugs and diet supplements.

Central co-ordination

22. A paediatrician, with a good background in MCW work, will be appointed as Programme Co-ordinator and will be entrusted with the following tasks:

- a) Long-term planning for the programme, particularly with regard to training and expansion.
- b) Co-ordination of the work of the various MCW centres, and standardization through these centres of the technical and operational procedures which, by experience, prove to be most effective. For this purpose the Programme Co-ordinator will organize regular inspection tours to be carried out by himself or by other senior officers of the Demonstration and Training Centre.
- c) Co-ordination of the MCW programme with other public health programmes as well as with the network of dispensaries and hospitals providing curative services in the various parts of the country. The Programme Co-ordinator will give careful consideration in particular to the possibility of setting up in one building the dispensary and the MCW centre whenever both exist in a given town or village. Regardless of whether such an arrangement is made however, he will assure that MCW centres benefit to the full possible extent from the qualified services of the dispensaries' personnel when such dispensaries are within reach of the MCW centres.
- d) Supervision and improvement of the programme's recording and reporting system at all levels. Through this improved system, the Programme Co-ordinator will compile basic data and statistics which should make possible a thorough evaluation of the maternal and child problems in Syria and, subsequently, the planning and implementation of better MCW services.

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Target time schedule

23. The target time schedule is as follows:
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| July, 1957 | : Appointment of Programme Co-ordinator. |
| August-October, 1957 | : Course at the Nashabieh Community Development Centre for 20 health visitors. |
| September, 1957 | : Opening of two main centres in Qamishli and Deir-ez-Zor. |
| October, 1957 | : Opening of two main centres in Sweida and Midan (Damascus). |
| November, 1957 | : Initiation of the 1958 training course for a new group of 20 health visitors. |
| January-March, 1958 | : Opening of six village centres in the Deraa and Lattakia Mohafazats. |
| February, 1958 | : Arrival of the first lot of UNICEF equipment and supplies to cover that part of the programme which will be implemented during 1958. |
| April, 1958 | : Establishment of paediatric ward at the National Hospital, Aleppo. |
| September-October, 1958 | : Consultations with Directors of Health and MCW Medical Officers of Aleppo, Homs and Hama Mohafazats and selection of nine localities in these Mohafazats where village centres will be opened in 1959. |
| October-November, 1958 | : Conclusion of the 1958 training course for health visitors and initiation of the 1959 course for a new group of 26 trainees. |
| November-December, 1958 | : Arrival of UNICEF equipment and supplies to cover 1959 activities. |
24. The dates and arrangements for the initiation of the training course for health visitors, the opening of village centres and the arrival of UNICEF equipment and supplies for 1959 will follow the same basic chronological sequence as outlined above.

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UNICEF commitments

25. UNICEF would provide the following:

	<u>US\$</u>	<u>US\$</u>
a) <u>Equipment</u>		16,950
i) Standard technical equipment for four new main centres at average cost of \$300 per centre (para. 9)	1,200	
ii) Standard equipment for fifteen village sub-centres including 90 intermediate midwifery kits in canvas bags at average cost of \$250 per centre (para.13)	3,750	
iii) Equipment for the up-grading of the five Mohafazat hospitals connected to the expansion programme during 1958 and 1959 at average cost of \$2,000 per hospital (para.12)	10,000	
iv) Equipment for School of Nursing and Paediatric Ward, Aleppo (para.19)	2,000	
b) <u>Transport</u>		12,000
Six station wagons with spare parts, one for each of the five MCW Units projected for 1958/1959 and one for the Aleppo School of Nursing (paras. 12 and 19)		
c) <u>Expendables:</u> For 22 and 23 centres respectively in 1958 and 1959		18,850
i) Basic drugs and diet supplements	4,700	
ii) Fish liver oil capsules, 911,000	2,050	
iii) Dried whole milk, 35,200 pounds	10,400	
iv) Dried skim milk, cost free, 220,000 pounds	-	
v) Soap, 20,000 pounds	1,700	
d) <u>Stipends:</u>		3,600
For three tutors at an average monthly rate of \$50 per tutor for two years (para.15)		
e) <u>Contingencies</u>		2,600
Total		54,000
f) <u>Freight</u>		10,000
i) On a, b, c (except for dried skim milk) and e	5,000	
ii) On dried skim milk	5,000	
Total recommended allocation		64,000 /...

WHO technical approval and participation

26. The elements of the proposed plan of operations have been examined and agreed upon with a WHO representative who visited Syria in April, 1957. Three fellowships for MCW studies totalling \$7,500 have been made available for 1956 and 1957 by WHO. The granting of further fellowships in the same field is being considered for 1958 and 1959. Technical approval has been given by WHO.

Government commitments

27. The cost of the programme to the Government during 1958 and 1959 will be as follows (cost of services and facilities provided by Mohafazat Hospitals, Schools of Nursing, etc. not included):

	<u>L.S.</u>	<u>L.S.</u>
<u>1958</u>		
a) <u>Chief, MCW Section and Programme</u>		12,000
<u>Co-ordinator, salaries, allowances, etc.</u>		
b) <u>Demonstration and Training Centre,</u>		122,000
<u>Damascus</u>		
i) <u>Premises, equivalent of rent</u>	25,000	
ii) <u>Personnel, salaries, allowances,</u>		
<u>etc.:</u>		
3 medical officers	17,000	
3 midwives	9,000	
4 public health nurses	11,000	
1 dentist	4,500	
1 laboratory technician	3,000	
1 assistant pharmacist	2,500	
1 administrative officer and		
2 assistants	8,500	
1 telephone operator	2,000	
4 servants	6,500	
3 drivers	7,000	
iii) <u>Recurrent expenditures, including</u>	26,000	
<u>maintenance, water, electricity,</u>		
<u>heating, medical and technical</u>		
<u>supplies, stationery, vehicles'</u>		
<u>fuel and maintenance</u>		

(continued)

(continued)	<u>L.S.</u>	<u>L.S.</u>
c) <u>Twelve main centres</u>		312,000
Cost per each centre:		
i) <u>Premises</u>	2,000	
ii) <u>Personnel:</u>		
1 medical officer	5,000	
1 midwife	3,000	
1 public health nurse	2,500	
2 health visitors	4,000	
1 accountant/storekeeper	2,500	
1 servant	1,800	
iii) <u>Recurrent expenditures</u>	5,200	
d) <u>Training course</u>		30,000
Twenty trainees at L.S.1,500 per trainee		
e) <u>Six village centres</u>		36,000
Cost per each centre:		
i) <u>Premises</u>	500	
ii) <u>Personnel:</u>		
2 health visitors	4,000	
iii) <u>Recurrent expenditures</u>	1,500	

1959

a) As in 1958	12,000
b) As in 1958	122,000
c) As in 1958	312,000
d) Training course for 26 trainees	39,000
e) Fifteen village centres, including six centres established in 1958	90,000
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	1,087,000

or approximately US\$310,000

28. It is expected that the programme's requirements in terms of milk may be partly ensured by 1960 from the two milk sterilizing plants which will be established in Damascus and Aleppo with UNICEF aid. The Government will give careful consideration to the necessity of its taking over as soon as possible the provision of the other drugs and diet supplements provided by UNICEF.

