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PROGRAMME DEVELOPMENTS IN THE EASTERN MEDITERRANEAN AREA

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## INTRODUCTION

1. During the last six months, conditions in this area have been influenced by marked international tension, and during the last two months of 1956, were completely abnormal. In several countries, programmes were directly and obviously affected by these conditions, international expert personnel were withdrawn from programmes in November, and in two countries, one third had not returned by the end of February. There has been marked caution with respect to future long-term planning and hesitation in making long-term commitments. UNICEF operations were handicapped by the temporary evacuation of the WHO Regional Office from Alexandria and by the fact that for some weeks, the Area Office was unable to maintain direct communication with most Country Offices. In addition, travel was restricted in various ways and for varying lengths of time, depending on the particular areas involved. Programmes were also affected by shipping difficulties.

2. Since inception UNICEF has allocated over \$29.5 million for fourteen countries in the Eastern Mediterranean area and for Palestine refugee mothers and children. A summary of these allocations is presented in E/ICEF/L.1003. Excluding allocations which have been made for Palestine refugees and for freight, programme allocations for the fourteen countries total \$11,566,000 of which the breakdown by main types of programmes is shown below.

3. Approximately seventy-seven per cent of approved aid has been spent, or is being spent on programmes which are currently active. The balance was spent on programmes for which UNICEF aid has been completed, thus:

	<u>Amount</u>	<u>Per cent</u>
Completed.....	\$ 2,619,300	22.6%
Active.....	<u>8,946,600</u>	<u>77.4%</u>
	\$11,565,900	100.0%

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Main types of programmes aided

4. By main types of programmes aided the \$11,566,000 total allocations are divided as follows:

	<u>Amount in US\$</u>	<u>Per cent</u>
Maternal and Child Welfare	<u>1,432,100</u>	<u>12.4</u>
Disease Control		
Malaria (including DDT production)	4,311,900	37.3
Bejel/Syphilis	275,600	2.4
BCG vaccination campaign	1,427,700	12.3
Leprosy	23,000	0.2
Trachoma	25,900	0.2
Other communicable diseases	<u>40,000</u>	<u>0.4</u>
	<u>6,104,100</u>	<u>52.8</u>
Child Nutrition		
Long-range feeding	487,500	4.2
Milk conservation	<u>1,959,100</u>	<u>16.9</u>
	<u>2,446,600</u>	<u>21.1</u>
Total Long-range Aid	9,982,800	86.3
Emergency Aid	<u>1,583,100</u>	<u>13.7</u>
	<u>11,565,900</u>	<u>100.0</u>

Completed programmes

5. Of the \$2,619,300 allocated for programmes now completed, the breakdown by type of programme is as follows:

	<u>Amount in US\$</u>	<u>Per cent</u>
MCW	104,600	4.0
Malaria	101,200	3.9
Bejel/Syphilis	112,400	4.3
BCG vaccination campaign	874,400	33.4
Long-range feeding	113,700	4.3
Emergency aid	<u>1,313,000</u>	<u>50.1</u>
	<u>2,619,300</u>	<u>100.0</u>

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Currently active programmes

6. Of the \$8,946,600 allocated for currently active programmes, supplies amounting to seventy-seven per cent of the total had either been shipped or ordered for shipment by the end of 1956, as follows:

	<u>Shipped</u>		<u>On Order</u>		<u>Not Ordered</u>		<u>Total</u>
	<u>\$000</u>	<u>Per cent</u>	<u>\$000</u>	<u>Per Cent</u>	<u>\$000</u>	<u>cent</u>	<u>\$000</u>
MCW	962.2	72.5	107.3	8.1	258.0	19.4	1,327.5
Malaria including DDT production	2,293.2	54.5	1,142.4	27.1	775.1	18.4	4,210.7
Bejel/Syphilis	53.3	32.7	29.9	18.3	80.0	49.0	163.2
BCG	435.0	78.6	97.1	17.6	21.2	3.8	553.3
Leprosy	6.4	27.8	0.3	1.3	16.3	70.9	23.0
Trachoma	20.5	79.2	5.4	20.8	-	-	25.9
Other communicable diseases	17.2	43.0	10.5	26.2	12.3	30.8	40.0
Long-range feeding	240.3	64.3	2.4	0.6	131.1	35.1	373.8
Milk conservation	1,107.4	56.5	185.8	9.5	665.9	34.0	1,959.1
Emergencies	98.3	36.4	78.1	28.9	93.7	34.7	270.1
	<u>5,233.8</u>	<u>58.5</u>	<u>1,659.2</u>	<u>18.5</u>	<u>2,053.6</u>	<u>23.0</u>	<u>8,946.6</u>

DISEASE CONTROL

7. UNICEF assistance in this area has been extended to six countries for malaria eradication and to three countries for malaria control measures with a view to developing the techniques of eradication. In Egypt, a plant has been constructed for the manufacture of DDT, with equipment provided by UNICEF. Developments in malaria work generally tended to be disappointing this year due largely to delays in establishing the administrative structures necessary to support such programmes, and in some cases, to the effects of the recent international emergency focussed in this area.

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8. There have been further delays in the implementation of the more extensive undertakings in the BCG projects, but indications at the end of the year justify some optimism for 1957.

9. The pilot trachoma control work in Egypt was interrupted by the general emergency. In Turkey the pilot trachoma control project is to begin this spring. Development of leprosy work in Ethiopia is encouraging. Plans for the mass VD control programme in Iran have had to be modified and the start has been somewhat delayed.

Malaria control and eradication

10. British Somaliland:                      Malaria control: Total allocation: \$14,600  
(March 1955)

This project is concerned with the control of malaria within a nomadic population of 150,000 people who migrate seasonably into neighbouring Ethiopia. In addition to the usual problems associated with a malaria control operation among nomadic people, this one presents the added issues associated with trying to carry on an operation across international boundaries. While spraying operations were in fact initiated in April 1956, they had to be stopped because no agreement has been reached between the British and Ethiopian authorities permitting the carrying on of spraying operations into Ethiopia and spraying squads were not allowed to cross the frontier. It is hoped that before the 1957 operations are due to start some agreement may be reached allowing the control operations to be completed.

11. Egypt:                                      Malaria control: Total allocation: \$101,000  
(April 1952)  
DDT production: Total allocation: \$250,000  
(October 1951)

Problems with respect to water supply, electric power and steam supply have been solved and these utilities are now available to the DDT plant. Key personnel for the senior posts have been appointed by the Government. Tenders have been let for the procurement of the necessary quantities of chemicals, including 500 tons of benzene. Some of the chemicals for the initial production have been delivered.

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12. As a result of the evacuation of the TAA engineers from Egypt during the recent emergency, the start-up trials which were scheduled for early 1957 were delayed. The UN/TAA production engineer returned in February and it is expected that a UN/TAA chemist will also be appointed in 1957. Initial limited sectional test runs can probably be made by April. Actual production for distribution is not foreseen before the end of the year. The Government has under consideration and discussion the possibility of setting up a malaria eradication campaign in Egypt, and it is assumed that this will be preceded by a survey made with the assistance of WHO.

13. Ethiopia

Malaria control: Total allocation: \$26,000  
(Pilot project) (March 1956)

Shortly after the arrival of the WHO malarialogist and sanitarian in August 1956, by which time the Government's budget was approved and the UNICEF equipment was in the country, the plan of operations was ready for signature and the field headquarters was set up in Nazareth. However, at the end of the rainy season in October there was still a shortage of trained personnel qualified to carry out the spraying operations and it was decided to postpone the spraying of the pilot area until early 1957. Meanwhile, test spraying was carried out in a limited area to establish the residual effects of insecticides under local conditions. A systematic, topographical and malarimetrical survey was started in October throughout the pilot area and, as a result of this survey, it was decided to extend the pilot area and to map out two check areas. Practical training of laboratory technicians and field technicians started during the autumn, including regular parasitological examination of children and infants, as well as entomological studies of the vectors in the pilot area. This area has a population of 30,000 of whom 20,000, north of the Awash River will be protected by means of residual spraying with DDT. The southern part of the area will be sprayed with dieldrin. The project maintains a close relationship with a USICA Malaria Research Group which is undertaking malaria surveys and limited control measures in other parts of the country. The Ministry of Public Health is now considering measures to co-ordinate efforts toward a larger malaria control campaign.

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14. <u>Iran:</u>	<u>Malaria control:</u>	Total allocation: \$350,000 (February 1954)
	<u>Malaria eradication:</u>	Total allocation: \$1,680,000 (March 1956)
	<u>Estimated total UNICEF aid:</u>	\$3,300,000 to \$4,300,000
	<u>Population of malarious areas:</u>	12,000,000
	<u>Target 1957:</u>	6,500,000
	<u>(Main spraying season: February through October)</u>	

In the course of 1956, epidemiological and entomological surveys have successfully continued and more detailed findings have been made available in preparation for the eradication campaign to start in 1957. A further review of the plan of operations was carried out at the end of 1956 during the visit of the principal assessment officer from UNICEF headquarters. Following this assessment, the plan for 1957 has been revised and protection of a population of 6.5 million persons in 24,454 villages is now foreseen for this year. Supply requirements have been adjusted accordingly in the plan of operations. Improved maintenance facilities for the fleet of vehicles to be used in the eradication campaign were made available by the Government in November when a new central garage was opened in Teheran for this purpose. The training of field technicians has been continued both in the Malaria Institute in Teheran and in the field and has been well advanced. The anticipated legislation to provide for the establishment of an autonomous malaria eradication organization has been prepared but has not yet been enacted. However, a general director of operations has been appointed with a special budget and administrative autonomy.

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18. Jordan:

Malaria Total allocation: \$66,000  
eradication: (March 1956)

Estimated total UNICEF aid: \$116,000 to  
 \$156,000

Population of malarious areas: 1,185,000

	<u>Number of Persons Protected</u>	
	<u>Total</u>	<u>With UNICEF DDT</u>
Target for 1956	1,185,000	985,000
Achieved in 1956	200,000	--
Target for 1957	1,185,000	985,000

(Spraying season: April-November)

19. Eradication operations were to have started in 1956 but various staffing and administrative problems made it necessary to postpone the full eradication project until 1957 and the past year has been used for continued survey and training. A training course in parasitology was started by the Ministry of Health for seven trainees. Two entomologists were being trained under the auspices of the Yarmuk-Jordan malaria project assisted by UNRWA. A refresher course was started for six Government malaria inspectors previously engaged in control operations. The Ministry of Health is working out special terms of employment to facilitate the recruitment of medical officers to direct eradication operations. In September and October, a WHO short-term consultant undertook a survey in the country and made recommendations for the training of personnel, established operational criteria and gave advice concerning the start of surveillance to the Yarmuk-Jordan Valley where eradication of malaria is soon to be achieved.

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20. Lebanon

Malaria control: Total allocation: \$14,000  
(First: October 1956  
Latest: March 1954)

Malaria eradication: Total allocation: \$18,000  
(March 1956)

Estimated total UNICEF aid: \$23,000  
to \$33,000

Population of malarious areas: 300,000

	<u>Number of Persons Protected</u>	
	<u>Total</u>	<u>With UNICEF DDT</u>
Target for 1956	300,000	115,000
Achieved 1956	305,500	115,000
Target for 1957	300,000	115,000

(Spraying season: April-June)

21. In 1956, the target of protected persons was exceeded. Surveys revealed three minor foci of infection, two in the North (in Akkar and Nahr Ibrahim) and one in the South (at Sarafand). In the two northern centres, there was actual transmission in the vicinity of the hydro-electric project while the cases in the southern village where the vector has been eliminated were due to relapses. Sixty-five cases of malaria were detected and treated immediately during 1956. Consideration has been given to the problems of the establishment of a surveillance system. Efforts to enlist the co-operation of hospitals, dispensaries, etc., in detection work, while disappointing to date, are still being continued. The amalgamation of the Mount Lebanon Malaria Centre with the Beirut Headquarters has reduced to three the number of malaria districts into which the country is now divided. WHO is giving consideration to providing a short-term assessment team in 1957 to determine the extent to which malaria continues to be a problem in the country and to advise on the establishment of a countrywide surveillance system.

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26. Sudan: Malaria control: Total allocation: \$31,000  
(Pilot project)

	<u>Number of Persons Protected</u>
Target for 1956	200,000
Campaign delayed; to start in 1957	
Target for 1957	250,000

(Spraying season: March - mid-July)

27. The new plan of operations for this programme, which has been agreed upon between the Government, UNICEF and WHO and will shortly be signed, calls for the setting up of a malaria control pilot project in the Fung District of the Blue Nile Province, extending along the Blue Nile from Sennar in the north to the Ethiopian border in the south for a period of three years beginning in the autumn of 1956. The plan also includes the carrying out of investigations in the Fung District and the Gezira Irrigated Area in order to solve the problem connected with a future mass anti-malaria campaign having malaria eradication as its objective. The plan also calls for the training of local personnel, including malariologists, entomologists, sanitarians and laboratory technicians in methods of malaria eradication and epidemiological surveillance.

28. In 1957 the spraying operations will be so arranged as to protect a population of about 250,000. The WHO team leader arrived in the Sudan in November and proceeded to undertake a survey of the pilot area. The entomologist has been selected and proposed to the Government and the sanitarian has also been appointed and is presently attached to the Syrian eradication programme but will shortly be transferred to the Sudan. The Government has appointed a national medical officer as the matching malariologist and is making arrangements for the assignment of other technicians.

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29. Syria:

<u>Malaria control:</u>	Total allocation: \$209,000 (First: April 1952 Latest: September 1954)
<u>Malaria eradication:</u>	Total allocation: \$140,000 (March 1956)
<u>Population of malarious areas:</u>	1,150,000

	<u>Number of Persons Protected</u>	
	<u>Total</u>	<u>With UNICEF DDT</u>
Target for 1956 (revised)	700,000	700,000
Achieved in 1956 (end of July)	204,000	204,000
Target for 1957	1,150,000	1,150,000

(Spraying season: April-June)

30. The new plan of operations for the eradication programme was signed by UNICEF in October 1956, and ratified by Parliament in December, opening the possibility for eradication to begin in 1957. The plan calls for funds to become available at the beginning of every year regardless of whether the general budget is passed or not. Administrative problems have not, however, been entirely overcome particularly with respect to the appointment of long-term personnel. These problems have been tackled in meetings of the programme's co-ordination committee and are being actively pursued with the authorities. Once the total number of long-term personnel becomes available, it will be possible to establish malaria centres in Djezireh (north east) and in Dera's (south), bringing the number of malaria centres operating in conjunction with the Damascus headquarters to six, as scheduled.

31. Since the WHO experts and their counterparts have been absorbed in general planning work and in the handling of personnel problems, field surveys were carried out on a relatively limited scale during 1956. Efforts are being made to fill the gaps in this respect as soon as possible. During the emergency in early November, the international malariologists were evacuated from Syria and returned early in 1957. Meanwhile, by virtue of an agreement between the Government and WHO, one of the two international sanitarians previously assigned to the programme will be withdrawn and his responsibilities

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will be assumed by one of the two sanitarians (nationals) who have recently concluded their training under WHO fellowships.

32. From experience acquired during the 1956 spraying operations, the WHO malariologist has decided that the surface to be sprayed with DDT for each person to be protected ought to be increased to seventy square metres from the forty-five square metre coverage initially established for the eradication work. UNICEF's provision of DDT has been calculated on the new basis and the matter will be further investigated during the 1957 spraying campaign. The vehicle requirements for the future are also being reviewed. In the light of experience during the 1957 spraying campaign, a new recommendation for the continuation of the programme is under consideration for submission to the Board at a later session.

33. <u>Turkey:</u>	Malaria	Total allocation: \$1,001,000
	<u>eradication:</u>	(October 1956)
	<u>Population of malarious areas:</u>	9,500,000
		<u>Number of Persons Protected</u>
Target for 1957		8,577,000
(Spraying season: April-June)		

Preparation for this programme is reported to the Board in document E/ICEF/L.1044 which is before the present session in connexion with a recommendation for UNICEF aid for the second year of the programme (1958). Spraying for the first year of eradication is due to begin in April 1957.

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BCG anti-tuberculosis vaccination34. Iran (currently active)

Total allocation: \$318,000

(First: November 1950

Latest: October 1956)

	<u>Tests</u>	<u>Vaccinations</u>
Campaign target (since 1952)	14,000,000	6,700,000
Accomplished through December 1956	1,713,000	998,000
Target for 1956	400,000	200,000
Accomplished 1956	348,000	164,000
Target for 1957	2,050,000	900,000

35. During the November visit of the UNICEF Principal Assessment Officer, the plan of operations was revised to provide for the first phase of the new mass campaign which is to start in April 1957, subject to the appointment by the Government of a national director and executive staff. An international BCG experts is to be recruited by WHO and will come to Iran in July 1957 for an eighteen-month period. One hundred and sixty vaccinators are being trained for the campaign.

36. It is expected that 2,050,000 persons will be tested and 900,000 vaccinated during 1957. The five-year programme is planned to test twelve million persons. BCG vaccine for the programme is to be made by the Pasteur Institute in Teheran. The Government is currently discussing with WHO details concerning the approval by that Organization of the local production of BCG vaccine.

37. Jordan (UNICEF aid completed)

Total allocation: \$58,100

(First: October 1952

Latest: October 1956)

The internationally-assisted phase of the BCG mass vaccination campaign was concluded at the end of 1955 and BCG work has now been merged with the Government's regular anti-tuberculosis programme. Testing and vaccination are continued on a permanent basis through schools, refugee camps and health centres.

UNICEF will continue to provide vaccine and tuberculin until the end of 1957, when the Government of Jordan will make its own procurement arrangements for the supply of vaccine.

38. The WHO BCG assessment team concluded its assignment in the Eastern Mediterranean area by carrying out re-testing and vaccination work in Jordan during August. The team has confirmed the success of the campaign. In the autumn of 1956 the Government appointed an additional medical officer to facilitate better supervision of BCG activities.

39. During the last six months of the year, 36,288 persons were tested and 10,269 were vaccinated. This brings the total number of tests carried out in 1956 to 72,000 against the original target of 70,000. Operations were reduced because of the emergency in the area. Government reports show the following figures for this period:

	<u>July</u>	<u>August</u>	<u>September</u>	<u>October</u>	<u>November</u>	<u>December</u>
Tested	5,844	4,705	3,691	3,301	9,799	8,948
Vaccinated	1,793	1,637	1,210	1,060	1,919	2,650

40. Libya (UNICEF aid completed)

Total allocation: \$92,600  
(First: May 1951  
Latest: September 1954)

The BCG vaccination programme was continued by the Government during 1956 without further assistance of international personnel. UNICEF supplied vaccine and tuberculin during the year and the Government is currently making arrangements to take over this responsibility in the future. A second Federal team was organized during the last part of 1956. The two teams tested 5,316 persons and vaccinated 1,398 in Tripolitania and the Pezzan between July and October, which period coincides with the school vacations. At the start of the new school year in October, work among school children not tested was resumed in Tripolitania, and the two teams then started

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similar work in the Province of Fezzan. They will in January 1957 move to Cyrenaica and the target for 1957 has been set for the testing of 35,000 and vaccination of 15,000 individuals. The Government has made two new vehicles available for the teams to carry out tests and vaccinations on the Police Force and among prisoners in the Province of Tripolitania. WHO's final recommendations for the consolidation of future BCG work in Libya have not yet been released.

41. Sudan (currently active)

Total allocation: \$41,700  
(First: October 1952  
Latest: September 1954)

	<u>Tests</u>	<u>Vaccinations</u>
Campaign Target	2,000,000	700,000
Target for 1957	100,000	250,000

42. A WHO team consisting of a medical officer and two nurses arrived in the Sudan during October 1956. Testing and vaccination was started in December 1956 in the Malakal District of the Upper Nile Province, where a permanent vaccination centre was established. During the period 3-15 December 1956, 10,480 persons were tested and 3,575 vaccinated. Eight Sudanese vaccinators have been trained and employed by the Government. It is the plan to train further vaccinators and to establish permanent centres progressively in other localities as well.

43. The addendum to the plan of operations for this project is under discussion between WHO and UNICEF and is expected to be ready for signature by the end of the first quarter 1957.

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44. Turkey (currently active)

Total allocation: \$199,400

(First: May 1951

Latest: March 1956)

	<u>Tests</u>	<u>Vaccinations</u>
Campaign target	12,000,000	4,800,000
Accomplished in 1955	3,826,500	1,542,600
Target for 1956	3,500,000	1,400,000
Accomplished 1956	3,385,400	1,341,200
Cumulative through December 1956	11,023,800	4,458,850

45. This campaign has continued at the planned rate with a high level of performance. Sixty-eight teams were in the field in the first half of 1956, but due to changes of personnel and later for reasons of economy of fuel the campaign strength was reduced to sixty operating teams. With the lifting of fuel restrictions and by giving sufficient priority in the assignment of sanitarians graduating from the school in Ankara, the number of teams will be restored to sixty-eight early in 1957. On order to maintain field operations at the same level, twelve jeeps approved by the Board in March 1956 have been delivered to replace outworn transport, and spares and tools for central and mobile field maintenance have been shipped.

46. The WHO Eastern Mediterranean assessment team, which was scheduled to make an analysis of the work in Turkey in the course of the year has been disbanded and will no longer be available to carry out this work. During the visit of the UNICEF Assessment Officer and the Regional Director in December 1956 discussions centred on the need for careful interpretation of data relating to the percentage of negative reactors in the various provinces, so that a plan might be drawn up for a possible second phase of the campaign based on a more selective approach. A permanent BCG service would most probably have to concentrate on the following points:

- a) to cover populations at risk in urban areas;
- b) to cover populations at risk in areas where frequent contacts occur between the surrounding areas and the towns;

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- c) populations in entirely rural areas who show eighty per cent and higher percentages of negative reactors might be left uncovered.

47. As the mobile vaccination campaign is completed in each area, testing and vaccination are being set up on a permanent basis in maternity wards, health centres for new-born babies and in schools. UNICEF visitors had the opportunity to examine some of the permanent operations involved in the BCG programme in two areas where mobile teams had been left behind to work under instructions of the village health authorities. The experience in these experimental areas has been encouraging and will undoubtedly influence the planning for integration of BCG vaccination into the national health scheme. Further efforts will be required to prepare medical staff in the expanding rural health services to incorporate BCG vaccination into their regular activities.

Treponemal disease control

48. Ethiopia (VD)

Total allocation: \$77,000  
(October 1956)

A plan of operations for this project has been cleared between WHO and UNICEF and is ready for submission to the Ministry of Public Health. While UNICEF has initiated procurement, preparations for the campaign, particularly the training of personnel, have progressed in Ethiopia. The Government has appointed a physician as head of the national VD control work and another doctor to direct the "mass campaign" in the pilot area. Twenty nationals of Ethiopia are undergoing training in the VD clinic in Addis Ababa for posting to field teams as nurses, health educators, dressers and laboratory technicians. The target date for starting field operations is February 1957.

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49. Iran (Bejel/Syphilis)Total allocation: 34,000  
(March 1956)

A re-assessment of the operational plans for the regional VD control campaign was undertaken in Teheran during a visit of the Principal Assessment Officer of UNICEF in November. As a result of this review it was decided to alter the timing of the operations to allow sufficient time for training of treatment teams. Start of field operations would therefore be delayed until the autumn of 1957. A survey undertaken by the WHO Adviser assigned to this project in the Sistan Region in South Eastern Iran has led to a decision to concentrate control operations in this area instead of in Khorassan. The operation will also go forward in Khouzistan as planned. Staff for this first field team was trained during the last part of 1956. The revised plan of operations is being reviewed by WHO and UNICEF.

50. Syria (Bejel/syphilis)Total allocation: 52,200  
(First: November 1951  
Latest: September 1953)

The assignment of a WHO team for this programme, which was scheduled to continue until the end of 1956, was interrupted two months earlier as the members of the team were evacuated from the country on the first of November. This development did not affect seriously the progress of the mass campaign as preparations for the transfer of the programme's responsibilities to the national team had been under way since July. As the rate of infections in certain areas justified the treatment of the whole population, the tactics of the mass campaign had to be changed in 1956 with more emphasis on the treatment side of the work. Reports received from the national team for the months of November and December indicate that the work during these two months was maintained practically at the same level as during the previous months, thus bringing the number of treatments in

in 1956 to the 100,000 mark as anticipated. The reports for the period July-December 1956 give the following figures:

	<u>July</u>	<u>August</u>	<u>September</u>	<u>October</u>	<u>November</u>	<u>December</u>
Population examined	10,858	12,621	14,998	9,799	9,556	9,057
Population treated	10,698	12,407	14,857	9,531	9,353	8,787

51. At December 1956 the cumulative total of population examined was 107,000, and treated 101,000; the total population to be examined is 300,000, with second visits to the villages also needed.

Trachoma control

52. Egypt

Total allocation: 19,000  
(March 1954)

Trachoma control operations in the Qalyub pilot area which were to start in September with the change of method described in the previous report (E/ICEF/322/Add.4 para.47) were abruptly terminated as a result of the emergency situation.

53. Turkey

Total allocation: 6,900  
(October 1956)

Early in 1956 the Turkish Government expressed anew its interest in participating in a regional approach to introduce new methods of trachoma control. Following two visits of the WHO Regional Trachoma Adviser, a pilot project in trachoma control was approved by the Board at its October 1956 session to be carried out in Gaziantep province in the South eastern part of Turkey. A plan of operations covering all the details of this programme is under review by the Government and WHO. Antibiotics, transport and equipment have been delivered by UNICEF for the pilot project which is to start during the remainder of the 1956/57 school year and will be expanded as planned at the beginning of the new school year in October 1957. Preparations are being made by the Turkish authorities to train personnel in the new methods and to organize the campaign with the objective of treating 7,100 school children. (E/ICEF/L.988)

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Mycosis control

54. Syria

Total allocation: \$40,000  
(September 1953)

The WHO experts advising on this programme concluded their assignment at the end of October. Since that date, the responsibility for the overall supervision of the programme has been entrusted to the senior radiologist of the Ministry of Health. Further delays have been experienced in procuring the mobile x-ray unit, which cannot reach Syria before mid-1957. WHO has agreed in principle to the Government's request that international experts return to Syria on a short-term basis to help put this unit into operation.

55. The examination and treatment work has continued at a normal pace in the centres of Damascus and Aleppo although the x-ray epilation work in Aleppo was interrupted during the months of September and October where the centre in that town was moved from the National Hospital to a new location. Clinical examinations however were not interrupted. The centres of Hama and Dora's, equipped with Government x-ray units, are in continuous operation though refresher training foreseen for the technicians of these two centres has been delayed.

56. The following figures were recorded on the activities of the Damascus and Aleppo centres for 1956:

	<u>Damascus centre operating with one UNICEF x-ray unit and one Government x-ray unit</u>	<u>Aleppo centre operating with one UNICEF x-ray unit</u>
Clinically examined	12,681	21,712
Microscopically examined	5,152	1,969
Treated	2,281	1,510

The cumulative number of treatments in the UNICEF-assisted centres at 31 December 1956 was 6,292.

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Leprosy control

57. Ethiopia

Total allocation: \$23,000  
(September 1955)

This programme was originally planned to meet a treatment target of 15,000 patients in the period 1956-1958. Sulphones and other drugs reached the country and were put into regular use by October 1956. In the same month, the Council of Ministers approved a budget for the three-year period, increasing funds from the equivalent of US\$115,000 originally foreseen to US\$313,000. The possibilities for extending this programme have therefore substantially increased, making it possible to provide further diagnostic and treatment facilities which ultimately can benefit between 30,000 to 50,000 patients. The treatment target for 1956 was 7,200. In fact a total of 16,400 infected patients were under treatment with sulphone drugs at the end of the year. In view of this expansion, it is likely that UNICEF will be requested during 1957 to increase its participation. The additional number to come under treatment in 1957 is expected to be approximately 5,000.

58. The leprosy control headquarters at the Princess Zenneba Worq Hospital in Addis-Ababa has undergone further improvements. The new healthy children's "village" was taken over and milk distribution inaugurated.

59. The extension of treatment facilities through the posting of specially trained dressers at small out-stations has begun only recently. It is too early to say how successfully this will work out in view of isolated and from time to time completely inaccessible out-stations.

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MATERNAL AND CHILD WELFARE

60. There is reason to view with encouragement the maternal and child welfare developments in several countries, particularly in the very important and significant field of training, which in the long run is basic to the development to Maternal and Child Welfare services in most countries of this area. Training facilities have been increased in Libya, Sudan, and Iran. As a result the number of trainees in Libya and Sudan has already been increased. The number of trainees enrolled at the various training courses in Jordan, Iran, and Ethiopia has also increased above that originally foreseen.

MCW services and training

61. Aden

Total allocation: \$30,000  
(September 1956)

Under an allocation approved by the Executive Board in October 1956 for an MCW service and training programme in Aden Protectorate, certain supplies are under procurement and others are under discussion. The Government is making arrangements to provide from its own funds an MCW medical officer in lieu of the adviser who originally was to be made available by WHO. Details of the plan of operations are under discussion.

62. A recommendation for aid to Aden Colony is before the present session of the Board (E/ICEF/L.1020).

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63. Egypt

Total allocation: \$329,400 <sup>1/</sup>  
(First: March 1953  
Latest: September 1955)  
(Also 484,350 pounds of cost-free  
powdered skim milk)

By the end of the year, 794 centres, including 100 collective rural centres, were in operation, an increase of eighty centres in operation since mid-1956. It is anticipated that 100 more collective centres will be put into operation by May 1954, bringing the total number of health centres to 894 for all of which the Board has approved the provision of a set of MCW equipment. All existing centres received UNICEF equipment by the end of 1956. Expendable supplies have been released to centres in accordance with their requirements. The staff training programme has been able to provide personnel for new centres as quickly as they have been established. It had been the Government's intention to set up a total of 406 collective centres in addition to the 894 rural health centres, erecting two hundred collective centres each year, but funds have not been made available for this construction due to revision of the Government's budget.

64. Ethiopia

Total allocation: \$34,600  
(April 1954)  
(Also 36,000 pounds of cost-free  
powdered skim milk)

New courses commenced in the public health and training centre in Gondar in October 1956 when the centre had been in operation for two years. Twenty-one new recruits were enrolled in the three-year health officers' training course, bringing the total number in this course to seventy-two. Sixteen new trainees were recruited to the nurses' course in October. The training of sanitarians through a basic one-year course has started for the **first** time this year, and twenty-one recruits are now undergoing such training. A review of the programme

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<sup>1/</sup> Of the total allocation of \$342,400, \$13,000 has been utilized for a project in the care of premature infants (see below).

was undertaken in August by an officer of the WHO Regional Office who reported that the training centre has, within the period of its existence, been developed into an active and progressive college to train staff urgently required for the development of health services in Ethiopia in accordance with the present plans of the Ministry of Health. A recommendation for aid in expansion of the programme is before the present session of the Board (E/ICEF/L.1008).

65. Iran

Total allocation: \$208,500

(First: October 1952)

Latest: March 1955)

(Also 4,088,500 pounds of cost-free powdered skim milk)

Training and refresher courses for doctors, health officers, nurses and midwives continued at the MCW demonstration centre in Teheran. In five ostans, training of MCW personnel of the former Public Health Co-operative Organization (now an integral part of the Preventive Medicine Department of the Ministry of Health) is continuing. Preparations have been made for the opening of a "behyar" (health visitor) training school in Teheran. Training is expected to start in the first quarter of 1957 and thirty candidates were selected in December 1956. The candidates come from provinces in which MCW centres are being equipped by UNICEF.

66. Sixty sanitarians were trained in 1956 in Varamine by the Near East Foundation School. One year of post-graduate training has been concluded for ten nurses at the midwifery school in Teheran. The ten trainees received their diplomas in March 1957. UNICEF equipment was delivered to this school by July 1956. Twenty-five rural midwifery students are under training at the Shiraz rural midwifery school. The opening of the rural midwifery school at Meshed was further delayed by the Government's decision to give priority to a nursing school. UNICEF equipment has been procured for the rural maternity home in Yazht, but the maternity home is not ready to receive it. The supplementary personnel needed to complete the staffing of the maternity home at Nichapour has not yet been made available and a decision of the Ministry of Health is awaited as to whether the

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staffing of Nichapour will be improved or whether the equipment should be assigned to another rural maternity home where the necessary personnel and facilities are in readiness.

67. Thirty-seven MCW centres received a set of technical equipment from UNICEF in rural areas during 1956. Toward the end of the year preparations were made for equipping another four centres. Distribution of milk through MCW centres continued on a gradually increasing scale throughout the year. The peak number of children and mothers who received skim milk was 38,815, while 21,000 received fish-liver-oil capsules, and approximately 10,000 received whole milk and soap. Milk distribution through schools reached 42,000 beneficiaries in 124 schools in Teheran and 52,000 in the provinces. By the end of the year, drugs and diet supplements were distributed through 112 MCW centres.

68. Iraq

Total allocation: \$129,700  
(March 1953)  
(Also 108,000 pounds of cost-free powdered skim milk)

During the last part of 1956 the directorate of MCW services were concentrating their efforts to organize the training centre in Mosul in Northern Iraq. One of the WHO nurses assigned to this programme was transferred to Mosul in July to assist in the supervision of the centre. The work in Mosul is carried out through a main MCW centre which was serving some 750 registered families by the end of the year. A home visiting scheme was successfully initiated in October with six community health visitors previously trained in Baghdad. Meanwhile, plans were going forward for the construction of the training school building and a hostel for the trainees.

69. In Baghdad, the second course for community health visitors was completed at the end of November with eleven trainees who were subsequently re-assigned for a further six months of supervised home visiting work. The third course is expected to start early in January 1957. Simultaneously, twenty additional birth attendants were given training at two courses, one in Khademain, which ended in December, and

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another at Tel Mohammed in southern Baghdad. The Government is currently reviewing the plan of operations for this project which aims at putting a total of 150 MCW centres into operation throughout the country. It appears unlikely that this target can be met for some time. Distribution of UNICEF milk and of drugs and diet supplements, as well as soap and fish-liver-oil capsules, has continued on the same level as during the first half of the year. The Government is making provisions to procure further quantities of whole milk. During the smallpox epidemic in Iraq at the end of 1956, MCW centres provided vaccination services.

70. Israel

Total allocation: \$166,000

(First: November 1951

Latest: March 1955)

Work in the first rural health centre at Tirah, which opened in May 1956, has continued at full capacity. The Government reports that important and interesting experience has been gained through the work in this centre which serves an Arab population. This experience has served as the basis for planning further development of MCW services in other parts of the country with a predominantly Arab population. New village centres will accordingly, during the first stage, provide preventive care and clinics, while hospitalization of the sick and maternity cases will initially be provided elsewhere. The Government expects as a result of this to be able to progress more quickly in putting new centres into operation. The second centre to be assisted by UNICEF, at Baq'a al Gharbiah, could not be opened in 1956. Tenders for construction work have gone forward and it is anticipated that the centre will be completed sometime in the first quarter of 1958. Meanwhile, the Government expects to open three new village centres early in 1957 in Sachnin, Pekiin and Jedidah, to serve a population of 6,500. These centres will be located in buildings which have been made available by the respective communities and remodelled. The interest and initiative of the communities and the co-operation of the local councils is an important aspect of this plan.

71. Jordan

Total allocation: \$57,600  
(First: September 1952  
Latest: October 1956)  
(Also 52,000 pounds of cost-free  
powdered skim milk)

The training course in midwifery and mothercraft, which started last August, is now being given to forty-one trainees, of whom ten come from the US/Point IV-assisted nursing school and two from the UNRWA staff. A small bus is now being procured by UNICEF for their movements in the field. Trainees from the anti-tuberculosis and other hospitals regularly attend the various MCW activities for observation.

72. The new WHO/MCW adviser has arrived and a second midwifery tutor is under recruitment by WHO. International personnel were evacuated in November but came back early in 1957. During the absence of the international personnel, trainees took part in practical field work as part of the course and a 24-hour domiciliary midwifery service was started in early December. Trainees from the midwifery and mothercraft course are participating in this service.

73. Final arrangements have now been made with the Sisters of Nazareth Hospital whereby four beds are permanently available for sick children to be referred to that hospital from the demonstration and training centre. Most of the UNICEF equipment for this hospital has been delivered. During the last six months of 1956, 4,813 visits were made to the demonstration and training centre in Amman, including 311 post-natal, 1,490 pre-natal and 3,012 children. In addition, 1,545 home visits were made, ten for deliveries, 238 post-natal, 506 pre-natal, and 791 to children.

74. Lebanon

Total allocation: \$26,000  
(May 1951)

The rural health project, which would include MCW activities, has been delayed in its implementation. A WHO senior adviser, a public health engineer and a health educator are being recruited, to arrive in Lebanon in mid-1957. The eventual

development of this project will bring to realization the objectives foreseen in UNICEF's original assistance to MCW in Lebanon.

75. Libya

Total allocation: \$83,600  
(First: April 1951  
Latest: September 1952)  
(Also 72,000 pounds of cost-free  
powdered skim milk)

The first Libyan national to graduate in medicine has been appointed as counterpart to the WHO international team leader of the project at Suk-el-Giuama, outside Tripoli. A nurse and midwife have also been appointed to work as counterparts with the international nurse and midwife.

76. Assignment of the eleven community midwives who graduated in March 1956 was previously reported to have taken place in September. This placement has been delayed because construction work on various rural MCW centres could not be completed on schedule. The trainees have thus remained at the Suk-el-Giuama centre to undertake domiciliary midwifery work. As soon as the first four new centres (in Garian, Jafren, Zlitten, and in the Old City of Tripoli) have been opened, two community midwives will be stationed in each and other two will be posted to the existing centre in Fezzan. One graduated community midwife will remain at the Suk-el-Giuama centre.

77. Similar delays are reported for the second training course which should have opened up in September 1956 but did not start because of difficulties experienced in finding suitable candidates. At the end of the year twelve trainees had been selected. Meanwhile, the Government has started recruitment of additional nursing personnel for the Tripoli Hospital, which is to be used as a practical training ground for the community midwife students in Suk-el-Giuama. A WHO-assisted nursing education project is also being developed within this hospital, where a special nursing school building is under construction to be completed early in 1957. To facilitate the MCW training, UNICEF is providing equipment for the maternity and

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paediatric wards in this hospital. In the second training and demonstration centre, established in Benghazi, the first training course, scheduled to start in November, was also delayed because construction and remodelling work on the building did not progress as scheduled and because furniture and equipment could not be provided in time by the Government. The target is now to open the course in early 1957. Recruitment of medical and auxiliary personnel for this centre is now under way. WHO is recruiting a second international nurse-midwife, who should arrive in January 1957.

78. Procurement action has been initiated by UNICEF to provide teaching and training equipment for a school to train medical assistance and sanitarians in Benghazi. Construction of the building for this school did not reach completion until the end of December 1956 and it was therefore not possible for the Government to start the first courses until early 1957. The Government has meanwhile started to buy additional equipment and to recruit personnel for this school.

79. Sudan

Total allocation: \$30,500  
(September 1955)  
(Also 36,000 pounds of cost-free  
powdered skim milk)

Most of the teaching and training equipment for the four Government training institutions arrived the latter half of 1956 and new courses were started in the autumn of 1956. The review which was to have been undertaken jointly by the Government and WHO in the latter part of 1956 to determine what further MCW facilities might be developed in the country has had to be postponed.

80. The Khartoum nursing school has been established and the first course was started at the end of September 1956. This course is designed to train fully qualified nurses in preventive and curative medicine. In order to maintain a high teaching standard and assure a broad clinical experience, the college is affiliated with selected health, hospital and educational institutions in and around

Khartoum. The basic three-year curriculum concerned with both preventive and curative medicine covers the fields of paediatrics, medial, surgical and obstetrical nursing. While enrolment in the first year was limited to ten students, it is proposed that in subsequent years an enrolment of about twenty students per annum will be possible. WHO has provided two nurse-educators, and a third is under recruitment for appointment in early 1957. The plan of operations for this programme has been approved by WHO and UNICEF, and is expected to be signed early in 1957.

81. Syria

Total allocation: \$105,800  
(First: May 1951  
Latest: September 1954)  
(Also 635,000 pounds of cost-free  
powdered skim milk)

The rapid expansion of this programme, as previously reported, has led to staffing difficulties and the necessity of closing down four centres for lack of personnel. The Government hopes that present training programmes will provide all personnel necessary to re-open these centres in 1957.

82. The rate of expansion of the rural health and MCW services foreseen in the last report to the Board had to be somewhat curtailed because of financial limitations due to the uncertain international situation. The Government intends, however, to set up a small number of rural MCW village centres in 1957, each to be staffed by a midwife assisted by one or two auxiliaries and supervised by medical officers from the main district MCW centre. Detailed plans in this respect are now under consideration. The Government may request UNICEF to provide further aid for this purpose at a later stage. During July-November 1956, for which period reports are available, the number of visits to the training and demonstration centre in Damascus was: 1,975 pre-natal and 3,197 children. During the same period, 798 home visits were made from this centre.

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83. School health services: Steps are being taken by the Department of Education toward consolidation of school health services. Provision is made in the 1957 budget of the department for the appointment of full-time medical officers and school health assistants to work in this programme. Funds have also been budgeted for the purchase of three vehicles to match the vehicles UNICEF has provided. Efforts are also being made by the Government to advance the primary agricultural education scheme which forms part of the school health services programme and for which UNICEF is to provide garden seeds. (The school feeding part of this programme is reviewed below at page 42.) The feeding programme originally planned to reach 30,000 school children in 1957 has been curtailed on account of difficulties in local financing. Pending agreement on a revised plan of operations for the entire school services project it has been agreed that no further deliveries would be made against UNICEF commitments.

84. Turkey

Total allocation: \$114,400  
(March 1953)  
(Also 600,000 pounds of cost-free powdered skim milk)

A recommendation for further UNICEF assistance to this programme for a three-year period of expansion (1957/59) is before the present session of the Board (E/ICEF/L.1045), and this gives a summary of past activity.

Rehabilitation of handicapped children

85. Israel

Total allocation: \$19,700  
(February 1953)

The new course for physiotherapists started at the Sarafand Hospital in October with twenty-five new trainees in the Rehabilitation Centre. The two in-patient wards are filled to capacity. Among the new poliomyelitis patients, there has recently been an increase in the incidence among older children and adolescents.

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The work-load in the out-patient department continues to be heavy, but since the graduation of eighteen new physiotherapists in the autumn of 1956, it has been possible to cope more adequately with this work. The system of ambulatory care of handicapped children combined with home care has been expanded to two new districts (Tiberias and Nathania) and is successfully being carried out with the co-operation of local health authorities. At the end of 1956, all preparations were made to start polio vaccination of 120,000 children in the age-group six months to three years.

86. Lebanon

Total allocation: 25,000  
(March 1954)

Following the completion of the assignment of the WHO senior adviser, the centre appointed a French orthopaedist as medical director on a part-time basis. He divides his time more or less equally between Paris and Beirut, and is assisted by a full-time Lebanese medical officer and two French physiotherapists. The WHO prosthetic engineer is the only international expert now remaining in this centre. Late in December a training course of eighteen months was started for physiotherapists and seven prosthetic technicians are undergoing training. About eighty children, chiefly out-patients, were under treatment at the end of the year. The Government has indicated its intention to propose certain amendments, principally of an administrative nature, to the plan of operations.

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Premature infant care

87. Egypt

Total allocation: \$13,000<sup>1/</sup>

Procurement of UNICEF supplies and equipment has started for the premature baby unit at the Kasr-el-Aini Hospital and for the home care unit to be located at Gounhoria Hospital. Construction work on the fifth floor of the Kasr-el-Aini Hospital, which is to house the premature unit, is expected to be completed by March 1957. A plan of operations for this project is under discussion between the Government, WHO and UNICEF, and it is hoped that with the completion of the construction work for the two units and the arrival of the WHO nurse, who is expected in the country in April, the programme can be initiated. This programme will help to improve standards of care for new-born babies by providing special training to doctors and nurses taking part in the programme. It will also help to raise the standard of mothercraft by giving practical demonstration of infant care to the mothers of premature babies.

88. Israel

Total allocation: \$20,500  
(March 1955)

Some progress has been made in accelerating the rate at which the three UNICEF-assisted premature baby units are being put into operations. The first unit, located at the Wizo Homes in Tel Aviv, came into operation in August 1956. The second of these units, to be located in the Government Hospital Rambam in Haifa,

1/ Out of allocation approved in September 1955 for ICW services and training.

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had initially been scheduled for completion at the end of 1957, but it has been possible for the Government to advance this schedule so that this unit is now expected to open by March or April 1957. In the first stage this unit will make provision for twelve prematures, later to be increased to seventeen. The third centre is to be located in the maternity department of the Poriah Hospital in Tiberias. Construction of this department has now begun, to be completed early in 1958.

Environmental Sanitation

89. Ethiopia

Total allocation: \$38,000  
(September 1955)

A plan of operations for this pilot project has been prepared and awaits UNICEF and WHO approval. The basic principle is to introduce environmental sanitation facilities in four communities where health centres are being installed. UNICEF supplies and equipment for this programme have been delivered. The target is to provide 30,000 people with adequate sanitary facilities through construction of 150 wells and 1,500 latrines before September 1958. A well and safe-water reserve tank have been completed with community participation for the town of Kolladuba, and safe-water supply thereby assured for the 2,000 inhabitants. Reconditioning of old wells and water distribution systems of Adi Arkai and Dabat has been temporarily held up due to delays in shipping to Ethiopia. An essential part of this project is the training of sanitarians, for whom UNICEF has contributed stipends. In addition, the WHO sanitary engineer-adviser has trained four crews of skilled labourers.

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NUTRITION

Child feeding

90. Ethiopia

Total Allocation: 13,700  
(March 1955)  
(Also 350,000 pounds cost-free  
powdered skim milk)

A second summer vacation course in nutrition and school gardening was organized in August and attended by a 100 school teachers, half of whom had participated in the first course in 1955. The nutrition programme was re-activated at the opening of schools in October, and a number of requests were received to extend school gardening to new schools. The Government has upheld its decision to maintain the programme at the level of the previous school year in order to permit the programme to become better consolidated administratively. The number of school gardens in operation during 1956/57 remains at forty-three with 20,000 children participating. In some of the provinces a change is being made in the type of vegetables grown and certain schools have been supplied with seeds brought in by UNICEF. The school feeding programme has continued during the first part of the current school year, with the same number of beneficiaries as in the past: 6,500 children in twenty schools. Milk kitchen utensils have been provided by UNICEF sufficient for 10,000 children. The Government is satisfied that the feeding programme is sufficiently well established to permit an increase during the first part of 1957 to the full target figure of 10,000 beneficiaries.

91. The assignment of the FAO Home Economist is being continued through 1957 through special arrangement between FAO and the Government, the Ministry of Education reimbursing FAO for the cost involved. A well qualified administrator has been appointed to serve as the national counterpart for the FAO expert. The Government has also assigned two full-time school teachers as field supervisors in the feeding programme.

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92. Iran

Total allocation: 24,500 <sup>1/</sup>  
(September 1951)

As reported above, pre-school feeding is carried out in connexion with the MCW programme. Milk distribution through schools reached 42,000 beneficiaries in 124 schools in Teheran and 52,000 beneficiaries in the provinces during 1956.

93. Iraq

Total allocation: 195,000  
(First, March 1953)  
(Latest, September 1955)  
(Also 6,480,000 pounds cost-free powdered skim milk)

The school feeding service, which extends to all fourteen liwas (provinces) of the country started its fourth year in September 1956. At the end of the year almost 85,000 children were receiving a mid-morning school meal while an additional 136,700 were receiving a daily cup of milk and a vitamin capsule. This is still considerably short of the target originally set for this school year, due largely to difficulties in distribution. The Government plans in 1957 to carry out a detailed assessment of the feeding service, to improve the methods of distribution, and to evaluate the effects of the programme. In 1956, distribution of milk and fish-liver-oil capsules, previously available through primary schools operated by the Ministry of Education, was extended to primary schools under the Ministry of Social Affairs. A number of centres which include primary school facilities are gradually being established as part of a country-wide community development plan for rural areas. Distribution has so far reached 7,700 children in these centres. Two Social Welfare experts from UNRWA assist the Government in the implementation of this project.

94. A recommendation for UNICEF aid for this programme for a further year (1957/58) is before the Board at this session. (E/ICEF/L.1032). Following the 1957/58 school year the Government expects to continue the school feeding service with its own resources.

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<sup>1/</sup> Substantial amounts of skim and whole milk powder and fish-liver-oil capsules have been allocated to Iran for the MCW programme described above at pages 28 and 29.

95. Jordan

Total allocation: 1/  
(September 1956)  
(1,468,000 pounds of cost-  
free powdered skim milk)

Distribution of skim milk to primary schools has been effected during the past two school years as part of the emergency feeding programme, reaching 28,000 in 1955/56. The Government has now organized school feeding as a separate programme and the Board approved last October funds to extend school feeding to the end of the 1956/57 school year. The programme is jointly sponsored by the Ministries of Social Affairs and Education and is supervised by district education inspectors and by probation officers of the Ministry of Social Affairs. The distribution of UNICEF milk from central warehouses to individual schools is carried out through the facilities of UNRWA. A somewhat limited start was made at the outset of the 1956/57 school year. The Ministry of Social Affairs in November appointed a social worker to take full-time charge of the programme and distribution has since then gathered considerable momentum. The Government expects during the latter part of this school year to exceed the initial target of 35,000 and to reach 40,000 school children. The Government is also studying arrangements to make the milk available as laban (yoghurt), a product which is well liked by the children in Jordan.

96. Libya

Previous allocation: 385,800  
(September 1954)  
(Also 1,811,700 pounds of  
cost-free powdered skim milk)

Milk distribution started in May 1955 in a limited number of schools. The programme expanded gradually from a small scale pilot project during the second quarter of 1955 to a mass feeding scheme so that in May 1956 an average of 60,700 children were reached through 357 schools, exceeding the original target. Since the commencement of the programme, there has been an increased number of school enrolments and a decreased number of absentees.

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1/ The allocation for this programme was entirely for freight to cover costs to UNICEF of shipping dry skim milk available free of cost from United States supplies.

97. The Government has carried out its total commitments for matching UNICEF's contribution by providing daily rations of dates, bread and sugar. It has also made available two five-ton diesel trucks for the transportation of supplies. It is estimated that during the school year October 1956/May 1957, a total of 75,000 children will be reached through 375 schools. The supplies of milk, vitamins and soap within the existing allocation would be adequate for the purpose.

98. A recommendation is before the present Board session for aid to permit continuation and expansion of the programme to reach 80,000 children through 400 schools during the school year October 1957/May 1958 and 90,000 children through 420 schools during the school year October 1958/May 1959. (E/ICEF/L.D23). The Government will continue to provide foodstuffs which are available locally. FAO is expected to provide the services of a nutrition education or dietary survey expert during the second half of 1957.

99. Syria

Total allocation: 1/  
(September: 1955)

The Board was informed at its October 1956 session that the feeding programme as part of the school services programme (see above para. 83 ) was in abeyance pending arrangements for the necessary local finances. With the start of the 1956/57 school year, the Government resumed some school feeding but the scope of the operation is now limited to the use of skim milk powder and fish-liver-oil capsules remaining from the previous school year. Approximately 25,000 school children are receiving rations through 180 schools, primarily in the three southern mohafazats of Damascus, Hauran, Swaida.

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1/ Funds for this programme are included in new allocations approved by the Board for school health services.

100. Turkey

Total allocation: 579,300  
(March 1956)  
(Also 1,400,000 pounds  
cost-free dry skim milk)

The plan of operations for this one-year school feeding programme (1956/57) was finalized with the Government in May 1956. Milk powder, fish-liver-oil capsules, vehicles and milk mixing utensils were delivered by UNICEF and distribution began in October. The plan of distribution is concentrated in four urban areas of Ankara, Istanbul, Izmir and Diyarbakir provinces and in four adjacent rural pilot sectors. While initial difficulties were encountered in reconstitution and distribution of milk (due in part to inexperience and in part to the fact that three shifts of children attend daily) the organization is already showing improvement and there has been a gratifying response from local authorities, the Parents' and Teacher's Associations and other voluntary organizations. A recommendation for continuation and expansion of this programme is before the Board at its present session (E/ICEF/L.1036).

Milk conservation

101. Egypt

Total allocation: \$240,000  
(First: September 1952  
Latest: September 1956)

Work on this milk processing plant has not advanced as far as would have been expected under normal conditions, but activity is expected to start again early in 1957. Previous estimates as to when the plant might be ready for operation must, therefore, be modified and for the moment no date can be fixed.

102. Iran

Total allocation: \$418,000  
(First: November 1951  
Latest: March 1953)

While the physical dairy plant is practically ready for operations, a number of administrative arrangements require settlement before production can be started. The plan of operations provides for a public utility type of authority to operate the plant and this has not yet been established. Much also remains to be done in organizing and augmenting the sources of supply of raw milk. Plans for the distribution of the fraction of the output going for welfare purposes also have to be drawn. The Government is giving its attention to these matters and it is expected that early in the new year the administrative structure and decisions required should be completed, permitting the commencement of operations in 1957. FAO has an expert working on the project, and UNICEF will attach temporarily to its office in Iran a person with experience on dairy management who will give full time to this project in an effort to help bring it into operation.

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103. Iraq

Total allocation: \$246,100  
(First: October 1952  
Latest: March 1956)

While the main structure of the dairy processing building has been completed, delays have been experienced in the supply of the necessary services (primarily water and electrical) and the construction of the ancillary buildings. Some of the UNICEF supplied equipment is being installed. The remainder is either delivered or enroute. Start of operation during the early part of 1958 is now foreseen.

104. Israel

Total allocation: \$300,000  
(Approved: April 1952)

UNICEF assistance has been extended to five dairies in Israel, four of which are located in the Tel-Aviv area, which has a population of 600,000. The consumption of bottled liquid milk in this area has, during the last six months of 1956, increased from 80 per cent to 95 per cent of the total quantity sold. The construction of a new bottling plant in Haifa has been temporarily held up, but it is anticipated that construction of this plant will be continued during 1957. In the meantime, equipment originally destined for this new dairy has been temporarily installed in older installations in Haifa and Jerusalem. These temporary installations have made possible the bottling of some 35 per cent of the fluid milk being distributed in these two cities. Government funds are being used to improve milk collection and cooling facilities on farms, and also to provide road tankers for the transport of raw milk. It is estimated that during 1957 approximately one-quarter of all the raw milk transported to city dairies will come in by means of tank trucks in lieu of shipment in cans.

105. In September 1956 a central milk board was set up by the Government comprising representatives of farmers' groups, dairy interests and Governmental departments concerned with milk production and distribution. The

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milk board is at present established as an advisory group, but it is envisaged that at some future date it will assume executive functions.

106. Syria

Total allocation: \$500,000  
(Approved: October 1956)

While it is expected that the plan of operations and draft legislation with respect to this project will be submitted to Parliament for ratification this year, no other developments are anticipated before the middle or late part of 1957.

107. Turkey

Total allocation: \$255,000  
(First: October 1952  
Latest: September 1954)

In the course of 1956 the construction of the Ankara dairy, the installation of equipment and the testing of the installations have progressed steadily. It is planned to start operations at the end of the first quarter of 1957. Under a contractual arrangement the supplying firms have provided erectors for installation and testing of the machinery supplied by UNICEF. The currency situation has made it difficult for the Government to provide building materials that had to be imported from abroad for the construction of the plant.

108. An FAO plant management adviser arrived in Turkey at the end of 1956 and personnel trained with the help of US/ICA aid have returned from studies abroad to take up their new assignments. Throughout the year, preparations for the start of the plant have been made by the Ataturk State Farm, the organization responsible for operating the plant. Farmers have been informed as to the expectations of the plant concerning quantities and the quality of milk. Arrangements are being made to provide appropriate cattle feed for greater milk production. The US/ICA has carried out for several years a

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dairy demonstration programme in the Ankara area. Plans have also been drawn up for the distribution of milk through existing milk shops and contractual arrangements concluded with eighty-one distribution points. Municipal authorities envisage the eventual prevention of the sale of raw milk in Ankara.

109. Plans are under discussion for a second phase of a national milk development programme, in accordance with findings of a study by UNICEF and ICA in the course of 1955. Kars, in North-eastern Turkey, has been selected as a site for the first drying plant. About 50 per cent of the initial output of the plant will go to free distribution programmes under the Ministry of Health and Education, the other half will serve to increase and tone the public supply of milk processed by the Ankara and Istanbul dairies and thus lower the cost of the milk being sold to the public. The Government is prepared to make special efforts in its eastern provinces to improve dairy facilities in relation to breeding, disease control, feeding, agricultural expansion, etc. A provisional plan of operations for the second phase of this programme has been drawn up and discussed with the Turkish authorities. Further study is being made with respect to the exact location of the plant and collection problems during the milk producing period in the Kars area.

#### EMERGENCIES

##### Egypt

##### 110. Gaza area

Total allocation: \$200,000  
(October 1952)

Milk distribution from supplies shipped by UNICEF was concluded in August. An agreement had previously been reached with the Government to continue a supplementary feeding programme for 2,500 school children, supplying daily meals from its own resources, but it has not so far been possible to implement this.

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111. Port Said evacuees

Total allocation: \$96,500  
(December 1956)

(Also 309,000 pounds cost-free  
powdered skim milk)

The Executive Board in emergency session December 1956 approved an allocation to provide assistance for a period of three months to 40,000 mothers and children who had been removed from the Port Said area to other parts of Egypt. About half of the evacuees were housed in Government institutions and others in private homes. The assistance provided by the Fund included 30,000 blankets, powdered skim milk, vitamin capsules and soap. The milk, which was diverted from other programmes, arrived in Alexandria on 31st December, the blankets a month later. The Government has granted a daily allowance to each evacuee, and other assistance has been provided by other countries and international organizations.

112. Jordan

Total allocation: \$882,000  
(First: April 1952

Latest: September 1954)  
(Also 2,531,000 pounds of  
cost-free powdered skim milk)

The distribution of rice, fats, dried fruits and soap provided by UNICEF to children and mothers in the borderline villages has been continued. In villages where facilities for the reconstitution of skim milk powder are available in "milk centres" operated by UNRWA or voluntary agencies, milk is issued daily in liquid form. In the remaining villages milk is distributed in dry form together with the quarterly distributions of other foods. Of the total of approximately 50,000 mothers and children reached through this programme, 18,500 are now getting their milk rations in the dry form. The processing of milk into laban (yoghourt) is being introduced in the various milk centres and will be extended gradually.

113. A storage problem arose in the second half of 1956 as storage facilities usually made available by UNRWA for UNICEF's feeding programmes in Jordan were fully committed. The Government in this emergency provided warehouses for the storage of up to 500 tons of skim milk powder. The collaboration of voluntary agencies in the implementation of this programme has continued satisfactorily and had been expanded to include the Anglican Bishopric which is doing relief work in the Jerusalem area. In a few instances the work of these agencies was curtailed during the November emergency but activities were resumed as conditions returned to normal. The Government looks to UNICEF for continued assistance in child feeding on the grounds that no improvement in the situation can be foreseen in the immediate future.

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L.40 / A 16-761CF (REV. 11-74)  
 UNICEF MICROFICHE INPUT CONTROL AND INSTRUCTIONS RECORD

No. 230 (1)

(15\*) STRIPE COLOUR: White Blue Grey - Yellow - Green - Brown Pink Red

Date 2 June / 77 (2)

	(3) 77.CF. 0163+	E/ICFF/336/Add 5											
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(17*)	ENGLISH	ADDENDA-CORRIGENDA										UNICEF	
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(11) →	B-1	B-2	B-3	B-4	B-5	B-6	B-7	B-8	B-9	B-10	B-11	B-12	
B (12)	CLEAR	Card 5 77.CF 0163+	CLEAR	CORR START	2	3	4	5	6	7	8	9	
(18*) →	C-1	C-2	C-3	C-4	C-5	C-6	C-7	C-8	C-9	C-10	C-11	C-12	
C	ADD START	11	12	13	14	15	16	17	18	19	20	21	
D	D-1	D-2	D-3	D-4	D-5	D-6	D-7	D-8	D-9	D-10	D-11	D-12	
E	22	23	24	25	26	27	28	29	30	31	32	33	
F	E-1	E-2	E-3	E-4	E-5	E-6	E-7	E-8	E-9	E-10	E-11	E-12	
	34	35	36	37	38	39	40	41	42	43	44	45	
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Code "NR", appearing in any location of Row A  
 MUST NOT be reproduced on microfiche

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(19\*) ENVELOPE COLOUR: White - Blue - Yellow - Pink - Green - Grey

TRAILERS YES( )  
NO (14)

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