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UNITED NATIONS  
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AND  
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UNITED NATIONS CHILDREN'S FUND

Executive Board

DIGEST OF UNICEF-AIDED PROJECTS\*

PART III: EASTERN MEDITERRANEAN

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UNICEF AID TO EASTERN MEDITERRANEANIntroduction

From the inception of UNICEF in 1946 up to the present, UNICEF aid has been given for 91 child care projects in 13 countries and territories of Eastern Mediterranean. UNICEF is currently helping in 65 projects in 13 countries and territories and in a regional tuberculosis survey project. The projects aided are as follows:

	<u>Currently aided</u>	<u>Previously aided</u>	<u>Total</u>
HEALTH SERVICES	16	3	19
Basic Health/MCH	13	1	14
Environmental Sanitation	1	-	1
Handicapped Children	-	2	2
Care of Prematures	2	-	2
FAMILY AND CHILD WELFARE SERVICES	2	-	2
Social Services for Children	2	-	2
DISEASE CONTROL	28	16	44
Malaria	11	-	11
BCG Vaccination	4	10	14
Tuberculosis Control other than BCG	6	1	7
Syphilis	1	1	2
Bejel/Syphilis	1	2	3
Leprosy	1	-	1
Trachoma	3	1	4
Bilharziasis	1	-	1
Mycosis	-	1	1
NUTRITION	18	1	19
Maternal and Child Feeding	8	1	9
Nutrition Education etc.	3	-	3
Milk Conservation	7	-	7
EMERGENCY AID	2	5	7
GRAND TOTAL	66	25	91

Funds have been allocated for Maternal and Child Health Services Projects to help equip 1,095 primary health centres and 290 village centres in the Eastern Mediterranean.

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Co-ordination with other branches of the United Nations

Other branches and certain Specialized Agencies of the United Nations provide technical and consultative services in connexion with UNICEF-assisted projects - at the planning stage, during the operation of the projects and in evaluation of the results. While the role of these agencies is a key factor in the successful development and implementation of the projects, it is not fully reported in the individual project description below.

Programme Allocations to Eastern Mediterranean, 1957 - 1959

Allocations (including freight) approved for Eastern Mediterranean over the past three years are shown below, by year and by type of programme (in US dollars):

	1957		1958		1959	
	Amount	Per cent	Amount	Per cent	Amount	Per cent
<u>Health Services</u>	<u>460,000</u>	<u>17.4</u>	<u>541,000</u>	<u>15.2</u>	<u>17,000</u>	<u>0.4</u>
<u>Disease Control</u>	<u>1,107,954</u>	<u>42.0</u>	<u>2,553,000</u>	<u>71.6</u>	<u>2,531,188</u>	<u>61.8</u>
Malaria campaigns	1,045,000	39.6	2,350,000	65.9	2,167,500	52.9
TB control	954	-	152,000	4.3	152,488	3.7
Trachoma & rel. eye disease control	44,000	1.7	51,000	1.4	211,200	5.2
Leprosy control	18,000	0.7	-	-	-	-
<u>Nutrition</u>	<u>684,000</u>	<u>25.9</u>	<u>202,000</u>	<u>5.6</u>	<u>842,000</u>	<u>20.5</u>
Child feeding	457,000	17.3	173,000	4.8	484,200	11.8
Milk processing	227,000	8.6	29,000	0.8	276,000	6.7
Nutrition education etc.	-	-	-	-	81,800	2.0
<u>Total Long-Range Aid</u>	<u>2,251,954</u>	<u>85.3</u>	<u>3,296,000</u>	<u>92.4</u>	<u>3,390,188</u>	<u>82.7</u>
Emergency Aid	<u>386,404</u>	<u>14.7</u>	<u>270,000</u>	<u>7.6</u>	<u>709,000</u>	<u>17.3</u>
<u>Grand Total</u>	<u>2,638,358</u>	<u>100.0</u>	<u>3,566,000</u>	<u>100.0</u>	<u>4,099,188</u>	<u>100.0</u>

As shown in the table on the following page programme allocations approved for Eastern Mediterranean from the inception of UNICEF to the present total over \$41 million or approximately 14.7 per cent of UNICEF aid to all regions. In the period since 1950, with the emphasis primarily on assisting long-range programmes, over 18.6 per cent of all UNICEF aid has gone to Eastern Mediterranean, a total of over \$28 million.

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UNICEF ALLOCATIONS TO EASTERN MEDITERRANEAN

Assistance Approved by the Executive Board from 1947 to the end of March 1960 by country and type of project  
(in thousands of United States Dollars.)

	Health Services <i>a/</i> (1)	Family & Child Welfare Services (2)	Disease Control					Nutrition		Emergency Aid <i>a/</i> (12)	Freight (13)	Grand Total of all project allocations (14)	
			Malaria Eradication, Control & DDT Prod. <i>b/</i> (3)	BCG Vacc. and Other TB Control (4)	Bejel, Yaws and VD Control (5)	Leprosy Control (6)	Trachoma Control (7)	Other Disease Control (8)	Child Feeding <i>a/</i> (9)				Milk Conservation (10)
Aden	129.6	-	-	7.3	-	-	-	-	-	-	-	15.9	152.8
British Somaliland	14.4	-	22.3	-	-	-	-	-	-	-	-	4.6	41.3
Ethiopia	172.1	-	46.0	147.6	106.0	39.5	128.4	-	87.9	17.8	-	133.7	879.0
Iran	344.0	-	4,189.4	330.7	34.0	-	-	-	26.3	543.4	-	792.8	6,260.6
Iraq	129.7	-	611.2	77.4	112.4	-	-	-	155.4	266.1	-	33.6	379.6
Israel	204.9	-	-	85.4	-	-	-	-	89.2	738.0	28.9	326.8	1,615.4
Jordan	120.7	-	83.5	89.2	-	-	-	-	<i>a/</i>	-	-	1,691.3	377.0
Lebanon	47.4	-	54.9	22.1	-	-	-	-	-	-	-	-	9.6
Libya	131.6	-	-	86.9	-	-	-	-	168.5	-	-	-	166.7
Somaliland Under It. Admin.	31.0	-	209.3	67.0	-	-	-	-	10.2	-	-	278.0	112.8
Sudan	56.3	-	160.7	41.7	-	-	-	-	-	-	-	-	26.8
Turkey	340.7	22.6 <sup>c/</sup>	3,838.6	315.7	-	-	87.7	-	250.6	255.0	43.0	44.2	924.3
Palestine Refugees	-	-	-	-	-	-	-	-	-	-	-	14,586.5	1,747.5
United Arab Rep: Egypt	377.8	20.0 <sup>c/</sup>	429.1 <sup>b/</sup>	325.0	-	-	86.2	46.4 <sup>d/</sup>	-	240.0	-	304.9	184.2
United Arab Rep: Syria	159.9	-	770.2	49.5	41.2	-	-	29.9 <sup>e/</sup>	-	500.0	-	-	168.3
BCG Regional Assessment Teams	-	-	-	46.6	-	-	-	-	-	-	-	-	-
Regional TB Survey Team	-	-	-	40.0	-	-	-	-	-	-	-	-	4.0
	2,260.1	42.6	10,395.2	1,732.1	293.6	39.5	302.3	76.3	788.1	2,560.3	71.9	17,265.3	5,190.0
													41,017.3

*a/* Large quantities of skim milk powder provided for these projects have been at token prices or free of cost out of United States or Canadian surplus stocks. In the case of the free milk, UNICEF pays only ocean freight costs which are included in Column 13.

*b/* Includes DDT production for Egypt, \$307,900.

*c/* Social Services for Children.

*d/* Bilharziasis Control

*e/* Lycosis Control

UNICEF-AIDED PROJECTS IN EASTERN MEDITERRANEAN AREAADEN COLONY AND PROTECTORATE

Population:	Colony: 183,000	Area:	Colony: 194 sq.km.
	Prot.: 460,000		Prot.: 290,080 sq.km.
Child population:	Colony: 76,000	Population density:	Colony: 943 per sq.km.
	Prot.: 189,000		Prot.: 2 per sq.km.
Primary school enrolment:	Colony: 6,784	Population per physician:	Colony: 2,700
	Prot.: 12,095		Prot.: 54,000

Total UNICEF aid: \$152,800 including freight  
 First allocation: 1951

Basic Health/MCH

Allocation: \$120,300  
 First: October 1956  
 Latest: March 1960

The Protectorate:

The impetus given to the health services of the Protectorate by UNICEF's provision of equipment for training facilities, district hospitals, MCH centres and related services has accelerated expansion faster than was anticipated. To date, in addition to the two training centre hospitals (building up to 100 bed capacity) at Makhzan and Mukalla, there are two district hospitals with out-patient clinics, five rural district hospitals (20-30 bed capacity), including attached major MCH centres, and 70 health centres supervised by the hospital MCH staff and providing services to areas surrounding the hospitals. UNICEF has provided two vehicles to assist in sanitation aspects of public health work as well as mobile dental equipment in one region.

The latest allocation (March 1960) will help to complete the total planned medical establishment for the Protectorate. Equipment will be provided for a third base hospital and training centre at Saiun in the Wadi Hadhramaut, as well as for one additional rural district hospital with out-patient clinic; three rural district hospitals serving health units; 16 MCH centres; and transport for a third sanitation unit at Saiun. Expendable supplies such as drugs, vitamin capsules, milk and soap will also be provided by UNICEF, the Government assuming responsibility to provide such supplies on a progressively increasing basis each year and taking full responsibility by 1965.

Stipends have been provided for trainees at the two training centres and there has been no difficulty in recruiting and holding girl trainees in the Protectorate. Both training centres have undergone considerable reorganization and expansion and additional equipment is being provided by UNICEF under an allocation approved in March 1960. Increasing professional staff in the Protectorate health services gives assurance of greater supervision and control than in the past. The number of doctors has increased from 18 to 28 and the number of fully qualified nurse/midwives from 3 to 5. A special headquarters with a laboratory has been established for control of communicable eye diseases. The respective states will provide buildings for the new hospitals and for 28 MCH centres which are at present located in unsatisfactory buildings.

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ADEN COLONY AND PROTECTORATE - Basic Health/MCH (continued)The Colony:

Allocation: \$9,300

Approved: April 1957

The immediate objectives of this project have been met. The training maternity ward at Crater hospital and four MCH centres are in operation and home visiting of all maternity cases from the hospital is now established. Through these services 80 per cent of all births in the Colony are now attended. Further knowledge of health and social conditions of the various groups in the Colony is being sought as the basis for additional improvements. UNICEF has provided teaching and training equipment for a nurse/midwives training centre and supplementary equipment for the 60-bed maternity hospital and clinic at Crater. The Fund has also provided equipment and dried skim milk to help upgrade two MCH centres and transport to service five centres and two hospitals. The attempts to train girls for MCH services has not been successful as yet as may be seen by the following table, but the Medical Service indicates that there has been progress nevertheless and will strengthen the efforts to make the project successful.

<u>Year</u> <u>Recruited</u>	<u>Number</u> <u>Recruited</u>	<u>Remaining after</u> <u>six months</u>	<u>Remaining after</u> <u>twelve months</u>	<u>Remaining</u> <u>at present</u>
1956	12	7	4	0
1957	16	13	6	2
1958	9	7	6	6
1959	16	16	16	16

Allocation: \$7,300

BCG Anti-Tuberculosis VaccinationUNICEF aid completed

UNICEF provided supplies and equipment for a BCG vaccination campaign which was carried out in the Colony from 1952 to early 1956. More than 38,000 persons were tested and over 10,000 vaccinated in those years. The Government has continued the project as part of its permanent health services, bringing total tests to over 60,000 and vaccinations to more than 15,000 by mid-1959.

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BRITISH SOMALILAND

Population: 552,000	Area: 176,120 sq.km.
Child population: 224,000	Population density: 3 per sq.km.
Primary school enrolment: 2,072	Population per physician: 58,000

Total UNICEF aid: \$41,300 including freight  
First allocation 1955

Basic Health/MCH

Allocation: \$14,400  
Approved: September 1959

Procurement was initiated to provide, during 1960 and 1961, training and teaching aids and one vehicle for the auxiliary health training school, Hargeisa, and equipment and drugs and diet supplements for three MCH centres at Hargeisa, Burao and Borama. The Government took steps to provide budget for personnel, materials, buildings to carry out the project, the actual start of which is planned for June 1960. With the accelerated advance toward self-government within the Territory, it is even more essential than when assistance was requested a year ago that the Protectorate Health Department increases its cadre of well trained national health auxiliaries.

Malaria Control and Eradication (Pilot Project)

Allocation: \$22,300  
First: March 1955  
Latest: September 1959

The UNICEF Board allocated funds in March 1955 for vehicles, insecticides, sprayers and other equipment for a three-year malaria control project. Malaria is considered the most important cause of death among the nomadic peoples in the southern part of the country. Each year there is an outbreak of malaria in the Haud as various tribes and clans follow the rains to these southerly pastures.

The anti-malaria efforts in the period 1955-1958 met with several difficulties, both of a political and of a technical nature. The major problem - to protect 85 per cent of the population who are nomadic and crossing over disputed international boundaries - is as yet unsolved. Following consultation with WHO and UNICEF, the Government decided in 1959 to limit any further action to a consolidation of those control measures which had proved efficient: the larviciding of water tanks, the use of malaria drugs and DDT spraying in the settled communities. Residual sprayings were carried out during 1959 and directly protected an estimated 150,000 persons mainly on that part of the Haud high plateau which is within the national territory. Extensive malariometric observations by a WHO malariologist and laboratory technician continued till October. During November the WHO malariologist was replaced by a WHO entomologist for completion of the study of the nature and extent of the disease in the Territory.

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BRITISH SOMALILAND - Malaria Control and Eradication (Pilot Project) (cont'd)

Additional insecticides, sprayers and two vehicles, authorized by UNICEF Executive Board in September 1959, are to be used in 1960 operations which will be the last year of the pilot studies. The Government and WHO have concluded that it is premature to aim at nation-wide eradication and that any operations beyond 1960 will be confined to a maintenance of the status quo.

ETHIOPIA. INCLUDING THE FEDERATED STATE OF ERITREA

Population: 20,600,000	Area: 1,184,300 sq.km.
Child population: 4,970,000	Population density: 17 per sq.km.
Primary school enrolment: 135,642	Population per physician: not available

Total UNICEF aid: \$879,000 including freight  
First allocation: 1952

Allocation: \$134,100  
First: March 1954  
Latest: September 1958

Basic Health/MCH

Training: The principal focus of this project is the Public Health College and Training Centre at Gondar in Begemedir province for which the Fund has provided special equipment for the delivery room and maternity and paediatric wards, as well as training equipment and transport. WHO and the United States International Co-operation Administration have also given major aid to this project.

At the end of 1959, 150 health officers, community nurses and sanitarians were enrolled at the College. In August 1959 33 trainees completed their training and began a year of internship. Following is the record of graduates and of internships completed since the beginning of the project in 1954:

	<u>1957</u>	<u>1958</u>	<u>1958</u>	<u>1959</u>	<u>1959</u>
	<u>Graduates</u>	<u>Completed</u>	<u>Graduates</u>	<u>Completed</u>	<u>Graduates</u>
		<u>Internship</u>		<u>Internship</u>	
Health Officers	20	20	29	29	15
Community Nurses	15	14	13	13	12
Sanitarians	12	<u>12</u>	19	<u>19</u>	12
Available for assignment		46		61	

Trainees in the community nurse and sanitarian categories have received stipends from UNICEF until their graduation.

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - Basic Health/MCH (cont'd)

Due to the retarded development of health centres, only a limited number of the health officers, community nurses or sanitarians available for assignment were working at health centres by the end of 1959. It will require another 1-6 months to complete additional health centres. In the meantime this personnel has been temporarily assigned either to public health work in the disease campaigns, laboratories and training schemes, or to assist in curative work at hospitals and clinics.

Training for nurses in paediatrics has continued at the Ethio-Swedish Paediatric Clinic in Addis Ababa. Seventy-two nurse trainees from four schools of nursing at Addis Ababa and Lekempti completed the three-month course in paediatrics and baby care in 1959. Teaching equipment from UNICEF arrived and was put to use.

The training of auxiliary community nurse-midwives, scheduled to start in Asmara, Eritrea, during April, was postponed on WHO's initiative and is to start in 1960. In the interim, UNICEF equipment was installed in the paediatric training ward for use in training public health nurses. Equipment for the maternity ward is being held in store pending the start of the UNICEF/WHO-assisted part of the training. The United States International Cooperation Administration supports and provides staff for the health nurses' training project at Asmara.

Health Centres: UNICEF has provided equipment for 32 health centres. Fourteen centres of various grades were started during 1959: Two major training health centres at Gorgora and Dabat in Begemeder Province; three MCH centres attached to or connected with the paediatric hospital in Addis Ababa; eight centres of "A" or "B" type attached to other health institutions in various parts of the country. Due to continued financial and administrative problems, only one service health centre was put into operation of the seven planned; the one centre in operation was temporarily in suspension at the end of the year; construction at four other centres is being speeded up. One additional health centre has been established by local initiative in Gemu Goffa province and is ready to receive a team of personnel and UNICEF equipment, after inspection by the WHO public health adviser.

Allocation: \$38,000

Approved: September 1955Environmental Sanitation

The environmental sanitation training project, which is attached to the Gondar Public Health College and Training Centre, did not expand significantly during 1959. Attention was concentrated on maintenance and repair of water supply systems, wells and latrines already installed. A review of methods used and an assessment of results revealed that more emphasis is required on health education. Participation and support of the rural population was noted in all communities assisted.

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA (continued)Malaria Eradication (Pilot Project)

Allocation: \$46,000  
 First: March 1956  
 Latest: September 1958

UNICEF has assisted a four-year pilot project in the Awash Valley to establish whether malaria eradication is possible under local conditions. Insecticides, drugs, transport and laboratory equipment have been supplied. An estimated 129,000 people were protected in 1958, the second year of the campaign. Though the extraordinarily heavy rains caused a severe epidemic in October 1958, affecting the entire country and particularly two areas adjacent to the present project at Awash Valley, the pilot area remained free of infection.

During 1959, the pilot project extended into adjacent lowlands and the number of protected people increased to 135,000. A report of progress, achievements and evaluation of the completed project was presented to the Second Regional Technical Conference on Malaria Eradication held in November 1959 in Addis Ababa. No resistance to the insecticides DDT and dieldrin has been found. A.gambiae is the principal vector. Population movements are a problem but the Conference concluded that malaria eradication is technically feasible in the country. Serious problems of finance and administration remain to be solved. The Government has, however, adopted an eradication plan to be carried out under the technical auspices of WHO with substantial aid from the US/ICA. UNICEF equipment provided for an earlier phase of the attack on malaria will be used for continued malaria work in the Awash Valley under the supervision of the WHO-staffed Malaria Eradication Training Centre located within the pilot project zone.

Tuberculosis Control

Allocation: \$5,300  
 Approved: March 1959

In March 1959 the Board approved limited assistance for a new tuberculosis diagnostic home and ambulatory treatment centre in Addis Ababa to operate under supervision of WHO experts. The newly built tuberculosis centre in the outskirts of Addis Ababa opened for consultation in July 1959. WHO has provided x-ray and related equipment, a vehicle and the services of a senior medical adviser, a public health nurse, a laboratory technician and an x-ray technician. At the Ethiopian Pasteur Institute alterations have been completed so that the Institute can accommodate the national tuberculosis laboratory including an insulated culture room. The laboratory has been put into use although UNICEF equipment has not yet arrived.

The tuberculosis centre provides diagnosis, treatment and training and will become the nucleus of an eventual national tuberculosis control programme. Following the opening of the centre, the implementation of the project was more rapid than had been foreseen. Though the start was in the middle of the rainy season, daily attendance at the centre averaged 200 and by the end of November, after less than

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - Tuberculosis Control (cont'd)

five months of operation, 8,395 persons had been examined by routine examinations; 452 cases had been registered for regular ambulatory treatment; and 49 had been referred for hospitalization. A home-visiting service began functioning in October under the guidance of the WHO public health nurse. UNICEF is providing isoniazid for the ambulatory and domiciliary treatment.

Allocation: \$142,300  
First: April 1952  
Latest: March 1959

BCG Anti-Tuberculosis Vaccination

UNICEF provided vaccine and other supplies and equipment for a BCG vaccination campaign that started in Addis Ababa in May 1953, reached out into rural areas the next winter and had, by the end of 1959 tested over 656,000 children and young people and vaccinated 317,000. During 1959 approximately 47,000 were tested, 23,000 vaccinated. UNICEF aid has been approved for the campaign to continue throughout 1960.

A comparatively new disease in Ethiopia, tuberculosis takes a virulent form and causes many deaths. Vaccination on a country-wide basis has proved to be comparatively costly because of the need to transport teams and supplies to widely scattered small villages where only a few persons could be reached at a time. The authorities decided therefore to combine BCG vaccination with other methods of tuberculosis control for which UNICEF assistance was approved in March 1959. BCG vaccination has been integrated with the new comprehensive tuberculosis control scheme. The vaccination activity was taken over in mid-1959 and reorganized by the newly built Tuberculosis Centre in Addis Ababa. Of the two national vaccination teams, one team continued testing and vaccination of school children and selected professional groups in Addis Ababa while the rural team carried on vaccinations in the adjacent Modjo and Nazareth areas. UNICEF equipment provided for the earlier phase of the BCG campaign has been put to use in the integrated project and additional BCG supplies and equipment, including one vehicle authorized by the Board in 1959, arrived in the country.

Allocation: \$106,000  
First: October 1956  
Latest: March 1960

VD Control

Ethiopia's venereal disease programme which has been carried out in four areas in Addis Ababa and Gondar through static centres and through field mass campaigns in Dessie and Lekempti districts, reached its examinations target by the middle of 1959. UNICEF has provided penicillin, equipment for laboratories and clinics and transport. The aim of the project is to determine the best method for control of the disease, which has a very high incidence in the country. Up to the end of 1959 a total of 404,000 persons had been examined and over 330,000 treated. Re-surveys conducted by a WHO consultant in the two mass campaign areas as well as in the static centres

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - VD Control (continued)

showed a dramatic drop in the incidence of early communicable syphilis in the total population. In the Dessie area, the decrease was from 5.71 per cent before the campaign to 0.35 per cent after the campaign, and in the Lekempti area from 0.55 per cent before the campaign to 0 per cent after the campaign. The WHO evaluation concluded that the pilot project had been effective and that control level could be maintained if a follow-up service were established. An adequate maintenance service has been set up in Lekempti area and recommendations have been made to improve the work in the Dessie area. The WHO assessment revealed that in Addis Ababa, where treatment is given at a static clinic, there has not been an appreciable reduction in the number of cases. The rate reported in 1956 as 8.97 per cent had fallen by the end of 1959 to 6.90 per cent. So far no effective method has been found, within reasonable financial means, to reduce the great reservoir of infections in the capital. Study of the problem of high incidence in Addis Ababa is continuing. Following a further allocation approved in March 1960, the mass treatment effort in Godjam Province has been further expanded.

It is generally agreed that the approach through static centres should stress the maternal and child clientele, while mobile field work should be closely coordinated with the work of permanent health centres. Until now, as reported above, the development of health centres has been slow.

Allocation:	\$128,400
First:	September 1957
Latest:	<u>September 1959</u>

Trachoma Control

This project involves a pilot control project carried out through the network of health facilities in Eritrea and a survey of eye diseases combined with treatment of 8,000 school children in the largest cities in Ethiopia proper. Because of the broad network of health facilities in Eritrea, and longer experience with trachoma control, the work can go ahead there more rapidly than in Ethiopia. Due to delay in recruiting a WHO ophthalmologist the project planned for Ethiopia did not begin until early in 1959. UNICEF is providing drugs, transport, record forms and public address equipment.

Eritrea: Treatments started in Eritrea at the end of January 1958. Almost 30,000 school children and an equal number of family contacts were examined; approximately 40,000 persons received treatment. The school campaign with related family contact treatment is now in its third year. A post-operational survey has shown a net decrease of two to five per cent in the incidence of trachoma as compared with the pre-operational survey in 1958. However, the value of the survey is limited, particularly with respect to family contacts, since about 50 per cent of the population to be covered in the survey were absent due to migrations during a locust invasion. The survey, and certain difficulties encountered during the campaign, have prompted a careful review of methods with special attention to the lack of support

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - Trachoma Control (cont'd)

from the authorities, irregularly and negligence of the participating teachers and carelessness during self-medication. Direct supervision is infrequent, due in part to a shortage of transport. Constructive proposals have been made for improvement of operations during the scholastic year 1959-60. The plan for the current scholastic year calls for continued examination of school children and family contacts (possibly 150,000 to be examined), and a small trial mass campaign in five villages with a total of 17,500 inhabitants. The plan calls for the intermittent treatment method to be applied for the first time, but due to delay in preparations and certain technical difficulties, it has been necessary to retain the continuous treatment method for the present.

Ethiopia: The project started in November 1959 and will continue through the scholastic year. Three groups of children are involved. One is a control group. The other groups receive intermittent treatment; each being treated with a different type of antibiotic.

Allocation: \$39,500  
First: September 1955  
Latest: September 1957

Leprosy Control

UNICEF is providing drugs, transport and laboratory equipment for a leprosy control project with its main spearhead in Godjam Province in Northwest Ethiopia where leprosy afflicts perhaps 10 per cent of the population.

The number of patients registered for treatment increased from 38,000 at the end of 1958 to 45,000 at the end of 1959. About 3,000 were in-patients at four leprosaria which also treat or supervise the treatment of an additional 19,000 out-patients; the remaining 23,000 cases are treated as out-patients at static clinics in 48 locations. Approximately 60 per cent of the registered patients were treated in 1959 through governmental clinics and 40 per cent through clinics run by missions. The main problem is to ensure that the out-patients take the sulfone drugs regularly. The majority of out-patients are in the Godjam Province which has the highest known prevalence. To improve the supervision of out-patient centres in Godjam two health officers graduated from the Gondar Public Health College and Training Centre were assigned in 1959 to move continuously from centre to centre. Regular monthly reports of registered patients, of new cases and of drug issues have made it possible to estimate fairly accurately the efficiency of the service. Roughly, it can be said that one third of the patients take the drugs regularly, another third with 50 per cent regularity, and the balance are highly irregular in treatment. The leprosy service concentrated in 1959 on consolidation and improvement rather than on expansion. The central headquarters in Addis Ababa was reorganized in 1959 and training was continued for auxiliary dressers specialized in leprosy; 22 new candidates

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - Leprosy Control (continued)

were recruited to the eighteen-month course. However staffing remains a problem and the possibility of using lay leprosy inspectors as in some other African countries is being explored. The WHO regional statistician has made recommendations to make the statistical records kept by the service more reliable and adequate. The director of the project and an Ethiopian health officer attended the International Leprosy Conference in Brazzaville in 1959 and a WHO short-term consultant was due at the end of the year to evaluate progress and assist in planning future action.

Child Feeding, Nutrition Education and  
Related Activities

Allocation: \$87,900  
First: March 1955  
Latest: March 1959

Two major nutrition surveys were conducted in Ethiopia and Eritrea in 1958, one by an FAO/WHO expert and one by a U.S. team of specialists in various aspects of nutrition. The findings indicate that there is malnourishment throughout the country, with Eritrea in a worse position than Ethiopia proper. There are areas of vitamin deficiencies as well. While the reports indicate that the UNICEF-aided child feeding and nutrition education activities have been of considerable value, both surveys recommend expansion to reach greater numbers of children and emphasis through all possible channels on nutrition education for mothers.

Since early 1955 UNICEF has provided skim milk powder, vitamin capsules, utensils, transport, teaching materials, garden implements and seeds for a child feeding scheme which includes nutrition training for school teachers, school gardening, and the provision of supplementary feeding in schools. The number of school gardens had grown from 54 in 1957 to 84 by the end of 1959. Nutrition training courses have given training to 265 teachers.

Under an allocation approved in March 1959 UNICEF helped in expansion of the feeding scheme to provide milk to 100,000 children in 1959 and vitamin A and D capsules in vitamin deficient areas indicated by the nutrition surveys. The planned expansion of the feeding scheme could not be fully implemented largely for lack of adequate transport. Stocks on hand in the country or in transit at the close of 1959 were sufficient to benefit 30,000 school children, the greatest numbers yet reached in Ethiopia proper, and 24,000 school children in Eritrea, the latter to be included for the first time.

A small pre-school child feeding scheme was successfully initiated in 1959 on an experimental basis in five schools in Addis Ababa and eleven child welfare centres in Eritrea. UNICEF shipped dried milk sufficient for 10,000 pre-school children.

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ETHIOPIA, INCLUDING THE FEDERATED STATE OF ERITREA - Child Feeding, Nutrition  
Education and Related Activities (continued)

The severe drought which caused famine-like conditions in the neighbouring Somalilands was felt also in the Tigre and Harar Provinces of Ethiopia and in Eritrea in the early half of 1959. The Government approached UNICEF for assistance, and arrangements were made to increase distribution through schools and to include other needy children in the Province of Tigre.

The most recent allocation provided teaching and training equipment and transport for a new project to include an annual course in nutrition education and home-making for twenty selected school teachers. The course provides a year of supervised field training following eight months at the training centre at Addis Ababa. The teachers, upon their return to the school system, will be responsible for establishing courses for groups of mothers. The new project has been initiated with the assistance of an FAO adviser. Two additional teachers are promised through bilateral aid. Twenty teachers completed training at the centre in November 1959 and are now engaged in field work. An additional twenty began training in February 1960.

Stimulated by the comprehensive nutrition surveys completed in 1958 and 1959, the Government has now established a National Nutrition Board to stimulate and coordinate nutrition activities and education.

Milk Conservation

Allocation: \$17,800  
Approved: March 1960

The purpose of the aid to this project is threefold: to institute a system of milk quality control, to train extension service workers in better milk production techniques, and to channel a portion of the supply to those most in need of milk, primarily children and pregnant and nursing mothers reached through schools, institutions and hospitals. The Ministry of Agriculture, with the assistance of the United States International Cooperation Administration will establish three small farm-type milk collecting centres this year with a combined capacity of 3,000 to 4,000 litres of milk daily. UNICEF will provide refrigerating equipment for one of these centres and for the Shola Ber dairy; will equip a milk control laboratory; supply training and demonstration equipment; and one vehicle.

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IRAN

Population: 20,520,000	Area: 1,648,000
Child population: 8,430,000	Population density: 12 per sq.km.
Primary school enrolment: 1,135,200	Population per physician: 8,800

Total UNICEF aid: \$5,278,600 including freight  
 First allocation: 1952

Allocation: \$344,000  
 First: October 1952  
 Latest: September 1958

Basic Health/MCH

Following the creation of a Maternal and Child Health Section in the Ministry of Health in 1951, and with assistance from UNICEF beginning in 1952, the Government has made considerable progress in the development of co-ordinated preventive rural health services for mothers and children. The establishment of eleven training and demonstration centres at the province level equipped to offer all preventive and curative services has been accomplished. At the district level the plan calls for 90 smaller but similar centres and for semi-rural areas there will be 300 sub-district centres and 600 village centres. The network of village and district centres now numbers 207 and will increase to 275 during 1960. The Government relies heavily upon such para-governmental organizations as the Red Lion and Sun Society and the Imperial Organization of Social Services for physical facilities and personnel, while UNICEF provides certain equipment for the centres and drugs, dried milk and other diet supplements for distribution through the centres. At the end of 1959 approximately 32,000 children and mothers were receiving milk through these centres, 10,000 receiving soap and approximately 40,000 vitamin A and D capsules. UNICEF is giving equipment for all provincial and district centres, and will have equipped eight maternity homes by the end of 1960.

Training is carried out in part through the provincial centres, where auxiliary personnel are trained on the job, and in part at more formal schools. The National Demonstration and Training centre in Teheran has a staff of two doctors, two nurse-midwives, four midwives and four health visitors (behyars) providing training in maternal and child health work. Students and graduate physicians are trained in collaboration with the University of Teheran, and existing professional schools collaborate in the training of student midwives and nurses. Short courses in advanced training are given to the MCH medical staff. The centre is assisted by WHO experts and receives financial aid from the Government's Plan Organization.

The Red Lion and Sun Organization operates a similar training centre in Teheran, "Khajeh-Nouri", which gives advanced training to its own personnel and to medical students of the University.

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IRAN - Basic Health/MCH (continued)

Nurse-midwives of a higher standard are trained in the High Institute of Midwifery in Teheran to which a WHO nurse-midwife educator is attached. Fifteen students completed the two-year course by the end of 1959. Twelve nurse-midwives are still in training as are also eight obstetrical nursing students from the Red Lion and Sun nursing school. To date 71 nurse-midwives have graduated from the Institute. Most of them are engaged in supervisory work in hospitals or in active midwifery in the capital city; only six, however, are working in the provinces. There is an increasing tendency to train more students from the provinces; 8 out of 12 new students enrolled recently are from the provinces. UNICEF has provided the Institute with training and demonstration material, one vehicle for field work and expendable supplies. There are now 120 health visitors in training in four schools. The plan of operations calls for an additional three schools to be opened in 1960. Meanwhile the health visitors' school of the Iranian National Committee for the Protection of Children has doubled its intake and has been transferred to a larger building. Three sets of UNICEF teaching and training aids for health visitors schools were delivered in 1959.

Allocation: \$4,189,400  
First: March 1954  
Latest: September 1959

Malaria Control and Eradication

A malaria control project, started by the Government in 1950, received United States bilateral aid in the following years and a small amount of aid from UNICEF. Approximately 3.9 million people in the more malarious rural areas were protected in 1955 and over 4 million in 1956.

In March 1956 the Executive Board approved funds to help the Government convert to a total eradication campaign as part of a regional plan involving several countries in the Eastern Mediterranean area. A five-year campaign began in 1957 with the aim of protecting all 12 million people living in malarious areas.

During 1958 a total of 5.9 million were protected. A shift from the use of DDT to the use of dieldrin in the southern part of the country adjacent to the Persian Gulf became necessary when it was determined that the vector A.stephensi had become resistant to DDT in this area. Approximately 18,300 villages were protected with DDT and 7,800 villages and 78,000 summer huts were sprayed with dieldrin.

Spraying protected 5.7 million persons in 1959, only a little short of the target. Although the surveillance work exceeded the target, the quality of the work of the surveillance agents has been questioned. Laboratory work was also deficient in quality, especially that of the microscopists. These defects are due in large part to the lack of financial autonomy of the malaria eradication agency so that it cannot give support to its field staff. There is a large turnover of staff with resulting loss of efficiency. Financial limitations have also been a factor restricting spraying coverage in areas which require it.

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IRAN (continued)BCG Anti-Tuberculosis Vaccination

Allocation: \$330,700  
 First: November 1950  
 Latest: September 1959

The UNICEF-assisted BCG vaccination campaign which began in May 1952 tested approximately 5,416,000 persons up to the end of 1959 and vaccinated approximately 3,200,000. Against a target of 2 million tests to be made in 1959, the teams completed 1.9 million tests and 1,000,000 vaccinations. Ten additional teams were organized early in 1959, bringing the total campaign force to 80 two-man teams.

On advice of the WHO Regional Assessment Team and of the National BCG Committee the campaign was revised in 1958 to concentrate on urban and industrial areas of high incidence and on the Kurdistan area of western Iran. It is anticipated that the service can be integrated into the country's public health services network by 1961. The overall goal of the campaign is to test 12 million and vaccinate an estimated 7 million.

UNICEF has provided transport, vaccine and equipment. WHO approval was given in 1958 to the BCG vaccine produced by the UNICEF equipped Pasteur Institute in Teheran and all requirements of BCG vaccine are now produced locally.

Bejel/Syphilis Control

Allocation: \$34,000  
 Approved: March 1956

This project was initiated with UNICEF assistance in 1956. Following organization and training of personnel in 1957 the campaign went into operation in April 1958 in the province of Khuzistan in the Southwest and in seven provincial Venereal Disease Treatment Centres established for the project. A total of 170,000 blood tests were analyzed in 1959 and approximately 15,000 persons received treatment. During 1959, due to financial problems, the mobile teams operated only eight months of the year. The teams continue to operate in areas of high endemicity, but failed by about 20 per cent to reach the targets of 50,000 to be tested serologically and 20,000 to be treated in 1959. Meanwhile, the Government has established venereal disease treatment centres in each province to which the work will eventually be turned over. In addition to routine work, the staff of these centres trace contacts, perform serological surveys in certain groups in larger cities and provide pre-natal and pre-marital tests which have now been made compulsory. The WHO advisory team, comprising a senior adviser, a serologist and a public health nurse have completed the organizational and training work and have now been withdrawn. The campaign is continuing under the direction and supervision of the Ministry of Health.

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IRAN (continued)Child Feeding

Allocation: \$26,300  
First: November 1951  
Latest: April 1957

In many parts of the country malnutrition among pre-school and school children is considered a major problem. To encourage the start of a milk distribution scheme to absorb the eventual output of the UNICEF-equipped milk plant at Teheran, UNICEF provided skim milk powder for school distribution in Teheran in 1955 and 1956. In 1957 the Government decided to establish school feeding as a separate and permanent service through which supplementary school meals would be fed to children in primary and elementary schools on a gradually increasing scale. The UNICEF Board approved funds to cover freight costs on milk to reach 150,000 children in 1957/58 and 200,000 in the following year through primary and elementary schools and for vitamin capsules to supplement a school lunch provided in a pilot project in the needy areas of Kerman and Zahedan and Zabul.

During 1958/1959 the school feeding project reached approximately 400,000 children in 3,300 schools for periods ranging from 29 days to 86, depending upon the length of school year and the fasting periods. The full-lunch pilot project benefitted 10,000 children in an especially needy area of the country. An FAO nutritionist assisted in the establishment of this project which is financed jointly by the Ministries of Health and Education.

As part of the Basic Health/MCH project (see above) milk and other diet supplements were distributed through 207 MCH centres reaching 32,000 mothers and children in 1959. Distribution of milk is also accomplished through the UNICEF-assisted dairy (see below).

Milk Conservation

Allocation: \$543,400  
First: November 1951  
Latest: March 1960

The dairy at Teheran, to which UNICEF gave its first assistance in Iran, began operations in November 1957. With a maximum daily capacity of 60,000 litres, it is now processing approximately 45 litres per day. Besides pasteurizing milk, the plant produces yogurt, butter and ice cream. About 22,000 children receive free milk daily from the plant.

An allocation approved in March 1960 will provide supplementary equipment to a milk plant to be established at Shiraz and also the services of a dairy engineer for one year to assist in the development of the dairy industry. UNICEF will provide about 50 per cent of the imported equipment for the plant, a local corporation

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IRAN - Milk Conservation (continued)

providing the balance. The plant will have the capacity to process upwards of 10,000 litres of milk daily, for distribution in the city of Shiraz and surrounding areas. The Government will guarantee free distribution of \$15,000 worth of milk annually to children and pregnant and nursing mothers for ten years; the Municipality will undertake to provide low-cost milk to low-income families to a value of \$15,000 annually for the same period. The plant will also serve as a training centre for Shiraz Agricultural College students, dairy workers and milk plant technicians. Plans are under way for a second training project to be established at Karaj Agricultural College, and equipment for a small dairy plant at this College may be requested from UNICEF at a later time.

IRAQ

Population: 7,030,000	Area: 444,442 sq.km.
Child population: 2,890,000	Population density: 16 per sq.km.
Primary school enrolment: 387,965	Population per physician: 5,900

Total UNICEF aid: \$1,765,400 including freight  
First allocation: 1950

Allocation: \$129,700  
First: March 1953  
Latest: September 1954

Basic Health/MCH

The Government's programme for basic maternal and child health services originally included the establishment of regional para-medical training centres at Baghdad, Basrah and Mosul. Training of health visitors and local midwives started at Baghdad in 1954. The Mosul training centre, serving the northern region, was opened in June 1956 under the supervision of a WHO public health nurse, but has since ceased operating for lack of applicants. The regional centre for the south, at Basrah, has been integrated into a public health programme with the help of United States bilateral aid; it was closed, however, in 1958.

UNICEF has provided clinical and teaching equipment for the three training centres, and drugs, diet supplements and soap for distribution to mothers and children through the main regional centres. For 150 smaller centres, UNICEF has agreed to provide basic equipment. Such centres are opened in towns and rural areas as personnel become available. Approximately 15,000 mothers and children receive milk and other diet supplements through 20 centres.

Progress has been slower than foreseen with respect to expansion of training and of health centres but there have been measurable accomplishments. The training and demonstration centre at Baghdad graduated twelve health visitors and midwives in 1958-1959. No candidates applied in 1959. To increase the appeal to potential

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IRAQ - Basic Health/MCH (continued)

trainees, the Ministry of Health has increased the salaries for graduate trainees from 18 dinars to about 28 dinars per month. Two graduate nurses were trained at the Baghdad centre during 1959 for assignment to provincial centres, as compared to 6 in 1958.

Allocation: \$611,200  
 First: April 1952  
 Latest: March 1960

Malaria Eradication

Iraq is one of the most malarious countries in the Eastern Mediterranean area. Malaria is responsible for more sickness and, directly or indirectly, for more deaths than any other single disease. From one to two million cases yearly, with 50,000 to 75,000 deaths attributed directly to malaria, was the estimate prior to the beginning of UNICEF aid. In some parts of the country 80 per cent of the infants were afflicted. In the cities the disease has been fairly successfully controlled by drainage and larvicidal measures, but about 3,000,000 people still live in areas with very high to moderate danger of malaria infection.

A malaria control project was started with UNICEF help in March 1954 in the rural areas of Sulaimaniyeh. In 1956 the national campaign protected 2,110,000. With additional aid voted by the UNICEF Board in October 1956, the Government converted the control project into a full eradication campaign to be co-ordinated with the regional malaria eradication plan covering seven countries. For 1957 and 1958 UNICEF provided ten per cent of the import requirements - insecticides, transport and sprayers - the Government providing the balance. For 1959 UNICEF aid was limited to ten replacement vehicles and 650 sets of spare tyres and tubes representing 18 per cent of total import requirements for the year.

For 1959 WHO provided a malariologist, an entomologist, a sanitarian, a laboratory technician and an administrative officer. Two additional malariologists and four fellowships will be provided under the Malaria Eradication Special Account in 1960. Evaluation by WHO experts continued throughout 1959. Residual spraying protected approximately 2.3 million persons in 1959. Surveillance was to have been extended to all sprayed areas and to one million persons no longer requiring protection by spraying, but financial and administrative difficulties delayed surveillance until late in 1959. The number protected by spraying in 1959 will again be protected in 1960.

Allocation: \$77,400  
UNICEF aid completed

BCG Anti-Tuberculosis Vaccination

UNICEF provided equipment and supplies for a mass BCG vaccination campaign which started in 1952 and ended in June 1955, testing 657,000 and vaccinating 234,000, chiefly in urban areas. The Government is continuing the campaign, and will merge the BCG vaccination work with a general tuberculosis control programme now being developed.

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IRAQ (continued)

Bejel/Syphilis Control

Allocation: \$112,400  
UNICEF aid completed

UNICEF provided penicillin, transport and laboratory equipment for this campaign which started in October 1950. By May 1954, when UNICEF assistance ended, approximately 110,000 persons had been treated. The Government has continued the project with its own resources.

Child Feeding

Allocation: \$155,400  
First: October 1952  
Latest: April 1957

UNICEF has provided milk and vitamin capsules to help expand a Government school feeding project which started in 1952/1953. That year the Ministry of Education provided a simple daily meal for 20,000 children. By 1956/1957, 212,000 primary school children benefitted, 75,000 receiving a full meal, the rest getting milk and vitamins only. UNICEF has been providing one third of the vitamin capsules, the Government furnishing the balance. By the end of 1958, 118,000 children were getting the full meal, 150,000 getting milk and vitamins only. In 1958/1959 approximately 100,000 received the full meal, and 200,000 received the milk and vitamin snack.

According to an FAO survey the expanded school feeding scheme has brought about significant improvements in school enrolment and attendance and in academic performance. FAO nutritionists have urged the Government to convert the entire project to a full-meal basis as soon as possible. In response to a Government request, UNICEF aid, which was to have ended in 1959, is being continued for another school year after which it is planned that the Government will be able to provide fresh milk to the project from the UNICEF-equipped dairy plant (see below) plus imported milk and vitamins. The Government is currently reviewing the possibility of obtaining imported skim milk by direct purchase.

Milk and vitamin allocations have also been made to Iraq for distribution through MCH centres to infants (see Basic Health/MCH above), reaching 15,000 children and mothers in 1959.

Milk Conservation

Allocation: \$266,100  
First: October 1952  
Latest: September 1959

Iraq has considerable possibilities for the development of increased milk production. UNICEF is providing equipment for a milk sterilizing plant at Abu Gharaib on the outskirts of Baghdad with a capacity to process 40,000 litres of milk daily. Free distribution of milk will be made to 26,400 beneficiaries when the plant is operating at peak capacity.

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IRAQ - Milk Conservation (continued)

Construction of the plant is practically complete and it is now expected that it will be in operation by September 1960. The overall plan is unique in that an area adjoining the plant has been established as a cattle compound with the necessary public facilities and housing for herd owners so that the buffaloes can be removed from the city.

Emergency Aid

Allocation: \$33,600  
UNICEF aid completed

In April 1954 UNICEF provided food, soap and insecticides to aid 40,000 children and mothers victims of a severe flood in areas north and east of Baghdad.

ISRAEL

Population: 2,160,000	Area: 20,700 sq.km.
Child population: 762,000	Population density: 104 per sq.km.
Primary school enrolment: 310,585	Population per physician: 450

Total UNICEF aid: \$1,615,400 including freight  
First allocation: 1948

Allocation: \$184,400  
First: November 1951  
Latest: March 1955

Basic Health/MCH

UNICEF first gave assistance to Israel's expanding programme for maternal and child welfare in 1951 by providing transport and equipment and supplies for existing MCH centres. In more recent years the Fund has provided soap, vitamin A and D capsules and other expendable supplies for distribution through 500 MCH centres. The network of centres has steadily expanded - from 200 in 1951 to 518 now in operation. During 1959 the national budget for this purpose was increased by 50 per cent.

During 1958/1959 the project plan was revised somewhat. Changes have been made in the type and locations of centres. UNICEF will provide equipment for two public health laboratories and vehicles for transport of supervisory personnel. Of the 17 rural health centres to receive UNICEF assistance under the most recent allocation, 7 were established in 1957 and 1958 and 10 in 1959, bringing the total of UNICEF-assisted centres to 41.

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ISRAEL (continued)Rehabilitation of Handicapped ChildrenAllocation: \$18,600  
UNICEF aid completed

During serious outbreaks of poliomyelitis over the past ten years, the highest incidence has been in the age group six months to three years with residual paralytic damage in 40 per cent of all cases and more than 10 per cent of the cases fatal. UNICEF airshipped iron lungs to Israel to combat polio epidemics in 1950 and again in 1951. In 1954 the Fund provided special equipment for the polio wing of a general rehabilitation centre at Sarafand General Hospital. An out-patient department follows up all cases dismissed from the hospital, training parents and the child patients in walking exercises and brace application and determining when orthopaedic surgery is required.

Care of handicapped children is now well developed in Israel and good facilities exist in hospitals, special centres and workshops. A school of physiotherapy was opened in 1953 and forty physiotherapists have been graduated to date; 30 students are enrolled in the course which commenced in October 1958. A hydrotherapy wing was opened at Sarafand in 1957. Two wards have been established of forty beds each for in-patients who receive individual physiotherapy, occupational therapy, group gymnasium, post-operational treatment, hydrotherapy and educational training. The wards are occupied to capacity at all times.

A prosthetics workshop for which UNICEF has provided tools and raw materials is located in Sarafand Hospital. **It manufactures** 350 braces annually, the Government paying 50 per cent of the cost of the braces for individual cases.

Premature CareAllocation: \$1,900  
Approved: March 1955

UNICEF has provided equipment for the establishment of three premature infant care units. A 20-bed unit, established at Tel Aviv in 1957, has a capacity of thirty beds. On completion of the maternity ward in the spring of 1959 at the new Poria Government Hospital, a premature care unit was established and put into operation there. With two of the three planned units now in operation, plans are being made for the establishment of the third unit at Haifa.

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ISRAEL (continued)BCG Anti-Tuberculosis Vaccination

Allocation: \$85,400

UNICEF aid completed

A UNICEF-aided BCG vaccination campaign carried out by the Government in 1949 and 1950 tested 365,000 young people and vaccinated 209,000. The Government has since continued BCG vaccination with its own resources.

Child Feeding

Allocation: \$89,200

UNICEF aid completed

From 1948 through early 1952, UNICEF provided milk and other foods for a project that reached 50,000 children and 4,000 infants.

Nutrition Education and Related Activities

Allocation: \$28,900

Approved: March 1959

Under this project, UNICEF undertook to provide stipends for a doctor and student workers to carry out a nutrition survey during the summer of 1959 to determine the food habits and nutritional deficiencies of immigrants residing in rural areas and nutritional problems among certain rural groups. The food consumption survey, which began in July 1959, was completed by the end of the year and the results are now being analyzed. Six hundred rural families were interviewed to determine their dietary practices and normal food consumption. In November 1959, the medical part of the survey was begun by two doctors and a nurse. The work on the medical survey, which is to cover four regions in the country (again 600 families), was completed in two regions by the end of 1959 and the work in the remaining two regions is still in operation. The mothers, children and pregnant women of the 600 families examined are undergoing clinical examinations and blood tests and the laboratory work is being done at the Medical School of the Hebrew University.

UNICEF also provided supplies and equipment to strengthen training work in the College of Nutrition and Home Economics, and to augment school gardening activities. Part of the equipment has arrived in the country, and all the stainless steel sheets have been received and will be used locally to manufacture kitchen equipment.

The three cars provided by UNICEF reached the country at the end of January 1960 and have been put to use in supervisory and training activities of the Nutrition Department of the Ministry of Education. Gardening equipment has also been received and is being put into immediate use for the extension of school gardening activities.

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ISRAEL (continued)

Milk Conservation

Allocation: \$738,000  
First: April 1952  
Latest: September 1959

Six dairies in this country have been aided by UNICEF in the provision of milk pasteurization, bottling, and sterilization equipment. The most recently aided was a dairy in Jerusalem.

By the end of 1959 the five operating plants had reached a monthly output of almost eight million litres. Bottled milk has found general acceptance in Israel; 92 per cent of all milk sold commercially in the country is in bottles.

The new plant at Haifa was officially opened in January 1960 in the presence of UNTAB and UNICEF representatives; it had been operating at full capacity for several months prior to the inauguration.

Beneficiaries of the milk processed in these dairies during 1959 include 120,000 children receiving daily school meals (increased to 130,000 in April 1960), 60,000 receiving skim milk with cocoa, and another 60,000 receiving pasteurized whole milk in one-fifth-litre bottles.

Emergency Aid

Allocation: \$326,800  
UNICEF aid completed

UNICEF provided relief supplies from 1948 to 1952 for needy immigrant children and mothers. At the peak of distribution in 1951 some 200,000 were receiving UNICEF milk rations. Leather was provided for shoes for 33,700 children. The Fund also gave medical supplies, primarily drugs, vaccines and insecticides to combat epidemics.

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JORDAN

Population: 1,640,000	Area: 96,610 sq.km.
Child population: 673,000	Population density: 17 per sq.km.
Primary school enrolment: 198,940	Population per physician: 6,800

Total UNICEF aid: \$2,361,700 including freight  
First allocation: 1952

Allocation: \$120,700  
First: October 1952  
Latest: September 1958

Basic Health/MCH

With assistance from UNICEF, WHO and United States bilateral aid the Government has established nurse training, midwifery-mothercraft training, provided a large central training and demonstration centre at Amman, and added eleven district MCH centres to the eleven previously in existence. Three of the 11 new centres were completed and equipped by the end of 1957 and eight centres were established during 1958. UNICEF has partially equipped a 64-bed maternity hospital, a midwifery-mothercraft training school and a maternal and child welfare demonstration and training centre in Amman. The Fund has also provided triple vaccine to enable the Government to introduce routine vaccination against diphtheria, whooping cough and tetanus through its maternal and child welfare centres. WHO advisers have assisted in the training and organization of services from 1954 through 1958.

At the MCH demonstration and training centre in Amman the well-baby clinic and the pre- and post-natal clinics are functioning at full capacity. The sick-baby clinic has now been removed to separate premises. The number of beds at the maternity hospital has been increased to 73 and deliveries now average 270 per month. UNICEF has provided the Amman hospital with simple equipment for the establishment of a twelve-cot nursery for premature infants.

During 1959 the training and demonstration centre rendered services to approximately 20,000 mothers and children, made home visits to 2,300, and participated in approximately 190 home deliveries.

Training of staff was the main focus of the project in the first years. Practising midwives are receiving practical training; nurses are trained in the modern methods of preventive medicine before being assigned to child welfare centres; and student nurses are trained in MCH work and for administrative duties.

Training at the midwifery-mothercraft school continues on schedule (including one month of training of qualified nurses from the United States ICA-supported nurses' training courses). In 1959 a total of 25 trainees completed the course which has now been extended to 24 months for trainees who have no background in nursing. For qualified nurses, the duration of the course has also been extended to 12 months.

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JORDAN - Basic Health/MCH (continued)

With additional funds approved in September 1958, UNICEF has helped in the establishment of a strong central MCH administration through provision of vehicles for the purpose of supervision, and has provided equipment for ten new rural MCH centres and a 40-bed paediatric hospital in Amman. During 1959 the UNICEF vehicles were used to set up a systematic country-wide inspection schedule to which four public health nurses trained by the United States International Co-operation Administration and two senior public health supervisors are assigned. Mobile health units were launched in August 1959 in the border areas of Jerusalem and Hebron, the Lutheran World Federation operating the units with UNICEF vans and equipment. Due to lack of funds the Federation has been unable to start the other two units for which funds were allocated. The paediatric hospital will afford opportunities for training of nurses and of midwives. Five of the ten proposed new MCH centres were opened in 1959 bringing the total of UNICEF-aided centres in Jordan to 34 including 22 district MCH centres, 4 centres run by voluntary societies, the 2 mobile health units and the demonstration and training centre in Amman.

Allocation:	\$83,500
First:	March 1956
Latest:	March 1960

Malaria Control and Eradication

Until 1954 the Yarmuk/Jordan Valleys were hyperendemic and constituted a permanent reservoir of malaria infection, complicated by the continuous movement of nomadic tribes throughout the area and the consequent spreading of the disease to all parts of the country. In certain villages almost all infants contracted malaria in the first year. In 1949, UNRWA undertook measures for control of the disease among refugees in the Jordan valley, UNICEF providing the insecticides. In 1954, UNRWA and the Government joined forces in a malaria control project in the Jordan Valley. In 1956, UNICEF aid was authorized for a country-wide eradication campaign to be assisted by WHO, the US/ICA and UNRWA, but administrative and other difficulties prevented full-scale operations until 1958 when the project was extended beyond the Yarmuk/Jordan Valleys. Responsibility for anti-malaria work in these valleys was handed over by UNRWA to the Jordanian Government in May 1959 and the country-wide campaign is now operated by a National Malaria Eradication Department with headquarters in Amman.

The population at risk, earlier estimated as 1,185,000, is now estimated as 790,000. In addition to larvicidal and residual spraying measures, surveillance and chemotherapy are major parts of the attack strategy. Epidemiologically, the country is divided into three main parts: West Jordan, now protected mainly by surveillance activities; the Jordan Valley, protected by a combination of attack measures; and East Jordan, including the most highly endemic area of the country, where the malaria transmission season runs from eight to twelve months and DDT residual spraying is carried out in two cycles.

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JORDAN - Malaria Control and Eradication (continued)

The campaign is co-ordinated with anti-malaria work in Syria through meetings with representatives of the Syria Malaria Eradication Department. On the Jordan/Israel border, co-ordinated operations are achieved with the assistance of the United Nations Truce Supervision Organization.

BCG Anti-Tuberculosis Vaccination

Allocation: \$61,000  
UNICEF aid completed

A mass vaccination campaign assisted by UNICEF was completed at the end of 1955, having tested 623,680 persons and given 317,758 vaccinations. There are now six permanent BCG centres administering tests and vaccinations systematically to pre-school and school children.

Tuberculosis Prevalence Survey

Allocation: \$28,200  
Approved: March 1959

In 1957 WHO provided the Government with an x-ray unit and related equipment and with expert advisers for the establishment of a tuberculosis diagnostic and training centre at Amman. A second centre, similarly equipped, was established in Jerusalem early in 1959. The Government has indicated a desire to establish a national tuberculosis control project which will emphasize ambulatory and home treatment in addition to the presently available hospital treatment facilities.

In March 1959, UNICEF allocated funds for a mobile x-ray unit and related equipment, field laboratory equipment and transport for a tuberculosis prevalence survey to determine the scope of the problem throughout the country. UNICEF equipment will be made available early in 1960. The survey during the first three months will be under the direct supervision of the WHO Regional Tuberculosis Survey Team for which the Board approved assistance in 1958. Later, Jordanian personnel trained by the Regional Team will carry on under expert WHO supervision. The survey will follow the WHO-approved survey procedures of chest photofluorography, tuberculin testing and sputum examination by direct microscopy. Results should be available late in 1960.

Child Feeding

Allocation: Cost-Free Milk  
Approved: October 1956

This project was initiated in 1954 as part of the emergency feeding scheme for the destitute border villages. It has expanded from the original 4,000 beneficiaries to reach 34,000 school children in 1959 plus 3,500 pre-school children who receive their rations through maternal and child health centres. The Government has provided sugar, equipment and utensils for the reconstitution and distribution of the milk and other services and facilities as required. The administration of the project is the joint responsibility of the Ministries of Education and of

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JORDAN - Child Feeding (continued)

Social Affairs. A number of non-governmental schools and institutions were added to the distribution plan in 1959. As the Government is unable to provide continued support, and as a result of limited supplies of dried skim milk, the project is being reduced gradually and will be discontinued at the end of 1959/1960 school year.

Allocation: \$1,691,300  
First: April 1952  
Latest: September 1959

Emergency Aid

The armistice which ended the fighting in Palestine in 1948 established borders which cut many villages off from their farmlands and markets, bringing poverty to a group of some 181,000 "economic refugees" in 111 villages of Jordan.

Early in 1952 the UNICEF Board voted a supply of milk for 35,000 children and mothers in these villages and subsequent allocations have extended the feeding to early 1961. More than 45,600 children and mothers received milk, rice, vegetable oil, sugar, dried fruits and soap from UNICEF in 1959. Voluntary agencies such as the Lutheran World Federation and the International Christian Council Committee assist in the implementation of the project, while UNRWA and the Government provide storage and supervise distribution. As indicated above (Basic Health/MCH) two mobile health units have been put into service in these border areas.

The Government, with assistance from various voluntary agencies and international and bilateral aid, has done some effective work toward rehabilitation of the area, but a survey is needed as the first step in co-ordination of existing projects and to stimulate new efforts. Plans were made in 1958 for a survey looking toward a positive rehabilitation plan for this area with special reference to the welfare of mothers, children and youth, but the survey has not been implemented for lack of expert services.

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LEBANON

Population: 1,650,000 (excluding registered Palestinians)	Area: 10,400 sq.km.
Child population: 668,000	Population density: 158 per sq.km.
Primary school enrolment: 228,500	Population per physician: 1,200

Total UNICEF aid: \$134,000 including freight  
First allocation: 1948

Basic Health/MCH

Allocation: \$20,700  
UNICEF aid completed

A demonstration and training centre in maternal and child health, including a pre-natal clinic and clinics for babies and young children, was established at Beirut in 1952 with assistance from UNICEF and WHO. A WHO team organized a one-week seminar in 1954 for 118 nurse-midwives to study and discuss problems in the field of maternal and child health. According to the initial plan, nurse-midwives attached to the Government's 18 district dispensaries were to be trained in the Beirut centre. Eleven of the nurse-midwives took the course and have been able to introduce basic health services into their district dispensaries, but due to organizational problems, the remaining nurse-midwives were unable to attend. The facilities of the Beirut demonstration and training centre have been put to good use by the National School of Nursing, the American University and the Red Cross Society which regularly send their student nurses to the centre for training. WHO has assisted the Government in developing the services of the district centres.

In 1958 UNICEF was requested by the Government to resume its aid to this project in conjunction with a national "rural health" programme then being elaborated with the assistance of WHO for the purpose of merging all rural health services into an integrated system and establishing polyvalent health centres in each of the country's 24 districts. Civil disturbances and the subsequent reorganization of Governmental departments have delayed the implementation of this plan.

Rehabilitation of Handicapped Children

Allocation: \$26,700  
UNICEF aid completed

UNICEF provided equipment for a new national rehabilitation centre at Hazmieh, near Beirut, which commenced operations early in 1956. The first of its kind in an Arab country, this centre serves as a model demonstration and training centre for the care of handicapped children in the other Eastern Mediterranean countries.

The project was implemented with the assistance of the Lebanese Union for Child Welfare, the American University of Beirut and the French Faculty of Medicine. WHO experts were assigned from 1954 through 1957 and the project has continued

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LEBANON - Rehabilitation of Handicapped Children (continued)

since then with the assistance of local and other international staff. Physiotherapy and hydrotherapy are provided. There is also a department for occupational therapy and a well equipped prosthetics workshop. A WHO prosthetics engineer helped in 1957 to develop the prosthetics workshop and an engineer permanently employed by the centre has now taken over the responsibility for training technicians. The centre provided services for approximately 100 cases during 1958.

Patients are admitted from outside Lebanon with the aim of eventually creating an international training project. Seven trainees enrolled in the eighteen-months physiotherapy course at the French University in Beirut were graduated in 1958.

Allocation: \$54,900  
 First: October 1952  
 Latest: September 1957

Malaria Control and Eradication

Malaria control measures were initiated in Lebanon late in 1951 when a WHO team was assigned to the work. The team remained in Lebanon until late 1953 helping to delimit the country's main endemic areas and introducing systematic control measures based on the residual spraying of DDT. UNICEF provided insecticides to the project during 1953 and 1954 and resumed its help in 1956 within the framework of a regional eradication effort in the Eastern Mediterranean. Recent data indicate a substantial lowering in the index of malaria endemicity in Lebanon.

WHO planned in 1957 to send a special team to Lebanon to help establish a solid surveillance system but this became impossible for a number of reasons, including the civil disturbances of 1958. WHO now plans to send such a team in 1960. The team, consisting of a malariologist, an entomologist, a sanitarian and a laboratory technician, will help to establish the surveillance system in Lebanon and to make an evaluation of malaria projects in neighbouring countries.

The population of malarious areas has been calculated roughly as 200,000. Despite internal disturbances in 1958, 112,000 persons were protected that year. The subsequent administrative reorganization somewhat retarded operations in 1959 when 148,000 persons were protected by the residual spraying. Of 25,155 blood slides which were collected by the project's four survey teams, only one was revealed as positive (P.vivax). The aim in 1960 is to protect 100,000 persons and it is expected that the surveillance system will be established this year so that a more precise evaluation of progress can be made and the need for future eradication measures determined.

Allocation: \$22,100  
UNICEF aid completed

BCG Anti-Tuberculosis Vaccination

UNICEF assisted the Government in a BCG vaccination campaign in 1949/1950. Almost 44,000 children were tested and 28,300 vaccinated.

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LIBYA

Population: 1,210,000	Area: 1,759,540 sq.km.
Child population: 511,000	Population density: 1 per sq.km.
Primary school enrolment: 96,763	Population per physician: 10,000

Total UNICEF aid: \$553,700 including freight  
 First allocation: 1952

Allocation: \$131,600  
 First: May 1951  
 Latest: September 1958

Basic Health/MCH

With UNICEF assistance since 1951 and with WHO and United States bilateral assistance, the Government is gradually building a system of preventive health services. The major elements of the project are the demonstration and training centres at Suk-El-Giuma (serving a large rural district in Tripolitania) and at Benghazi (serving the Province of Cyrenaica); the nursing school at Tripoli; and the school for health assistants and sanitarians at Benghazi. UNICEF has made allocations for equipment for the maternity and paediatrics wards of the Benghazi and Tripoli Hospitals; teaching equipment for the training aspects of the project, - vehicles for supervisory services and training, stipends for trainees and equipment, - drugs and diet supplements for 23 rural health centres.

The Suk-El-Giuma demonstration and training centre in Tripolitania, which was established in September 1954, graduated 10 community midwives in March 1956 and 10 in June 1959. The MCH demonstration and training centre at Benghazi which was established in 1957 turned out its first 11 graduates in June 1959. The two centres have, therefore, graduated 31 community midwives. Thirty trainees are now enrolled for a two-year course. Eleven WHO specialists were attached to the demonstration and training centres during 1959.

The first group of 12 assistant nursing students who commenced their training course in the UNICEF-assisted school of nursing at Tripoli in July 1957 graduated from the school in June 1959, and have been appointed to Government hospitals. The second group of 21 assistant nursing students commenced training in October 1959. One student attending the three-year course for professional nurses is now continuing her studies in the third (final) year.

Of the 27 trainees enrolled in the course for health assistants in the health assistants and sanitarians school at Benghazi, established in April 1957, 24 are continuing their studies in the third and final year. This school graduated 22 sanitarians in 1958 and 18 in 1959. The third enrolment of 19 students commenced training in November 1959.

Nine rural MCH centres were in operation in 1959. The Government has failed, however, to establish the twelve new centres which were scheduled to start operations in 1959.

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LIBYA (continued)

BCG Anti-Tuberculosis Vaccination

Allocation: \$86,900  
UNICEF aid completed

UNICEF assisted a mass BCG vaccination campaign in Libya from 1953 to 1955 and continued to provide vaccine to the end of March 1958. The Government is now continuing the project with its own resources. During the mass campaign 318,070 persons were tested and 132,800 were vaccinated. The Government has established a federal mobile team which conducted 17,970 tests on school children and vaccinated 6,174 children during the first nine months of 1958.

Permanent vaccination centres have now been established at Tripoli and Benghazi and a third centre is to be opened at the hospital in Derna incorporating BCG vaccination into the country's expanding preventive child health services.

Child Feeding

Allocation: \$168,500  
First: September 1954  
Latest: March 1959

Malnutrition and under-nutrition are common among children in Libya where the average daily consumption for all age groups is considerably below minimum requirements. The intake of animal protein is negligible among all except the Bedouins who have butter, milk and cheese from their own herds. Meat is seldom eaten, eggs only occasionally.

An FAO nutritionist surveyed the country in 1958 to determine nutritional requirements and to assist in establishing nutritional education courses in the schools and generally. An experimental school gardening project is underway in 15 schools in three provinces. FAO has assigned a food technologist to Libya to study local food development possibilities.

The Government gives high priority to the feeding project for schools attended by needy children which started as a pilot project in ten schools in May 1955. UNICEF has provided skim milk powder and vitamin capsules, utensils for reconstitution and distribution of the milk, vehicles to aid in distribution, and soap. The Government provides dates, sugar and bread, while CARE organization provides cheese and flour. Approximately 83,000 children benefitted in 1958 and 90,000 were included in 1959.

An FAO advisor assigned to the project from June to September 1959 to develop nutrition education aspects of the project, held two training courses for teachers, one at Benghazi attended by 23 teachers and another at Tripoli attended by 30 school teachers and 9 headmasters of schools. Lectures on nutrition education were also given to 200 teachers in the Province of Benghazi and to 260 teachers in the Province of Tripolitania during the annual summer refresher courses for school teachers. The FAO advisor also submitted a report containing recommendations for the future development of nutrition education through schools.

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SOMALILAND UNDER ITALIAN ADMINISTRATION

Population: 1,330,000	Area: 461,541 sq.km.
Child population: 543,000	Population density: 3 per sq.km.
Primary school enrolment: 14,367	Population per physician: 20,000

Total UNICEF aid: \$708,300 including freight  
First allocation: 1955

Allocation: \$31,000  
Approved: March 1958

Basic Health/MCH

UNICEF is assisting in a seven-year plan to reorganize health services in the 138 urban and rural health centres with emphasis on preventive health measures. Major attention is given to expansion of training for auxiliary health officers, community nurses, sanitarians and midwives. Six regional public health departments are being established to direct all health work. UNICEF provided teaching aids, - demonstration equipment and paediatric ward equipment for a training hospital in Mogadiscio, as well as equipment for a rural hospital at Belet Uen, - equipment and drugs and diet supplements for an urban and rural health centre, and for three village health centres, three station wagons for supervision and transport of trainees. Due to administrative problems related to the change-over in administration of the territory, the project has been retarded. Difficulties have been overcome, however, thanks largely to the devoted efforts of the WHO senior adviser, and budgetary provision for establishment of a training centre has been obtained from the Italian Economic Development Assistance to Somalia. A new training school was constructed and completed during 1959 in Mogadiscio and teaching and demonstration equipment from UNICEF installed. The urban health centre in Mogadiscio which is to provide practice training facilities, has been rebuilt and adequately staffed. Recruitment of trainees started under promising conditions with more than 200 applicants. When the training centre was officially inaugurated by the Prime Minister of the Somali Government in October 1959, 15 health officers, 15 community nurses, 15 midwives and 15 sanitarians began their training, with stipends from UNICEF.

Allocation: \$209,300  
First: March 1955  
Latest: March 1960

Malaria Control (Pilot Project)

This area shares many of the special problems of malaria control in Africa generally, but some features of arid Somaliland place it in a category in which eradication has appeared feasible. The first spraying was started in February 1956 and protected 25,000 people in a pilot zone on the lower ranges of the river Webi Scebelli, using DDT, BHC and dieldrin. The campaign was expanded and spraying protected 120,000 people in 1957 and 206,000 in 1958. UNICEF provided vehicles, sprayers, insecticides, anti-malaria drugs and supplementary laboratory equipment.

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SOMALILAND UNDER ITALIAN ADMINISTRATION - Malaria Control (Pilot Project) (cont'd)

Serious technical and administrative problems beset the project in 1959. A combination of UNICEF-provided DDT and Government-provided BHC was used for the second spraying in 1959 which protected roughly 237,000 persons. A technical review by a WHO consultant has revealed that malarionetric data collected so far are insufficient for an evaluation of the results of anti-malaria measures carried out since 1956. The review also outlined the problems for achieving eradication under local conditions, in particular the problems arising from the high degree of nomadism. On the basis of these findings the pre-eradication survey which was earlier planned to start in 1960 has been postponed.

Under an allocation approved in March 1960, UNICEF will provide insecticides, microscopes, sprayers and transport for 1960. Spraying operations in 1960 will maintain the same level of coverage as in 1959, to give direct protection to the 237,000 settled inhabitants of the malarious areas. As recommended by WHO, operations will be decentralized, with five centres directing spraying operations, epidemiological and entomological surveys and surveillance operations, including intensified and continuous malarionetric surveys, notification of all fever cases and distribution of drugs to fever cases. WHO will provide a full-time malarionologist during 1960.

Tuberculosis Control (Pilot Project)

Allocation: \$67,000

Approved: September 1958

For a two-year pilot project originally intended to be carried out in 1959 and 1960, UNICEF has provided equipment for mass radiography and a laboratory, supplies for tuberculin testing and BCG vaccination, isoniazid, record cards, public address units and transport. The project includes BCG vaccination, case-finding, home treatment by chemotherapy, and the training of Somali personnel in the techniques of tuberculosis control.

With WHO assistance and equipment from UNICEF, the Government is establishing a tuberculosis centre in Mogadiscio for the urban and surrounding area. Preparations are being made for the early initiation of the project: reconstruction of a building to house the centre is underway; UNICEF supplies have been ordered; and WHO is recruiting the necessary international personnel.

A mobile team will survey selected rural areas to determine the most successful method of home and ambulatory treatment and the best way to reach static or nomadic groups for preventive measures. Somali health personnel, trained in the UNICEF/WHO-assisted MCH project, will be employed on the project, and the Government is establishing a training project for technicians.

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SOMALILAND UNDER ITALIAN ADMINISTRATION - Tuberculosis Control (Pilot Project)  
(continued)

Although reconstruction of the centre has been considerably delayed, it is anticipated that approximately 300,000 persons will be tuberculin tested in 1960 and 1961; 150,000 examined by mass radiography; and an estimated 75,000 negative reactors vaccinated with BCG. Treatment with isoniazid will be administered to 3,000 to 5,000 new cases, careful follow-up being made to ensure that treatment is continued.

Child Feeding

Allocation: \$10,200  
Approved: September 1957

UNICEF assistance was originally approved against a background of the severe famines which often afflict Somalia. This project was started with the long-term objective of developing a supplementary child feeding scheme including the use of powdered skim milk, dairying, school gardening and nutrition education. By the end of 1958, however, it was accepted that the project must be implemented as a simple milk distribution project for the time being. The planned distribution was accomplished in 1959, benefitting 5,000 pre-school children and mothers and 15,000 school children. Efforts were made during 1959 to review with the Government the long-term objectives and to resume plans for nutrition education and utilization of local food production. In view of limited supplies of dried milk, a revision of the milk distribution scheme is under review to give priority to young children and pregnant and nursing mothers to be reached through the network of health centres.

Emergency Feeding

Allocation: \$278,000  
Approved: April 1959

The possibility of famine in the Northern part of the Territory was brought to UNICEF's attention by an FAO nutrition officer visiting Somaliland in February 1959. The Territory suffers generally from food shortages and due to low rainfall the shortages became acute in the North where 600,000 people were threatened with famine. By a mail poll vote the UNICEF Board voted to provide 1,500 tons of rice, 500 tons of pulses and 600 tons of dried skim milk to help feed 250,000 mothers and children for a two-months period.

The first UNICEF shipment, consisting of 1,000 tons of rice, arrived in the country by end-June. Following shipments brought 350 tons of beans and 600 tons of dried skim milk. By this time the delayed rains began, in most parts of the country in abundance, resulting in grazing facilities and an almost immediate relief to the nomads who live from their cattle. Food shortages continued however and became steadily more serious for the semi-nomads who base their existence on land cultivation and for the static population.

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SOMALILAND UNDER ITALIAN ADMINISTRATION - Emergency Feeding (continued)

The emergency distributions have been under good administrative control and fairly well reported, the Prime Minister taking a hand personally in the planning of the distribution and insisting on receiving daily reports during the first hardship period.

SUDAN

Population: 10,950,000	Area: 2,505,823 sq.km.
Child population: 4,465,000	Population density: 4 per sq.km.
Primary school enrolment: 265,462	Population per physician: not available

Total UNICEF aid: \$285,500 including freight  
First allocation: 1952

Allocation: \$56,300  
First: September 1955  
Latest: September 1958

Basic Health/MCH

UNICEF first gave aid to this project in 1952 and has assisted continuously since then in the development of training institutions, demonstration and training centres and MCH centres. By 1959, 34 MCH centres were in operation and skim milk, whole milk and vitamin capsules distributed through them to 1,560 mothers and children. UNICEF has also provided equipment to 10 training institutions. WHO has helped to establish the Nursing College at Khartoum to prepare carefully selected young women to assume leadership in preventive and curative nursing services, including maternity and paediatric as well as medical and surgical nursing. A total of 150 trainees (nurses, midwives, medical assistants and health inspectors) were graduated in 1959 and all have been employed in Government institutions. The numbers graduated in 1959 from each of the schools and those still in training at the end of the year are shown below:

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SUDAN - Basic Health/MCH (continued)

<u>School</u>	<u>Type of Training</u>	<u>Length of Training</u>	<u>Number Graduated 1959</u>	<u>Number in Training end-1959</u>
Khartoum Nursing College	Professional Nursing	3 yr.	6	11
Kassala Nursing School	Professional Nursing	3 yr.	13	75
Atbara Nursing School	Professional Nursing	3 yr.	7	45
El Obeid Nursing School	Professional Nursing	3 yr.	12	107
Wad Medani Nursing School	Professional Nursing	3 yr.	27	47
Omdurman Nursing School	Professional Nursing	3 yr.	30	75
Wad Medani Midwifery Training School	Community Midwives	9 mth.	12	12
Omdurman Medical Assistants School	Medical Assistants	2 yr.	33	49
Khartoum School of Hygiene	Health Inspectors	3 yr.	10	15
Omdurman Health Visitors' School	Health Visitors	18 mth.	<u>Nil</u>	<u>8</u>
Total			150	444

Four new and one previously assisted training centre received teaching equipment and two vehicles during 1959 for field training of students.

Allocation: \$160,700  
 First: September 1955  
 Latest: September 1959

Malaria Eradication (Pilot Project)

Malaria is a major cause of sickness in the Sudan, particularly along the Nile and in the Gezira district. The disease results in many still births and infant deaths, also in substantial agricultural losses in the Gezira, an area of intensive cotton growing. An estimated 3,000,000 people were protected in 1953 and 1954 through residual spraying and larval control measures.

UNICEF first provided insecticides, sprayers, laboratory equipment and transport for a pilot project to extend malaria control around the Gezira irrigated area of the Blue Nile Province. Spraying started in April 1956 and protected 200,000 people, in addition to the 500,000 already covered by the Government's control efforts that year. Approximately 225,000 were protected in 620 villages

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SUDAN - Malaria Eradication (Pilot Project) (continued)

during the following year. On WHO advice the project was converted in 1957 to a pilot eradication project and WHO personnel have helped to train public health officers, sanitarians and laboratory technicians for the campaign. A Sudanese malariologist has studied abroad on a WHO fellowship.

About 450,000 persons were protected by spraying in 1958 and about 517,900 in 1959. The target for 1959 had been to protect 538,000 and this objective will be retained in 1960.

Nomads constitute from 15 to 20 per cent of the total population in the project area. Their migratory habits create difficulties in locating and spraying their tents and administering anti-malaria drugs at regular intervals during the transmission season. Great efforts have been made to overcome these difficulties and the results achieved in 1959 were much more satisfactory than in preceding years. Comparative studies have been made of the lasting effectiveness of DDT and dieldrin as insecticidal agents; the results of the studies are awaited. Meanwhile pre-eradication survey is scheduled for 1960.

Allocation: \$41,700  
First: October 1952  
Latest: September 1954

BCG Anti-Tuberculosis Vaccination

This project began with the aim of testing 2 million persons and vaccinating an estimated 700,000. Experience in the first phases has necessitated a change of plan, however, and the overall target has been reduced to 530,000 tests and 160,000 vaccinations.

During a pilot phase of the campaign which ended in mid-1955, 65,000 were tested and 26,600 vaccinated. The mass campaign began in the last quarter of 1956 with the help of a WHO team. Meanwhile a Government medical officer completed a tour of study abroad on a WHO fellowship and was assigned as project leader.

In 1959, in the three southern provinces of Equatoria, Bahr El Ghazal and the Upper Nile, 217,000 persons were tested and 84,000 vaccinated against the year's targets of 200,000 tests and 66,000 vaccinations. By the end of 1959, 563,000 tests and 203,000 vaccinations had been accomplished in all. It is expected that the mass campaign will be completed in the three southern provinces by the end of May 1960.

Child Feeding

See "Basic Health/MCH" above.

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TURKEY

Population: 27,570,000	Area: 780,576 sq.km.
Child population: 11,330,000	Population density: 35 per sq.km.
Primary school enrolment: 2,131,148	Population per physician: 3,400

Total UNICEF aid: \$6,122,400 including freight  
First allocation: 1951

Allocation: \$340,700  
First: March 1953  
Latest: March 1957

Basic Health/MCH

The first phase of this project (1953-1956) had the objective of expanding maternal and child health services in rural areas. UNICEF gave teaching aids and midwifery kits for ten training schools; equipment for 90 health centres; drugs and diet supplements for 154 centres; and vehicles. Training at the ten schools for nurses and midwives was improved and reoriented toward public health nursing. At two of the training schools 18-months' courses are given for untrained birth attendants.

To increase the numbers and quality of supervisory personnel, the Government has reopened the School of Public Hygiene at Ankara for the training of public health officers and courses for supervisory rural health personnel were initiated both at Ankara and at the model maternal and child health training centre at Etimesgut. With the help of the Rockefeller Foundation a Child Health Institute has been established at the University of Ankara, as a training ground for para-medical and medical staff.

In 1957 the Government embarked on a twenty-year development plan under which 10,000 rural auxiliary nurse-midwives will be trained to work in rural villages under professional nurse-supervisors. Particular attention will be given to the development of rural health education. Under an allocation approved in 1957, UNICEF is providing training equipment for 16 schools; supplies, equipment and transport for 60 district health centres; milk and vitamin capsules for distribution through 200 health centres; and equipment, including 507 midwifery kits, for 125 village health stations.

Due to restrictions in budget and in the availability of trained personnel the opening of new district health centres was delayed and UNICEF deliveries of supplies and equipment had to be held up.

In 1959, 16 urban MCH centres, 8 district public health centres and 34 village sanitary stations were opened. The village stations are staffed with one auxiliary nurse-midwife each. UNICEF standard equipment and 189 midwifery kits were issued.

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TURKEY - Basic Health/MCH (continued)

The School of Public Health graduated its first group of 14 public health officers in June 1959. Twelve of these re-entered the school and 12 new students were enrolled. The Post Basic Nursing course graduated 12 students in August 1959 and 9 students entered the course in October 1959. The 4 schools for basic nurse-midwife training graduated 133 students in June 1959 of whom 13 were assigned to MCH activities; 147 entered these schools in October 1959. Six Schools for Auxiliary Nurse-midwives are in operation with 30 students each. Dried milk and vitamin capsules are distributed through 180 outlets to an average of 17,500 beneficiaries.

Social Services for Children

Allocation: \$22,600  
 Approved: March 1960

The objective of the project is to improve the quality, standards and effectiveness of existing programmes for the care of children as part of a larger national programme for the development of social services. A law for the protection of children was passed in 1957 and a Social Welfare Institute was created in 1959 which shows an increased interest in social services.

The key element in the plan is the systematic training of Government and private agency child care workers - administrators, supervisors and various types of workers with children's groups. With UNICEF aid a one-month refresher course will be held in 1960 for experienced staff from day nurseries, residential children's institutions, health centres, and children's clubs and camps. In-service training will also be provided for recently recruited staff of these agencies.

UNICEF will provide special teaching aids and will help cover translation costs for training material. The Fund will share with the Government on an equal basis the cost of local stipends and travel expenses for 240 students expected to attend the courses in 1960, and honoraria and travel costs for 5 teachers. Subject to the availability of funds, the United Nations Bureau of Social Affairs will provide 6 fellowships in 1960 and the services of 3 experts in this field.

Malaria Eradication

Allocation: \$3,838,600  
 First: October 1956  
 Latest: March 1960

The eradication campaign in Turkey is part of a regional eradication plan covering seven countries in the Eastern Mediterranean area. Prior to UNICEF participation the Government had an extensive control operation in which 7.2 million people were directly protected in 1956. The population requiring direct protection is between 8.7 million and 9.5 million; in addition 4 to 5 million inhabitants of towns will receive indirect protection.

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TURKEY - Malaria Eradication (continued)

UNICEF has supplied insecticides, vehicles, sprayers, microscopes and drugs for the first three years of the eradication programme. In 1957, 8,774,000 persons were protected. In 1958 7,409,000 persons were directly protected in 12,673 villages. Approximately 7,900,000 were protected in 1959. A further allocation approved in March 1960 is for insecticides, drugs, sprayers, transport and other campaign equipment to help continue operations through 1961. Over 7.5 million persons would be protected in 1960 and 6.6 million in 1961.

On the litoral of the Black Sea and a large part of the Anatolian Plain the malariometrical indices were sufficiently reduced by 1957 to make it unnecessary to spray these areas in 1958 with the exception of a few residual foci. On the other hand, in the South-east, the custom of spending part of the year in tents or temporary houses required an increase in the spraying coverage over what had been foreseen. Contrary to the original assumption that spraying would not be required above 1,200 metres, it was found necessary to spray old dwellings up to an altitude of 1,600 metres. Both of these factors resulted in increased requirements of DDT. In an area in the South with a population of 600,000, vector resistance to DDT was discovered, and it was necessary to provide dieldrin for a re-spraying in this area in 1958.

At the end of 1958, following the near breakdown of the campaign, a major re-organization was agreed upon. The main features of the re-organization are: strengthening of staff for the Malaria Directorate; co-ordination of the spraying and surveillance services; redistribution of the administration areas; extensive retraining of the personnel; and the opening of a laboratory for each region and zone. The administrative re-organization was well under way in the second semester of 1959. The WHO team arrived in August-September 1959 and undertook a thorough review of the re-organization which is not yet completed.

Allocation: \$281,200  
First: March 1951  
Latest: September 1959

BCG Anti-Tuberculosis Vaccination

Tuberculosis is an outstanding public health problem in Turkey, causing at least 40,000 death each year. This BCG vaccination campaign is part of an overall programme for prevention and treatment which includes the building and expansion of sanatoria and dispensaries. Turkey was one of the first countries to use BCG, but, prior to UNICEF and WHO aid, its use had been limited to the Istanbul district. UNICEF provided the essential imported equipment to help produce vaccine at the Central Institute of Hygiene at Ankara, where other vaccines and sera are also produced for public health services.

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TURKEY - BCG Anti-Tuberculosis Vaccination (continued)

UNICEF continues to provide campaign supplies, vaccine production equipment and transport for a BCG mass vaccination campaign which started in 1953 in the West and proceeded eastward. The first round of the campaign was completed by May 1959. The second round started in Spring 1959 on a regionalized basis and paved the way for a third stage in which BCG vaccination will become a routine activity of the public health organization. By the end of 1959 19.4 million tests (including 10.3 million tests of children) and 7.4 million vaccinations (of which 6.3 million were children) had been accomplished. The target for 1960-1961 is set at 9.6 million to be tested and 2.6 million to be vaccinated.

Tuberculosis Survey

Allocation: \$34,500  
Approved: March 1960

The Fund has provided x-ray equipment, vehicles, field laboratory equipment, tuberculosis testing equipment and supplies for a survey team to examine approximately 50,000 persons. A national survey team, aided by a WHO advisory team, will make detailed tuberculosis surveys among selected population groups. The team will examine a stratified random sample of population in each area by x-ray photography, and, in case of abnormal shadows, by sputum examination as well. Children under seven years of age will be tuberculin tested with the technique used in the BCG campaign. The survey will provide the factual basis for planning a national pilot area project to train staff and to develop experience in the organization and administration of control methods recommended by WHO. WHO has provided fellowships for members of the proposed national survey team to be trained in the WHO Tuberculosis Research Office in Copenhagen for four months in 1959.

Allocation: \$87,700  
First: September 1956  
Latest: September 1959

Trachoma Control (Pilot Project)

Trachoma affects some two million people in the South-eastern part of Turkey, an extension of the widespread public health problem around the Mediterranean basin. UNICEF in 1956 provided antibiotic ointments, diagnostic equipment and transport. The operation began in the Provinces of Gaziantep and Adana early in 1958, following a period of preparation under direction of a WHO ophthalmologist. The original plan foresaw school treatment of 3,650 children and home treatment of some 1,150 families. In September 1958 the Board approved an allocation for ointment and laboratory equipment for the second year of the pilot project extending coverage to 6,000 additional school children in 27 schools in Malatya and Hatay Provinces. By the end of 1958, 94,900 persons had been examined and 6,300 persons treated. In 1959, the provinces of Malatya and Hatay were added to the pilot area and 78,000 school children were examined and 6,500 treated. Targets for 1960 are 180,000 children to be examined and 77,000 to be treated.

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TURKEY - Trachoma Control (Pilot Project) (continued)

The pilot project, in addition to surveying the epidemiology of trachoma and identifying the main sources of infection, will help to determine the best treatment and control methods to be applied to the entire endemic area.

Experience gained during the first two years of the pilot project confirmed that the intermittent treatment can now be utilized on a large scale. "Total treatment" will be applied for the first time in 1960 in the villages where the prevalence of active trachoma is over 60 per cent.

A one-month training course for auxiliaries was held in the anti-trachoma dispensaries of the four provinces in 1958 and a one-week seminar on public health concepts in relation to the control of communicable eye disease was held at the Trachoma Institute at Gaziantep for physicians engaged in the campaign.

<u>Child Feeding</u>	(See also Nutrition Education and Emergency Feeding below)	Allocation: \$250,600 First: March 1956 Latest: <u>March 1959</u>
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Intestinal diseases and malnutrition are common among needy children in Turkey whose daily diet is limited to bread, rice and a few vegetables. Poverty and ignorance of the proper use of local foods contribute to the dietary deficiencies.

In 1956 the Government launched a school feeding programme with UNICEF assistance through schools in the poorest and most crowded districts of the towns. The project is directed by the Minister of Education. In the first year milk and vitamin capsules provided by UNICEF were distributed to 108,300 children in four provinces. In the school year 1957/1958 milk and vitamin capsules were distributed to 147,500 children in 12 provinces. Distribution of milk and vitamins was increased to reach 250,000 children in 13 provinces in 1958/59. Dried milk allocated in March 1959 for continuation of this project reached 307,000 children in 21 provinces in 1959/60.

About 7,000 children received a school lunch provided by the Government or under private arrangements in the school year 1957/58 and in 1958/59 the number was increased to 10,000. It is hoped that this scheme will be expanded in the current school year to benefit 50,000 children. Private contribution is also increasing.

The Fund has also provided milk preparation equipment for the kitchens of 300 schools, soap and four vehicles for the use of the regional inspectors. The Government intends gradually to take over the provision of soap.

Under an earlier allocation UNICEF provided milk powder for a small feeding programme to help the Government establish a pattern of milk distribution for the time when the UNICEF-equipped dairy will be in operation. One thousand children received milk rations under this project in 1955.

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TURKEY (continued)Nutrition Education and Related Activities

Allocation: \$43,000

Approved: March 1959

To augment the nutrition education aspects of the child feeding project, the Board in March 1959 approved an allocation for a two-year period to provide stipends for 21 nutrition educators to be trained in summer seminars, vehicles for supervision of the project, film projectors, poultry-keeping and garden-irrigation supplies for nutrition education work in the schools. Soap provided by UNICEF will be used for simple health and nutrition education.

Under this project nutrition educators are being trained, one for each 10,000 to 20,000 children, who will teach primary school teachers the essentials of nutrition. The primary school teachers will in turn teach basic nutrition to school children and to adults in evening courses.

Twenty educators attended a UNICEF-assisted seminar in 1959 and 21 additional educators will benefit from a three-week seminar before being assigned to new provinces being incorporated into the project. Future courses are foreseen in 1960.

Practical training in growing nutritionally useful foods is to be given in six pilot schools near Ankara where gardens, orchards and poultry raising units are to be launched. Preliminary discussions have taken place with FAO concerning a wider development of this scheme into an "expanded nutrition" project.

Milk Conservation

Allocation: \$255,000

First: October 1952

Latest: September 1954

Pasteurizing and bottling equipment has been provided by UNICEF for a dairy of 30,000 litres-per-day capacity located at the Ataturk State Farm near Ankara. This began operations in May 1957.

The Fund has also provided equipment for three milk collecting centres to supply the plant with cooled milk. Equipment for yogurt making is now being provided for installation in an extension to the plant - an arrangement requested by the Government and agreed to by UNICEF.

Ten per cent of the milk processed by the dairy is being distributed free to children and mothers through two MCH centres, a creche, two tuberculosis dispensaries, and the Child Health Institute Hospital. This dairy serves as a demonstration centre for processing methods and for training of personnel in the development of milk handling and distribution in other parts of the country.

Emergency Feeding

Allocation: \$44,200

UNICEF aid completed

In 1951/52 UNICEF provided emergency milk rations for 23,000 mothers and children of Turkish origin who migrated to Turkey as refugees from Bulgaria.

UNITED ARAB REPUBLIC (EGYPT)

Population: 26,030,000	Area: 1,000,000 sq.km.
Child population: 10,983,000	Population density: 26 per sq.km.
Primary school enrolment: 2,086,704	Population per physician: 3,500

Total UNICEF aid: \$1,993,600 including freight  
 First allocation: 1948

Allocation: \$364,800  
 First: March 1953  
 Latest: September 1958

Basic Health/MCH

UNICEF has provided equipment for 621 health centres, and drugs, dried milk and soap for distribution through more than 1,400 centres. There are now 902 health centres in operation throughout the country. Of the 902 health centres 190 rural and 85 urban centres are under the supervision of the Ministry of Health; 320 are operated by the Ministry of Social Affairs; 80 MCH centres are operated by voluntary agencies; 19 health centres are associated with the Qalyub Health Demonstration and Training Area; and there are 200 collective rural centres. Of the 50 health centres scheduled for 1959 only 8 have been staffed and are in operation, but the Government is actively recruiting staff for the remaining 42.

Training of the various categories of auxiliary medical personnel is progressing well. New training schools for nurses and midwives have been opened with UNICEF providing equipment. Twenty-two schools for assistant midwives have 750 trainees enrolled currently in eighteen-months courses. Twelve months are devoted to theory and six months to practice training. Most of the 700 students who graduated in 1958 have been posted to work in the collective rural centres to take over gradually the work of the traditional midwives. The four schools for assistant nurses graduated 400 students in 1958 and 180 qualified nurses were graduated from the ten nursing schools. WHO contributes the services of a nursing adviser to help upgrade nurses' training and to promote the integration of nursing services into rural health services.

Under an allocation approved in September 1958, UNICEF provided training and laboratory equipment for the High Institute of Public Health in Alexandria, for the training wards of the Alexandria University Children's Hospital and for the Chatby Maternity Hospital in Alexandria; also a vehicle for transport of trainees and equipment, drugs, dried milk, vitamins and soap for an urban health centre in Alexandria. UNICEF's help to the Institute will facilitate further development of training courses in maternal and child health and related demonstration training. Trainees are selected chiefly from among Government employees and are guaranteed

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UNITED ARAB REPUBLIC (EGYPT) - Basic Health/MCH (continued)

full salary for two years of training. After two quarters of basic public health studies, the students elect specialization. Of the 9 trainees specializing in maternal and child health, 6 graduated during 1959 and the remaining 3 continued their second year of training which began at the end of 1959.

Premature Care

Allocation: \$13,000

Approved: Mid-1957

UNICEF has provided equipment for a premature baby care centre at the Kasrel-Aini Hospital. Although the building for the centre has been completed, interior fittings are unfinished. The Government hopes that the unit will be ready for operation in 1960. The Home Care Unit at the Giza MCH centre, whose work will be related to that of the hospital centre, commenced operation in April 1959 with accommodation for ten children and their mothers. By October 1959 it had handled 31 cases, of which only one baby died.

Social Services for Children

Allocation: \$20,000

Approved: March 1960

This is the first of such projects to be established in the Eastern Mediterranean area following the Board's general policy approval for such projects given at the March 1959 session. The objectives of the project are to strengthen social services for children including the training of family and child welfare workers. A secondary objective is to attempt to provide better and more efficient services by strengthening co-ordination among the large number of governmental and non-governmental agencies now providing such services. A national survey will be made to determine the social needs of families and children and to determine whether existing services meet the needs. The project will be administered by the Ministry of Social Affairs and Labour. Over a two-year period, training will be provided for 900 professional, auxiliary and voluntary workers of family and child welfare agencies, day-care centres, and children's institutions. UNICEF will provide: training and demonstration materials for four training centres; equipment for the production of teaching materials, and (for twelve agencies to be used for field work practice) child care demonstration materials and prototype playground equipment, games, and tools; and four motor vehicles for use in training and supervision. The United Nations Bureau of Social Affairs will provide a family and child welfare adviser for the period of one year and three fellowships for the training of supervisory staff related to the project.

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UNITED ARAB REPUBLIC (EGYPT) (continued)Malaria Control and DDT Production

Allocation: \$409,100  
 First: November 1951  
 Latest: September 1957

The UNICEF-equipped DDT production plant at Kafr-el-Zayat in the Nile Delta was officially inaugurated in July 1957. In 1958 production of technical DDT reached 420 tons, approximately 60 per cent of plant capacity. In 1959, the plant produced approximately 327 tons of technical DDT, 237 tons of 50 per cent formulated DDT and 551 tons of 10 per cent formulated DDT. To date, it has not been possible to produce at the full capacity of 700 tons of technical DDT per year because of financial and administrative problems. As one step toward improvement of operational capacity, the Government recently transferred management of the plant from the Ministry of Health to the Economic Development Organization.

A UNFA production engineer has served the plant in advisory capacity throughout the period of its development. DDT produced in the plant will be provided at cost for public health services. The bulk of DDT produced is earmarked for use in a malaria eradication campaign which may be started as early as April 1961. Meanwhile WHO and the Government are conducting a pre-eradication survey during 1960.

BCG Anti-Tuberculosis Vaccination

Allocation: \$293,200  
UNICEF aid completed

A BCG vaccination campaign tested nearly 4,400,000 persons from 1949 to the end of 1952 and vaccinated over 1,300,000. UNICEF provided vaccines, vehicles and equipment for the campaign, and helped to establish a BCG vaccine production laboratory at Cairo which now provides all local requirements of BCG vaccine and also sells the vaccine internationally. Since 1953, the Government has continued the campaign with its own resources. By the end of August 1959 a total of 9,333,000 persons had been tested and 2,543,000 persons vaccinated.

Tuberculosis Control (Pilot Project)

Allocation: \$31,800  
Approved: September 1958

This three-year pilot project in tuberculosis control in the Qalyub area was begun in September 1959. About 250,000 persons will be examined by mass radiography; an estimated 2,500 newly-discovered infectious tuberculosis cases will be given ambulatory or domiciliary treatment; and about 12,500 contacts checked periodically. UNICEF is providing a mobile photofluorographic unit, a generator and two vehicles; x-ray films and chemicals; equipment for collection of sputum; and report cards.

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UNITED ARAB REPUBLIC (EGYPT) - Tuberculosis Control (Pilot Project) (continued)

The main purpose of the project is to assess the practicability of integrating tuberculosis control with other public health activities provided by the Public Services Units of the Qalyub Demonstration and Training Area. Methods recommended by WHO will be followed for the prevalence survey, mass case-finding and domiciliary treatment in order to facilitate evaluation and to permit comparison of the results with similar studies being carried out in other countries. If this project proves successful, the Government's intention is to extend such measures to other areas wherever possible, and further UNICEF assistance may be requested at a later time.

Allocation: \$86,200  
 First: March 1954  
 Latest: March 1959

Trachoma Control

Repeated infections of acute conjunctivitis and trachoma, the one aggravating the other, are the rule rather than the exception for most Egyptian children. Partial loss of sight, and sometimes total blindness, is the result.

UNICEF has provided equipment, drugs and transport for a pilot project for control of acute seasonal conjunctivitis and trachoma among children. Treatment is carried out in a thickly settled section of the Qalyub Demonstration Area north of Cairo, with a view to evolving a practical plan for mass control. In the sixteen-village pilot area, trachoma is treated in the schools, with teachers and students trained to supply the aureomycin ointment. The pilot project started in December 1954. By the end of 1959 71,000 trachomatous and conjunctival school children had been treated.

Following an evaluation of the pilot project by a WHO consultant in 1958, WHO recommended that the pilot studies be continued and their scope broadened, also that a two-year mass campaign be undertaken in two provinces representative of upper and lower Egypt to test treatment and campaign methods under circumstances different from those in the Qalyub area. This extension was planned to affect some 250,000 children in the two provinces and careful records were to be kept in order to offer opportunity for further expansion and for international comparison.

Under an allocation approved in March 1959, UNICEF delivered antibiotic ointment and vehicles during the year to continue the pilot project in the Qalyub Area and to start mass campaigns in Sharkia and Minia Provinces. The campaign in Sharkia Province was started in 1959 but that in Minia Province has been delayed until 1960. An estimated 40,000 children were treated in 116 schools in Sharkia Province. The target for 1960 is to treat 145,600 children in 578 schools in the two Provinces. Meanwhile special studies in the Qalyub demonstration area are being continued.

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UNITED ARAB REPUBLIC (EGYPT) (continued)

Bilharziasis Control (Pilot Project)

Allocation: \$46,400  
Approved: March 1960

This is the first project for bilharziasis control to be aided by the Fund, following policy approval for such projects given by the Board at its March 1959 session. Bilharziasis is a disease caused by a small parasitic worm carried by snails which inhabit fresh water, particularly irrigation canals. The parasite is easily transmitted to humans and infects children primarily, retarding physical and mental development and greatly diminishing their productive powers as adults.

UNICEF is providing molluscicides, laboratory supplies, field equipment and transport for the first two years (mid-1960 to mid-1962) of a five-year pilot project, including the establishment of a training centre in Beheira Province. The project area includes a population of 250,000, 42 per cent of whom are estimated to be infected with the disease. WHO will provide the services of three experts. A concentrated effort will be made to determine the most economical and effective means by which the disease can be brought under adequate control under the conditions that prevail in Egypt. The Government hopes that the project will serve as a field demonstration and training base for other countries in the Eastern Mediterranean Region. Project headquarters and several advanced field bases will be established in mid-1960. A thorough study will be made in the first two years of the important factors in bilharziasis control, including surveys to obtain base line data for future evaluation. Professional and auxiliary personnel will be trained in all phases of the work and various methods of control will be tried out, including the use of molluscicides.

Allocation: \$240,000  
First: October 1952  
Latest: October 1956

Milk Conservation

For a plant designed to dry 20,000 litres of milk daily UNICEF is providing imported equipment. The buildings are on the grounds of the Government Agricultural Experiment Station at Sakha, and those for the main plant - dairy, garage, pump house, etc. - have been completed, as well as three collecting centres. When the electrical installation now under way is completed the plant will be ready to receive milk; present indications are that it will begin operations in October 1960.

With the opening of these facilities it is hoped to raise the output of safe milk in Egypt and to preserve flush-season production, for this country has good dairy possibilities and excellent winter grazing land.

Free powdered milk will be distributed by the Government to 25,000 beneficiaries in the first year of operation, the number to be increased to 40,000 when the plant is in full production.

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UNITED ARAB REPUBLIC (EGYPT) (continued)

Emergency Aid

Allocation: \$304,900  
UNICEF aid completed

Gaza: From October 1952 until August 1956 UNICEF provided skim milk and other foods for 30,000 destitute mothers and children in this area. The Government took over full responsibility for the relief activities for this group late in 1956. Some 200,000 Arab refugees are crowded into the sandy strip of Gaza in addition to the original population of 104,000. Though the refugees are eligible for rations and services from the United Nations Relief and Works Agency for Palestine Refugees, the original inhabitants of this area were in many cases destitute but not eligible for refugee relief.

Port Said: The Executive Board in December 1956 approved an allocation for immediate aid for 40,000 children and mothers who had been evacuated from Port Said to emergency housing in nearby areas. The Fund provided skim milk, vitamin capsules, soap and blankets. By February 1957 all evacuees had returned.

UNITED ARAB REPUBLIC (SYRIA)

Population: 4,840,000	Area: 184,479 sq.km.
Child population: 2,000,000	Population density: 26 per sq.km.
Primary school enrolment: 375,746	Population per physician: 3,800

Total UNICEF aid: \$1,719,000 including freight  
First allocation: 1949

Allocation: \$159,900  
First: May 1951  
Latest: September 1957

Basic Health/MCH

The Government in 1952 initiated a programme to extend preventive health services to mothers and children and to integrate these services into its public health structure. Maternal and child health services are based on a network of district centres radiating out from main health centres in Damascus and the provincial capitals.

MCH services: Four main provincial MCH centres were established in the past year, bringing the total of such centres established with UNICEF help to 14, plus the Damascus demonstration and training centre and the Saqba rural health centre which was opened early in 1959.

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UNITED ARAB REPUBLIC (SYRIA) - Basic Health/MCH (continued)

Each provincial MCH centre is staffed by a medical officer, a midwife and two auxiliary public health nurses. The overall plan for expansion of basic health services calls for the establishment of "welfare units" around five of the main centres, each unit to include the adjoining provincial hospital and three village sub-centres. Up to the present, however, the formation of these units has been retarded by the lack of qualified personnel. It is expected that this aspect of the project may be developed in the near future since the senior national paediatrician who helped start the centre project in 1952 has resumed his functions as chief of the Government MCH section after a two-and-a-half year assignment with WHO.

Training: UNICEF first provided basic equipment and training aids for a maternal and child health training and demonstration centre at Damascus. In addition to training doctors, nurses and auxiliary workers in health care of the mother and child, the centre has developed a visiting-nurse service. Fourteen trainees were enrolled in the twelve-months course for auxiliary public health nurses in 1958. This course was followed by six months of refresher training for ten of the graduates, with emphasis on midwifery. Graduates will be assigned early in 1960 to village centres in the Deraa and Damascus areas.

A course for auxiliary public health nurses was resumed in December 1959, with 30 trainees enrolled. The course has been extended to fifteen months including a three-month period of training in midwifery. UNICEF provides stipends for nine months to twenty of the trainees in this course.

Training of traditional birth attendants (dayahs) was successfully initiated in 1959 under the rural health project in the Saqba area, with advisory assistance from WHO. In October 1959, eighteen graduating birth attendants received simple midwifery kits provided by UNICEF. Co-ordination between the national MCH project and the rural health project is constantly being strengthened. Midwifery tutors assigned to the rural health project will in due course supervise the field training of the thirty trainees taking the course for public health auxiliary nurses.

Equipment and supplies have been authorized for the Aleppo School of Nursing and for the attached paediatric ward but this part of the project has been delayed pending reorganization of nursing schools which is being worked out with advisory assistance from WHO.

School nutrition and school health services: To assist the Government in expansion of school nutrition and health services, the Board in September 1955 approved funds to provide skim milk powder, vitamin capsules and kerosene stoves for school feeding, also equipment for school health services, seeds for school gardens and vehicles for supervision of the co-ordinated school services. While the nutrition aspects of the plan (see below Child Feeding) have not developed as

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UNITED ARAB REPUBLIC (SYRIA) - Basic Health/MCH (continued)

envisaged, there has been some progress in the school health part of the project. There are now 41 medical officers attached to the School Health Directorate and the main school health centre in Damascus has installed dental facilities. In the 1957/58 school year 50,000 children were vaccinated against diphtheria and 97,000 against smallpox while 20,000 microfilms of school children were taken during tuberculosis case-finding in Damascus and Aleppo centres.

Malaria Eradication

Allocation:	\$770,200
First:	April 1952
Latest:	September 1959

In 1949 the Syrian Government initiated limited malaria control operations by residual spraying. UNICEF gave its first aid to combat malaria in 1952. Progress was at first sporadic and malaria remained endemic in all regions of the country except in the central desert lands, being particularly serious in the coastal and northern districts. The infant mortality rate increased in direct proportion to the degree of malaria endemicity.

In March 1956 the Board approved an allocation for the first two years of a five-year malaria eradication project. Under the most recent allocation for the project UNICEF insecticides are provided to continue spraying to the end of 1960. Serious administrative difficulties retarded the campaign in 1956 but operations in 1957 were more encouraging and 871,000 persons were directly protected. District authorities gave their full support to the work and in some instances municipalities contributed to the labour force.

Administrative difficulties have been overcome largely through strengthening of the Malaria Eradication Service which now has full authority in recruitment of personnel for the spraying operations, issuance of travel authorizations to technicians and drivers, local purchase of requirements and control of transport facilities. Almost 1,242,000 persons were directly protected in 1958. The 1959 spraying operations covered 3,446 villages, spraying 153,666 dwellings and directly protecting 1,048,628 persons against the target of 1,255,000, the shortfall being due to operational difficulties in certain areas not previously sprayed. An estimated 1,120,000 persons are to be protected in 1960.

Surveillance measures, initiated in the Damascus and Homs districts late in 1958 are not yet properly established, due chiefly to staffing problems. Plans are being worked out for consolidation of the surveillance system in 1960.

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UNITED ARAB REPUBLIC (SYRIA) - Malaria Eradication (continued)

A WHO assessment team visited the country for four months in 1958 and WHO has given continuous advisory assistance to the campaign. The resident WHO advisory team consists of a malariologist, an entomologist, a sanitarian and an administrative officer. UNICEF has, since November 1959, provided the services of an assistant transport officer. The campaign is co-ordinated with eradication work in Jordan by direct contact between the governmental authorities. Larviciding was undertaken in 1959 along a 40-kilometre stretch on the Syrian side of the Yarmuk River which forms the border between Syria and Jordan.

BCG Anti-Tuberculosis Vaccination

Allocation: \$49,500  
UNICEF aid completed

A BCG vaccination campaign assisted by UNICEF tested 265,000 children and vaccinated 116,000 by the end of 1959. The Government continues the project with its own resources.

Bejel/Syphilis Control

Allocation: \$41,200  
UNICEF aid completed

UNICEF provided penicillin, two small mobile field laboratories, clinical equipment and vehicles for this campaign against bejel/syphilis carried out in northeast Syria, an area where 25 per cent of the children were estimated to be infected. The campaign began in 1954 and was carried out under most primitive and difficult conditions in the area around Deirel-Zor on the Euphrates River. Following an exploratory and fact-finding stage, the work was expanded in two strips along the Euphrates River, between Deirel-Zor and the pilot area of Abu Kamal. The mass campaign was completed in March 1957, 155,000 persons having been examined and 127,800 treated. The five mobile teams have since been disbanded, but work is continuing in the permanent centre in Deirel-Zor which treats an average of 500 cases each month.

Mycosis Control

Allocation: \$29,900  
UNICEF aid completed

Mycosis is a fungus infection of the scalp affecting primarily children. The disease has serious psychological and social effects since children who are infected are not allowed to enter schools or to mix with others. WHO assisted from 1954 to 1956 in the establishment of two centres for treatment by electrotherapy, UNICEF providing two stationary x-ray units. In 1957 UNICEF provided a mobile treatment unit for operation in other areas. The Government has established and equipped an additional two stationary centres.

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UNITED ARAB REPUBLIC (SYRIA) (continued)

Milk Conservation

Allocation: \$500,000  
Approved: October 1956

For dairies to be established at Aleppo and Damascus UNICEF is providing equipment for reception, pasteurizing, sterilizing, bottling and refrigeration of milk, and for the processing of milk products. Some transport is also provided. A series of administrative and financial difficulties have delayed the implementation of the project. During 1958, however, the Government, FAO and UNICEF agreed upon a plan of operations which was signed in February 1959. A site at Damascus has been selected where the first plant is being built in 1960 with a capacity of 30,000 litres daily. The plant at Aleppo with 20,000-litre daily capacity will be started in 1960. The agreed plan of operations calls for free distribution of 10 per cent of the milk processed at each plant to needy children and pregnant and nursing mothers. This would be sufficient, when both plants will be operating at capacity, to benefit 20,000 mothers and children.

A Regional Milk Council is being established within the Ministry of Agriculture with responsibility for planning and implementation of a sound milk policy for the Syria Region.

PALESTINE REFUGEES

Total UNICEF aid: \$16,334,000 including freight  
First allocation: 1948

Emergency Aid

Allocation: \$14,586,500  
UNICEF aid completed

In camps and villages in Lebanon, Syria, Jordan and the Gaza strip, refugees from Palestine have since 1948 existed principally on relief provided by the United Nations, supplemented by private contributions from all over the world. United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) is charged by the United Nations with responsibility for the care of these groups. Of an estimated total of 922,000 refugees under UNRWA's care during 1956, approximately half were children.

UNICEF was the first international organization to bring relief to these refugees and by October 1948 large quantities of milk, rice, margarine, flour and other foods provided by the Fund were being distributed among them. At the peak of the operation food provided by UNICEF was distributed by UNRWA to more than 500,000 children and mothers. UNICEF provided also medical supplies, soap, insecticides, blankets, clothing and housing, and aided a BCG campaign in 1949 which tested 211,323 and vaccinated 148,137 children and young people against tuberculosis. Medical supplies and equipment provided by UNICEF were used to combat syphilis and trachoma and for prevention of tuberculosis.

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PALESTINE REFUGEES - Emergency Aid (continued)

Beginning in 1952 UNRWA assumed the responsibility to provide food for mother and child refugees under its own budget. From then until the end of 1956 UNICEF has given only such commodities as were contributed in kind and could be used by UNRWA for the care of refugee children and mothers.

REGIONAL PROJECTS

Regional BCG Assessment Team

Allocation: \$46,600  
UNICEF aid completed

A BCG assessment team, composed of WHO experts, worked in eight Eastern Mediterranean countries and among the Palestine Refugees from October 1954 to September 1956 to assess the results of BCG vaccination campaigns. Under the technical direction of the WHO Tuberculosis Research Office, the team analyzed statistical records kept by the vaccination teams, made comparisons between groups vaccinated and groups not yet reached in the mass campaigns, and carried out tuberculin-sensitivity and vaccine-allergy studies.

Regional Tuberculosis Survey Unit

Allocation: \$44,000  
Approved: September 1958

The Eastern Mediterranean Regional Office of WHO is considering assistance to new tuberculosis control projects in eight countries in the region. In accordance with the recent recommendations of the WHO/UNICEF Joint Health Policy Committee, no tuberculosis control project should be started without a preliminary prevalence survey.

The objectives of the regional survey project are: to study and lay down operative procedures for tuberculosis surveys in the area; to train national personnel for tuberculosis surveys; to collect tuberculosis prevalence data; and to study the epidemiology of tuberculosis infection in countries requesting international aid. The first countries to be surveyed are Libya and Jordan.

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UNICEF MICROFICHE INPUT CONTROL AND INSTRUCTIONS RECORD

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(17)



(16) Blank

77.CF.0201 + E/ICEF/400/Add. 2  
 DIGEST OF UNICEF-AIDED PROJECTS  
 ENGLISH ADDENDA-CORRIGENDA Pt. 3 E. MED. UNICEF

(6)(7)(8)  
B  
(11)  
(12)  
(13)

(9)

"NR" *CP = p.1-46* 46 p.

C

D

E

F

B-1 CLEAR	B-2 Card. 77.CF.0201+	B-3 CLEAR	B-4 CORR START	B-5 2	B-6 3	B-7 4	B-8 5	B-9 6	B-10 7	B-11 8	B-12 9
C-1 ADD START	C-2 11	C-3 12	C-4 13	C-5 14	C-6 15	C-7 16	C-8 17	C-9 18	C-10 19	C-11 20	C-12 21
D-1 22	D-2 23	D-3 24	D-4 25	D-5 26	D-6 27	D-7 28	D-8 29	D-9 30	D-10 31	D-11 32	D-12 33
E-1 34	E-2 35	E-3 36	E-4 37	E-5 38	E-6 39	E-7 40	E-8 41	E-9 42	E-10 43	E-11 44	E-12 45
F-1 46	F-2 47	F-3 48	F-4 49	F-5 50	F-6 51	F-7 52	F-8 53	F-9 54	F-10 55	F-11 56	F-12 57

Code "NR", appearing in any location of Row A MUST NOT be reproduced on microfiche (13)

1 2 3 4 5 6 7 8 9 10 11 12

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

TRAILERS YES  NO  (14)

Blank