Subj Chron: CF/EXD/SP/1987-0025

Address by Mr. James P. Grant Executive Director of the United Nations Children's Fund (UNICEF) to the International Conference on Children and Health

Berlin 31 May 1987



tem # CF/RAD/USAA/DB01/1998-02027

ExR/Code: CF/EXD/SP/1987-0025

International Conference on Children and Health, Address 1

Date Label Printed 10-Dec-2001

MW 0506 27/5/27

United Nations Children's Fund Fonds des Nations Unies pour l'enfance Fondo de las Naciones Unidas para la Infancia Детскому фонду Объединенных Наций 联合因儿童基金会 صنطمة الأمم المتحدة للأطفيال

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to the

International Conference on Children and Health

Berlin - 31 May 1987

Your Excellency, Professor Mecklinger, Director General Mahler, Professor Hallman, distinguished participants in this Conference:

I join in greetings as we open this important conference on the occasion of the 750th anniversary of the city of Berlin.

During this conference, you will focus on new frontiers in several aspects of improving the health and well-being of the world's children. I am very pleased that Professor Hallman, the President of the International Pediatric Association, will address in his keynote speech the issues of child survival and development so central to the work of many participants in this conference, including the International Pediatrics Association, the World Health Organization, and UNICEF.

But in these few brief moments of the opening session, I want especially to speak directly to each of you as <u>individuals</u> who have a critically important influence on medical and health policies, practices, and services.

We know that the scientific and technical knowledge already exists in your hands to prevent and to cure the major killers of children everywhere on our planet. You have this knowledge and these skills, and have employed them daily.

The greater question before us, and the greater challenge to those of you who are physicians to children, is how to ensure that this knowledge is effective in reaching the millions upon millions of children - in fact, the

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majority of the world's children - who you - and your several hundred thousand colleagues around the world - will never see in your offices or in your hospital wards.

Every day, nearly 40,000 of the world's children die, the vast majority of them from the most common, mundane and preventable of causes. The great majority of them never saw a pediatrician or a hospital ... nor would they as children had they lived.

Today - as every day - 10,000 small children - one every six seconds - will die of the dehydration associated with diarrhoea. Oral rehydration therapy - described by Lancet in 1978 as "potentially the most important medical advance of this century" - can be carried out successfully by a mother in her own home for only a few cents utilizing either pre-packaged ORS or a home brew made from salt, sugar and water from her own kitchen. Yet more than 80 percent of mothers still aren't using this simple life-saving remedy. Why not? How do we overcome this tragic ignorance?

Again today - as every day - another 10,000 small children will die, and a possibly larger number be disabled, from six immunizable diseases: Tetanus, Measles, Polio, TB, Whooping Cough and Diphtheria. Only about one-third of the 105 million children born to families in developing countries this year will be immunized against each major antigen, even though the cost per child is less than \$5. Why not? How do we overcome this tragic waste?

Third, in most countries each day, still more mothers in urban slums are abandoning healthy, sanitary, and low-cost breastfeeding with its immune protection and nutritional benefits. In place they turn to relatively costly bottle feeding - so frequently contaminated and unsanitary - leading all too often to diarrhoea and its disasterous consequences of malnutrition and death. Why? How do we reverse this trend?

Finally, we know that most mothers are not even aware as malnutrition insidiously develops in their children, until it has become serious and difficult to reverse. We also know that when mothers do see growth falter, most will fight with considerable success to reverse the trend, to avoid the malnutrition that is associated with more than half of the 40,000 small child deaths each day. Why aren't more mothers involved with growth monitoring using simple growth charts? How can we help alert millions of mothers to detect growth faltering in time for home remedial measures to avoid advanced malnutrition which, all too often, is tragically needless?

There are those who claim - UNICEF and WHO among them - that despite the global economic recession, the combination of recent advances in both biological science and social organization now make it possible at affordable cost (within a relatively short period of years) to improve the health of hundreds of millions of children, to save the lives of up to seven million children each year, to avoid the disabling of millions more, and to help slow world population growth as well. This can come about if - and this is the big

caveat - <u>if</u> governments and citizen leaders - leaders such as the medical and health practicioners and policy-makers assembled in this hall - genuinely want it.

And, indeed, country after country in the developing world has been demonstrating, over the past several years, that such revolutionary progress can in fact be accomplished because their governments and citizen leaders — and, again, especially including leaders like you — have genuinely wanted to do so. While few countries will rival the 97 per cent immunization coverage which our German Democratic hosts have achieved among their children, and an infant mortality rate of 10 per 1000, as the GDR has accomplished, is a still—elusive goal for many industrialized countries as well as the vast majority of developing nations, many developing countries are capable of reducing their infant mortality rates by half within the next 10 years — through sustained effort aimed at reaching the vast majority of their children who, at present, are largely unreached by medical and health services. Indeed, as a result of these child survival measures, over one million child deaths were avoided last year alone.

During the course of this conference, I know that you will hear very comprehensive and persuasive reports on how and what is being accomplished. I regret that I, personally, cannot continue in these discussions, as I have interrupted an official visit to the Soviet Union in order to be with you here today. But I would like to remind you of the critically important role which you play in protecting and enhancing the role of all the world's children - all the children, far beyond those relative few whom you will see in your practices, clinics or services. Your power reaches far beyond your own patients.

- -- It is you who can <u>set standards</u> within the health profession. When alternative treatments exist, choose the more widely applicable low-cost practice. Promote breastfeeding, the use of oral rehydration and growth monitoring in your own practice, and <u>press the hospitals</u> with which you are affiliated to do likewise. Every reputable hospital in the world should be utilizing Oral Rehydration Therapy in a major way before the end of <u>this</u> year, as should all doctors by the end of this decade.
- -- It is you who have by far the greatest ability to draw in and involve other doctors and nurses. Vigorously spread the world and educate others on the situation and the historic opportunity for change on a vast scale.
- -- Who else but you can <u>advocate</u> as credibly in your own societies, to your political leaders and to national and local institutions? Given the influence that you wield, it is you who must take the lead among other professions and sectors who look rightfully to you as leaders.
- -- Act, in your practices, your teaching, your writings, and your research to strengthen our knowledge and experience of how appropriate medical technology, through supportive social structures, can transform the death and disease patterns posed by the major cripplers and killers of children;

- It is also you to whom the world must turn for ideas and for solutions to the difficult problems in extending other elements of basic health care to the previously unreachable poor of the world.

We are <u>beginning</u>, as you will hear from Professor Hallmann and others, to close the gap between those whom you will see in your daily practices and the great majority of children who will never see a pediatrician or other medical practicioner. I urge you, in your roles of leadership for children's health, to join in even greater efforts with partners all over the world to foster an international atmosphere of such progress and momentum that, together, we can make a Child Survival and Development Revolution the world's most critical revolution - a revolution that will accelerate achievement of primary health care, as so compellingly articulated at the Alma Ata Conference ten years ago, and so critically essential to our struggle for Health for All by the year 2000.

Can we, in these next three years, extend the benefits of some of your most critical knowledge to the great majority of the world's children? Can we reach the unreached?

Together, I think we can.