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Message from Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
to the
Participants of the National Congress on Child Health

Ujang Pandang, Indonesia 11-14 September 1990



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In 1983 the XIIth International Congress of Pediatrics in Manila adopted a resolution which committed the organization and its members worldwide to a partnership with UNICEF and WHO in the Child Survival and Development Revolution (CSDR). In adopting that resolution, the International Pediatrics Association (IPA) became the first great organization to formally enlist in this revolution to reduce infant and child mortality and morbidity through applying, on a wide scale, simple low-cost technologies which could save infants and children from preventable deaths - most notably growth monitoring, oral rehydration therapy, breastfeeding and immunization.

Much progress has since been made. Child Survival and Development is gaining ground in most developing countries. Whereas at the time of the Manila meeting only 20 per cent of the world's children were protected by immunization, today more than 70 per cent are immunized. As a result, the lives of nearly 3 million children were saved last year alone. Oral rehydration therapy (ORT), virtually unknown in many parts of the world in 1983, is now saving the lives of one million children a year from death due to diarrhoeal dehydration. But while these advances are inspiring, still some 2 million children die of preventable diseases each year and more than 3.6 million young lives are lost each year to diarrhoeal dehydration. Furthermore, in these difficult times of economic recession and human conflicts, the situation of children in a number of developing countries, particularly among the poor, is not getting better.

I am pleased to say that Indonesia is not one of those developing countries in which conditions for children are stagnating or even retrogressing; on the contrary, the situation here is very encouraging. Indonesia has made substantial progress and I am confident that the goal of Universal Child Immunization by 1990 - the goal of vaccinating 80 per cent of children with all six antigens, protecting them against the six main child-killing diseases - can be achieved in this country. During a past visit to Indonesia, I was pleased to note that oral rehydration therapy was being widely promoted and practiced and that protein calorie malnutrition among children younger than five had been reduced by two-thirds in less than a decade. It is clear, however, that much remains to be done. Last year more than 100,000 Indonesian children died from immunizable diseases; approximately 100,000 from diarrhoeal dehydration. One of every ten children was malnourished.

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Most of the children who are vulnerable to such disease and ill-health live in poor urban kampungs and rural villages. They may never see the interior of a private physician's office or hospital or clinic such as those where you work. The question, then, is: How can your knowledge reach the vast majority whom you will never see? How can you, the world's most skilled protectors of health and children, help reach the unreached?

Fully aware of the substantial contributions that many of you have made towards reducing infant and child mortality and morbidity, I call upon you to redouble your efforts to take advantage of recent successes. There are critical tasks in the Child Survival and Development Revolution that only you, as the doctors of Indonesia's children, can accomplish. For example:

- -- It is you who can set standards within the health profession. When alternative treatments exist, choose the more widely applicable low-cost practice. Promote breastfeeding, the use of oral rehydration therapy and growth monitoring, and press hospitals, clinics and your peers to do the same. You can screen children and offer immunization as opportunities occur.
- -- It is you who have by far the greatest ability to involve other doctors, midwives and nurses. You can spread the word and educate others on the situation and on the opportunity for change on a vast scale.
- -- It is you who can advocate credibly in your own communities, to your political leaders and to national and local institutions. Given your influence, it is you who must take the lead among other professionals and sectors to act on behalf of the children.
- It is also you to whom the community must turn for ideas and for solutions to the difficult problems in extending other elements of basic health care to the still unreachable poor.

Universal Child Immunization is within reach in Indonesia. The infant mortaltiy rate can be reduced to at least below 50 per thousand live births by the year 2000. And before this decade is over, maternal mortality and malnutrition among children younger than five can be reduced by one half, and polio can be eradicated. We, together, can make this happen.