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Executive Board

UNICEF-WHO JOINT COMMITTEE ON HEALTH POLICY

Report of the Fourteenth Session  
held at the Headquarters of the World Health Organization, Geneva  
8-10 February 1965

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1. Attendance

The attendance at the session was as follows:

	<u>UNICEF Executive Board</u>	<u>WHO Executive Board</u>	
Representatives:	Dr K. Bain ( <u>Rapporteur</u> ) Professor R. Debré Mrs Z. Harman Dr D. Venedictov	Sir George Godber ( <u>Chairman</u> ) Dr A.C. Andriamasy ( <u>Rapporteur</u> ) Dr V. T. Herat Gunaratne Professor P. Mintendon Dr C. Prieto	
	<u>UNICEF</u>	<u>WHO</u>	
Secretariat:	Mrs D. B. Sinclair Dr G. Sicault	Dr M.G. Candau Dr P. Dorolle Dr S. Flache ( <u>Secretary</u> ) Dr P. Kaul Dr F. Grundy Dr L. Keprio Dr E. Verboven Dr K. Raska	Dr F. Soliman Dr V. Patwardhan Dr J.M. Bengoa Dr H. Mahler Dr V. Martinez Dr M. Ansari Dr C. Cockburn Dr M. Sakis

Representative of FAO: Dr Nicol

2. Opening of session

Professor Debré (UNICEF), Chairman of the thirteenth session, opened the meeting and expressed thanks to the Director-General of WHO, on behalf of the Committee, for the hospitality and working facilities provided by WHO.

Wishing the Committee success at its fourteenth session, he then called for nominations for the office of Chairman.

3. Election of Chairman and Rapporteurs

Sir George Godber (WHO) was elected Chairman.

Dr Katherine Bain (UNICEF) and Dr A.C. Andriamasy (WHO) were elected Rapporteurs.

Sir George Godber, on behalf of the Committee, expressed his profound regret at the recent death of Mr Maurice Pate, Executive Director of UNICEF.

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4. Adoption of the agenda

The Committee adopted the following agenda:

- (1) Development of basic health services, in relation to:
  - (a) functions, organization and staffing requirements
  - (b) integration of mass disease control activities into general health services
- (2) Immunization programmes for the control and eradication of certain diseases:
  - (a) poliomyelitis
  - (b) measles
  - (c) smallpox
- (3) A review of BCG vaccination within over-all tuberculosis control programmes
- (4) A review of jointly assisted leprosy control projects
- (5) The need to strengthen health components in nutrition programmes
- (6) Other business

5. Terms of reference of the Committee

The Secretary recalled the Terms of Reference of the Committee, as approved by the Executive Board of WHO at its January/February 1960 session, and the Executive Board of UNICEF at its March 1960 session.

6. Statement by Mrs Harman, Representative of UNICEF, Chairman of the UNICEF Executive Board

Mrs Harman made a brief statement on the development of UNICEF policies aimed at strengthening the essential purpose of the Fund, concentration on the needs of the child, and viewed in the context of over-all economic and social development plans. They covered all those aspects that contributed to the child's healthy growth, physical, mental and social. The emphasis was on country projects benefiting children and accorded priority by governments, which would normally provide UNICEF's support of world programmes.

7. Development of basic health services, in relation to: (a) functions, organisation and staffing requirements; and (b) integration of mass disease control activities into general health services

The Committee reviewed the document (JCI4/UNICEF-WHO/2.65) and observed that developments in field activities jointly assisted by UNICEF and WHO have provided worthwhile technical and administrative knowledge which has helped define the principles on which basic health services on a nation-wide scale can be established. The type of assistance given by UNICEF and WHO to various basic health services programmes had contributed satisfactorily to the improvement of the health of mothers and children. The Committee agreed that a continuation of this type of assistance should be intensified and given a high priority.

The Committee considered that the importance of long-term planning should be stressed, with a view to establishing a permanent service with the necessary coverage of the country. It is essential, therefore, to plan basic health services within the framework of over-all national health services which should be an integral part of social and economic development. Activities aimed at benefiting the health of mothers and children constitute an essential feature of such programmes. Organized MCH services should be planned and operated as an integral part of the basic health service programmes without sacrificing their individuality.

Assistance to the basic health services should not be limited to the provision of supplies and equipment but should include facilities for the formal and in-service preparation (education and training) of all categories of national staff both at the professional and auxiliary levels. It will also be necessary to train senior field staff in the supervision of their assistants. The system of supervision throughout the service should receive particular attention. The specific health needs of mothers and children should be given due emphasis in the training programmes.

To enable health personnel staffing the basic health service to perform their functions, the health units where they work should be adequately equipped with requisites necessary for the prevention of diseases common in the area, for health education and for simple treatment. Assistance should be provided to supply

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practical means of transportation to guarantee accessibility of the services to the population and the efficiency of the supervisory system between the various levels of the service.

The Committee considered that during the development of basic health services it may be necessary in any given country to continue assistance to mass campaigns for the control of specific communicable diseases, many of which campaigns are essential for the promotion of health of mothers and children. The assistance thus provided would serve to stimulate the development of basic health services and prepare the way for the progressive integration of these campaigns into the general health services.

The establishment or extension of basic health services on a nation-wide scale could include a carefully planned pilot project. Such experience should also provide valuable material to be fed back into the training of staff.

8. Immunization programmes for the control and eradication of certain diseases

Document JCI4/UNICEF-WHO/5.65 was presented and comprehensively discussed.

In clarification of the use of the word eradication in the title it was explained that control programmes were envisaged for poliomyelitis and measles but eradication was the objective in the WHO Smallpox Programme. It was stressed that the figures quoted in the report referred only to reported cases and were used as illustrations though it was realized that in all three diseases the true incidence was almost certainly much greater than the reported incidence and that the efficiency of notification systems varied greatly between countries.

(a) Poliomyelitis

In the discussions on poliomyelitis vaccination the present trends in incidence and age distribution were described and the great successes already obtained by vaccination in many countries were noted.

From past experience of the changes which occur in the epidemiological behaviour of the disease as environmental conditions improve extensive outbreaks might occur in the future in some countries. Mass vaccination campaigns were recognized as being necessary for rapid and complete control of the disease but

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different views were expressed on the priority to be given to mass vaccination at the present time in countries with other important health problems.

In view of the high cost of producing and testing small amounts of live vaccine there would be great advantages if, where appropriate, countries would develop production on a regional instead of a national basis.

The Committee recommended that UNICEF, although not normally providing assistance to campaigns against poliomyelitis, might do so under the following conditions:

- (i) There is evidence that the incidence of the disease had increased greatly or was likely to do so in the near future.
- (ii) The government concerned gives high priority to vaccination of the susceptibles (which in most cases would be young children).
- (iii) That the country has adequate medical services for this purpose, except in emergencies.

(b) Measles

Death rates from measles are relatively low in many developed countries, but high in some countries, particularly in Africa and Latin America. Effective measles vaccines have now been prepared. They give a high level of long-lasting immunity, though they still cause a high proportion of reactions and are expensive. The epidemiology of measles is such that the programme would have to be continued as a routine in future years if any lasting advantage was to be obtained.

The Committee is not able to recommend mass vaccination campaigns against measles to be undertaken at the present time. However, provided the costs of the programme were not excessive, the provision by UNICEF of vaccines might be considered for countries with high death rates, provided that the vaccines were administered only to groups small enough to be kept under observation during the period of reaction and that it would be possible to continue to vaccinate systematically the children born into the community in future years.

(c) Smallpox

The progress of the programme for the eradication of smallpox was presented and reviewed. The importance of the use of freeze-dried smallpox vaccine in

warm countries was emphasized and it was recognized that WHO and UNICEF had made a signal contribution to the ultimate eradication of the disease with their support of the establishment of the production and supply centre for this vaccine.

It was noted that the eradication of smallpox was being planned and implemented as a responsibility of the national health services, suitably strengthened and trained.

It was essential to strengthen health services if the disease was to be finally eradicated because in the long term, programmes would have to be carried out as part of the routine immunization procedures. UNICEF does not have a commitment to the global eradication of smallpox but has supported the production of freeze-dried vaccines in some countries where the disease is endemic by supplying the necessary equipment and is prepared to provide vaccine for use in the basic health services. It was evident that for the smallpox eradication programme large amounts of vaccine were necessary to meet the needs until the local production of vaccine became sufficient. It was recognized that in some countries local production would be uneconomical and the need for imported vaccine would be necessary for the undertaking of eradication programmes in those countries.

The Committee recommended that UNICEF should continue, as in the past, to give assistance for the production of vaccine and to smallpox programmes within the framework of the basic health services.

9. A review of BCG vaccination within the tuberculosis control programme.

The Committee considered in detail the document before it: "A review of BCG vaccination within the tuberculosis control programme", document JCI4/UNICEF-WHO/3.65, as well as the introductory remarks made by the WHO Secretariat. The Committee expressed its firm conviction concerning the efficacy of BCG vaccination and agreed with the emphasis placed on BCG vaccination in WHO/UNICEF-assisted tuberculosis control projects. The Committee understands that this emphasis is to be interpreted within the context of comprehensive national tuberculosis programmes, defined as eligible for UNICEF assistance in the previous report of the Joint Committee on Health Policy.

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The Committee noted with satisfaction some of the developments, e.g. simultaneous application of BCG and smallpox vaccinations, omission of the tuberculin test in the young age-groups as a necessary screening prior to BCG vaccination - which may assist in the progressive integration of BCG vaccination into tuberculosis control. In this connexion the Committee supported the efforts made towards making BCG vaccination increasingly available to the youngest age-groups through the MCH services. The Committee hoped that mass BCG campaigns receiving UNICEF assistance would be integrated as quickly as the development of permanent services permits.

The Committee realized that integration will increasingly call for the use of freeze-dried vaccine of a high and uniform quality and recommended UNICEF assistance towards meeting this demand, whether in kind, or in the form of equipment and supplies for the development of a few strategically located production centres.

10. A review of jointly assisted leprosy control projects

The Committee reviewed the detailed assessment of the jointly assisted leprosy control projects contained in the document JCI4/UNICEF-WHO/4.65. It was recognized that leprosy constitutes a serious health and social world problem and the child population is exposed to great risk of infection.

It was also recognized that practical difficulties which are common to the control of all communicable diseases are made worse by a number of factors among which is the attitude of people towards this disease. The progress in some of the projects has been admittedly slow and results not as satisfactory as might have been expected.

The members of the Committee expressed concern over the slow progress and, in some instances, the ineffective results. It was explained that WHO is developing a programme of research and study covering all aspects of leprology particularly in regard to those measures which might bring early improvement in the control of the disease, such as improvement of chemotherapy, and the development of immunizing agents. In addition, WHO is recommending the establishment of field demonstration or pilot areas for leprosy control in different parts of

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the world to improve the methodology and to adapt operational methods to local conditions. It is hoped that with the experience gained it will be possible to improve the efficiency of the leprosy control programmes. A meeting of the WHO Expert Committee on Leprosy is planned for this year. It is hoped that this Expert Committee will review and evaluate all leprosy control work, and recommend suitable improvements in the methodology for the control of leprosy.

The Joint Committee was desirous of avoiding any setback in the long-term efforts needed for the control of leprosy. While awaiting the recommendations to be developed by the Expert Committee, it was recommended that assistance to leprosy control programmes should continue, subject to these being supported by the public and given high priority and adequate assistance by the governments.

11. The need to strengthen health components in nutrition programmes

The committee took note of the document (JCI4/UNICEF-WHO/6.65) as a major statement of the role of basic health services in the control of malnutrition in pre-school children.

The Committee recognized that malnutrition in children of six months to three years constitutes one of the most important and widespread public health problems in most of the developing countries today. This malnutrition consists most often of protein-calorie malnutrition, often combined with infection and parasitic infestation and frequently accompanied by vitamin deficiencies, among which vitamin A should be included.

Implementation of programmes aimed at control of malnutrition in pre-school children entails the participation of many agencies, institutions and the community itself. Since health aspects are a major concern in these programmes, they should be instituted as far as possible in areas where a reasonable network of health services exists.

In the control of malnutrition in pre-school children the most appropriate action of the basic health services would be the following:

- (i) The surveillance of the population at risk using all possible channels available in the community.
- (ii) Nutrition education of the population, particularly of mothers and young girls.
- (iii) Supplementary feeding programmes, with milk or other protein-rich foods.
- (iv) Early treatment and nutritional rehabilitation of mild and moderate cases of malnutrition.
- (v) Treatment of severe cases of malnutrition.
- (vi) Control of infection and parasitic infestation.

The general promotion of protective foods, conservation and related activities would be essential to ensure the effectiveness of the measures enumerated.

The WHO recommendation that "all skim milk powder distributed through international and voluntary agencies should be fortified with vitamin A" was noted by the Committee.

The Committee recognized the great importance of having available for pre-school children either skim milk or locally available protein foods. Particular attention was drawn to the value of development of new protein foods, especially for areas where for a long time milk production will remain inadequate.

The Committee noted that in the past international assistance has been largely directed towards nutrition programmes in rural areas. The Committee felt that in future attention should also be given to problems of malnutrition in pre-school children in urban, and particularly in fringe areas.

The Committee learned with interest that a Joint FAO/WHO Technical Meeting on Methods of Planning and Evaluation in Applied Nutrition Programmes was held in Rome in January 1965, with the participation of UNICEF and that a report was being prepared on the appropriate steps to be taken to ensure proper planning and to provide for evaluation.

The Committee was gratified to note that in programmes for the improvement of nutrition in pre-school children, there was close collaboration between WHO, FAO and UNICEF.

The Committee considered that increased efforts were required to advise the planning authorities of governments more completely on the importance of nutrition which at the same time concerns health, agriculture and education and requires their co-ordinated action.

The Committee recommended that in the control of malnutrition highest priority should be given to the pre-school child.

The Committee recognized the major role which should be played by basic health services in the control of malnutrition in close co-ordination with all services which bear on the problems of nutrition.

The Committee strongly recommends the training in nutrition of all health workers, as a prerequisite to the success of programmes of protection from malnutrition.

12. Other business

The representative of the Secretariat of UNICEF stated that two topics had been suggested for the next meeting of the JCHF, namely:

- (1) Parasitic infestation
- (2) Flouridation

This was noted and would be taken into account by the Secretariats of WHO and UNICEF when the agenda for the forthcoming session is prepared.

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