

CF Item Barcode Sign

Page Date Time

6 10/31/2005 12:32:04 PM

Login Name

Upasana Christina Young



Exp: led Number

CF/RAD/USAA/DB01/1997-06715

Exte al ID

E/ICEF/1953/R.0420

Title Isra

- MCW (Handicapped Children)

Date Created 2/24/1953

Date Registered

Date Closed

Primary Contact

Owner Location

Office of the Secretary, Executive Board OSEB = 3024

Home Location

Office of the Secretary, Executive Board OSEB = 3024

Current Location/Assignee Record & Archive Manage Related Functions=80669443 since 3/19/2

FI2: Status Certain? No FI3: Record Copy? No

d01: In, It, Internal Rec or Rec Copy

Contained Records Container

D Published

Fd3: Doc Type - Format

Da1:Date First Published

Priority

Record Type A04 DOC ITEM: E/ICEF 1946 TO 1997 EX BD

L ument Details Record has no document attached.

N_i s

Dc ment Format Series/Year/SubSeries/Number/Rev: E/ICEF/1953/R.0420; Doc

Se s/SubSeries/Year/Number/Rev: E/ICEF/R/1953/420

Dc Series: E/ICEF/R; Series Valid date on import: 01-Jan-1950; Doc Year: 1953; Doc Number: 0420; Doc Numb

Sh :: 420; Doc Revision #:

En sh, L.Avail: E,F..; L.Orig: E-?

No PDF or TIF: Chk_PDF: No; Chk_PDF_Prob: No; Comment: ; Chk_TIF: No; Chk_TIF_prob: No; TIF ID# Start

= TIF ID# end =

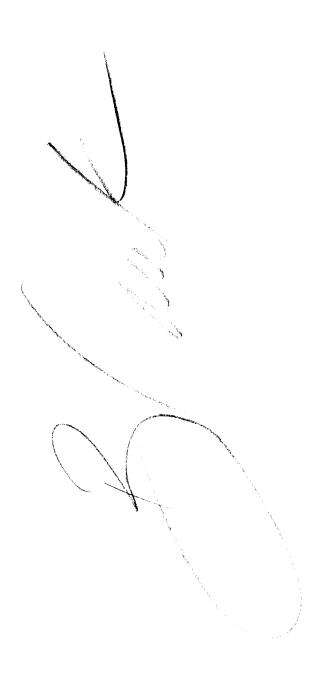
int Name of Person Submit Image

Signature of Person Submit

Number of images without cover

Dasaux

2-5



LCC NOMIC ANI SOLIAL COUNCIL



RESTRICTED

E/ICEF/R.420

24 February 1953

ORIGINAL: ENGLISH

ITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND

ogramme Committee

RECOMMENDATION OF THE EXECUTIVE DIRECTOR
FOR APPROVAL OF A PLAN OF OPERATIONS
FOR THE REHABILITATION OF MANDICAPPED CHILDREN IN ISRAEL

In this paper the Administration requests authority to approve a plan of erations for a handicapped children's program for Israel. The total cost to ICEF will be \$20,000 which is available from medical and feeding allocations proved by the Executive Board prior to 1951. If this recommendation is approved by the first aid to Israel for this type of program.

The Government of Israel, in its maternal and child health program, has aced emphasis from the beginning on preventive rather than on curative measure mpaigns against infectious diseases, disorders due to malnutrition, and the ex asion of maternal and child welfare services have been given priority in the ild health program. Israel still has emergency requirements in the field of c alth and welfare, but it is felt that the major effort must be focussed on the against needs of the child population.

The physically and mentally handicapped child is one of the most serious ild welfare problems in the country. While no exact statistics are available e number of children affected by physical and mental disability, it is known to e mass immigration to Israel, with a majority coming from under-developed countes, produced a large increase in the number of children needing special care of a ndicaps. No immigrant was barred because of physical handicap.

An important cause of child handicaps is poliomylitis which has been ender Israel for some years, but assumed epidemic proportions for the first time in e spring and summer of 1950. The number of cases fell during the autumn and nter of 1950/51, but an increase was reported in the following spring and summinghty cases were reported monthly from the winter of 1951/52 until the end of ly, 1952, the most vulnerable age group being from 10 to 30 months. 80% of the

(4.P.)

ses were in the group below 5 years of age. The percentage of paralytic eases a exceptionally high as was the fatality rate. The generally approved measure re applied in the early stages of the epidemic with stress on early diagnosis. Agnosis of non-paralytic cases and hospitalization of practically all reported ses in the infectious disease wards of the government hospitals of Haifa and 1 Aviv. UNICEF airshipped two iron lungs to Israel in May, 1950, to assist the vernment in meeting the emergency. (E/ICEF/155, page 23)

Following is a statistical record of the polio epidemic and its results:

•	1950	1951	
Total number of cases	1,622	892	
Cases of light paralysis	137	70	
" medium "	187	-	
" " serious "	222	290	
Percentage paralyzed	74%	No figures	avai:
Recovered	737	****	able
Almost completely recovered	13	400 major	
Number of deaths	224	164	•
Case fatality rate	14%	19%	

ilities for Care of the Handicapped

The concept of rehabilitation in its medical, vocational and educational a lwelfare aspects is well developed in Israel. Facilities and personnel for he clity care of the handicapped exist in hospitals, special rehabilitation and resical medicine departments and in sheltered workshops. But the demand for survices is so great that considerable expansion is needed - especially to meet the truncation of the handicapped children.

Ambulatory treatment is available in all large towns and special governit sponsored out-patient clinics for polio patients have been established at t
afand Government Hospital, the Haifa Government Hospital, and in cooperation
h the Hadassah Hospitals in Jerusalem and Beersheba. A special ward for the
longed treatment of severely paralysed patients is maintained at the Government
pital in Sarafand which operates under the supervision of paediatricians,
sio-therapists and orthopaedists. At present 180 beds are available for chilin in need of institutional care during rehabilitation but this number is far
im adequate.

posed Plan of Operations

7

S

W

Н

d f

P

A general rehabilitation centre is now being constructed at the Sarafand G eral Hospital near Tel-Aviv. In addition to treatment facilities, the centre w l include a school for physiotherapy, various sections for vocational and c ssroom training, a social welfare section and a special polio wing. The

/ Covernment has

ernment has succeeded in purchasing pre-fabricated buildings from Finland to a see the centre.

The polio out patient department at the Sarafand Hospital will be transfered to the rehabilitation centre which will have a capacity to care for 50 out ients per day of all types of physically handicapped. This department will be possible for follow-up of children dismissed from the hospital as well as for io cases requiring only ambulatory treatment. Children requiring out-patient will be collected by bus and brought to the rehabilitation centre where they are be kept in a special day nursery pending treatment. For the large numbers of the large numbers of the different requiring braces and splints, it is proposed to set up a work shop and the ting room for prosthetic appliances.

The present 35 polio beds at the Sarafand Hospital will also be transferre to the rehabilitation centre and a further 45 beds will be added for polio victim U CEF Commitments

If this recommendation is approved, UNICEF will supply the following at an e imated cost of \$20,000:

- a) A bus to be used for the transportation of out-patients from the surrounding towns and villages to the rehabilitation centre and back.
- b) Equipment for the polio wing of the Sarafand rehabilitation centre, including electro- and hydro-therapy apparatus and equipment for the remedial exercise gymnasium.
- c) Tools and certain raw materials for making orthopaedic appliances.

W) Participation and Technical Approval

WHO will provide from its regular budget the following in connection with a sablishment of the rehabilitation centre at Sarafand:

- a) international project personnel:
 - 1 physio-therapist in charge of the centre
 - 1 teacher of physio-therapy
- b) fellowships for the Government's director of the rehabilitation centre and for the director in charge of technical medicine

I : estimated cost to WHO will be about \$22,000. UNICEF will not be asked to unc

t te any financial responsibility for personnel in connection with this programme.

The proposed programme for care of physically handicapped children in Israc

w soriginally investigated by a special WHO consultant in the summer of 1952. Su

s quent visits by UNICEF representatives and WHO advisers have contributed to

E uping up the present plan of action which has the technical approval of WHO.

/ ll. The Eastern

The plan has been reviewed by the U.N. Department of Social Affairs and he its agreement. The Eastern Mediterranean Area Social Welfare Adviser has also been consulted and will cooperate further during its implementation.

G ernment Commitments

1 The Ministry of Health which has overall responsibility for this program 1 purchase and erect pre-fabricated houses at Sarafand for the general rehabil ion centre. Provision will also be made by the Government for the maintenance adequate technical and lay staff. Hospitalization costs will be paid by the ernment. Space and facilities will be made available for the prosthetic work-G. p and fitting room which will be staffed by trained local personnel. The cost O: the pre-fabricated buildings will be \$223,000, the estimated cost for erection installations \$280,000, a total of \$403,000 of which approximately 50% may be a.i sidered as for handicapped children alone. Recurrent costs of the programme fc care of the handicapped children are estimated at Israel L 6 per bed per day 80 children's beds (\$16.86 per bed day) or an estimated annual cost of \$492.0 $\mathbf{f} \in$ T total cost to the Government therefore for initial investment and operating ts for hand capped children would be approximately \$693,000 for the first year the programme.

Ta get Time Schedule

Construction of the rehabilitation centre is well advanced, and UNICEF so plies will be put to use as soon as they can be delivered which is planned for exply summer 1953. A detailed plan of operations will be worked out during the spring of 1953.

Un EF Representation

17 UNICEF aided programmes in Israel will continue to be visited by personne from the Eastern Mediterranean Area Office in Belrut.

Re ommendation

The Administration requests authority to approve a plan of operations for as stance to handicapped children in Israel as outlined above, and to utilize 0.000 for this purpose from funds allocated by the Executive Board prior to 1951

* * * * * *