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UNITED NATIONS  
ECONOMIC  
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E/ICEF/240  
13th September, 1953.

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UNITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND

Executive Board

UNICEF AID TO THE AFRICAN AREA:  
STATEMENT TO THE EXECUTIVE BOARD ON 9TH SEPTEMBER,  
1953, BY CHARLES A. EGGER, DIRECTOR, UNICEF OFFICE  
FOR AFRICA, EASTERN MEDITERRANEAN AND EUROPE REG-  
IONAL OFFICE

As the work in the past six months in Africa has been presented in detail in the Executive Director's Progress Report I will limit myself to a few highlights of the major work that has been in progress, and an indication of the kind of work envisaged in Africa in the future.

MALARIA

Impressive progress has been made in the anti-malaria programmes in the French West African territories, Togoland and the French Cameroons. Similar efforts are being made by the Liberian Government in this field. After careful preparation and planning this programme is well under way, and you will be interested to hear that the target for 1953 has been four-fifths completed as far as the first spraying operations are concerned. The impression given by this operation is very satisfactory. Preparations were made in good time and the progress achieved is the result of careful planning by governments with the assistance of WHO and UNICEF. Plans have been drawn up, money has been set aside in local budgets and personnel has been trained well in advance. The reactions of the local authorities and populations have been very favourable, but there are, of course, still a number of problems to be overcome: the surface to be sprayed is even greater than was originally calculated, too much DDT has been used per square meter and further supplies of DDT will be needed to cover the same numbers of people. In addition, the cost

of the campaign, particularly in the early stages, was a cause of some concern to the authorities. A further problem that has been encountered is the question of sufficient supplies of sweet water in some areas. The project in the Cameroons has suffered as a result of the delay in arrival of expert personnel and the organizational period required for the pilot project. All these and other problems require to be settled before any firm conclusions can be drawn from the operations in this area.

The next step envisaged will be further deliveries within the allocation of insecticides, vehicles and spare parts, and complementary material for sprayers etc.

It has been agreed with the governments and WHO that a careful first evaluation of the present campaign will take place this winter, and it is hoped that the conclusions drawn will be available for the next Board meeting so that decisions as to the future of the programme can be made.

#### NUTRITION

With regard to the nutrition programmes in French Equatorial Africa and the Belgian Congo, the difficulties encountered have already been referred to in the Executive Director's Progress Report. In spite of these difficulties, however, there has been very hopeful progress reported from the Belgian Congo. A report from the voluntary organization FOREAMI (Fonds de la Reine Elisabeth pour l'aide Medicale aux Meres et Enfants Indigenes) indicates that the results achieved in the two provinces of the Belgian Congo are very satisfactory. There has been a net increase in heights and weights of children who have been benefiting from UNICEF aid over a sufficiently long period, and increases of some 5% have been reported in hemaglobulin content. Fairly quick cures have been made in light and medium cases of "kwashiorkor", and the preventive value of this campaign has been demonstrated by the almost complete absence of new cases.

/It was

It was enlightening to learn from authorities of the Fonds Reine Elizabeth of the great efforts they have made in the fields of organization, finance and personnel. Distribution of milk to the villages has been extremely well organized so that reconstitution of milk can take place in the individual villages themselves. As a result, the distances mothers and children are required to travel to get their daily milk are cut to a minimum. The Belgian Government plans to do everything possible to facilitate the continuation of this programme since it has given such satisfactory results.

Initial difficulties were encountered with pilot projects in French Equatorial Africa, however, this campaign has now been reorganized to meet the needs of the pre-school and school age groups more directly. The reorganization has also effected better distribution through the existing networks of schools, hospitals, dispensaries etc.

An evaluation of this programme will be undertaken by FAO, WHO and UNICEF in early 1954, and it is hoped that the conclusions drawn will be available to the Board for its next meeting. UNICEF has entered into this campaign on a large scale, and naturally risks are involved in this experimental stage. It is hoped, however, that useful lessons will be learned from this first phase, and it will be interesting to have the views of the Government as to the future of these campaigns in their territories.

#### TRACHOMA

Very encouraging reports have been received from Morocco, and these have been confirmed from observations made by a representative of the UNICEF Regional Office. An extremely promising start has been made in the initial experimental area chosen, and the efforts made by the Government and local authorities to ensure the success of this programme have been very impressive.

/Various

Various methods of treatment are being tried out in order to determine the most effective means of treatment that can be used in the future by the population themselves, without undue cost to the health authorities. It is hoped that the first reports on these campaigns will be available for the next session of the Joint Health Policy Committee, and that the experience gained in Morocco will be extremely useful in the whole field of trachoma control in the Mediterranean area.

Certain financial difficulties have been encountered in Tunisia, but a start is expected to be made on this programme early next year.

#### NIGERIA

A considerable amount of time has been spent by the staff of UNICEF in working out plans for the malaria, yaws and leprosy programmes approved for Nigeria at the last Board meeting, but Government negotiations have been difficult because of the constitutional changes in progress in that country. Contacts had to be made with the Central and the three Regional authorities concerned in the various parts of the country, however, agreement has now been reached and preparations are going ahead, and it is hoped that field work will start early next year.

#### EAST AFRICA

In March and April of this year the first joint visit by WHO and UNICEF was undertaken to Central and East Africa to make contact with the authorities, to examine the needs of children in the area and to explain the assistance UNICEF and WHO may eventually be called upon to give in this field.

The reports resulting from this visit indicate that the governments in the area are showing great interest in future collaboration with UNICEF, and in this connection certain points were stressed. The governments feel that the obligations with regard to matching should be scaled in relation to the economic strength of the respective countries since, for example, there are very great differences between

/areas

areas such as Nyasaland (which is a poor agricultural country) and Rhodesia (which is rich in mineral resources). The wish has also been expressed that the procedure for approaching UNICEF and WHO be simplified.

Governments in these areas are still reluctant to enter into mass campaigns which they do not believe to be suitable for such sparsely populated areas, and they feel also that such campaigns are too expensive. Preference is given to enlisting cooperation in the expansion of rural health organizations and, in the first phase, to the training of personnel and auxiliaries. Because of the extreme shortage of properly trained personnel a high priority is given to the establishment of teaching institutions. The necessity of education for the population in the acceptance of such health measures was also stressed.

This first visit was extremely fruitful and a number of expressions of interest have resulted from territories in Central and East Africa. Priorities were in general given as those listed above, although in one case an interest was expressed in the control of seasonal malaria.

#### FUTURE TRENDS

UNICEF cooperation will continue to be required in assisting governments in dealing with mass disease such as malaria. Here it is expected we will be asked to help and expand programmes already in progress, to evaluate such programmes and to help in the development of a new pilot project, or larger campaigns in areas where present techniques of malaria control and organization may need to be revised in the light of the special local conditions. We may also be asked to provide further assistance for yaws control, and we hope that WHO and UNICEF experience in this field in other areas might be discussed with the interested governments in Africa.

### Tuberculosis

Another problem which is increasingly requiring the attention of health authorities is tuberculosis. In order to examine this problem more closely WHO has agreed to make two senior staff members from the Tuberculosis Section available for extensive visits to West, Central and East Africa before the end of 1953. They will also be available to Governments in French West Africa and the Cameroons who have started experiments in this field, so that they may assist in the evaluation of results already obtained.

### Leprosy

The Board at its last meeting approved the first UNICEF leprosy programme. It is expected that UNICEF will be called upon to cooperate in the presentation of further requests in this field in Africa.

### Maternal and Child Health

As a result of the visits already made to East Africa there has been a marked increase in the desire of governments to take advantage of UNICEF assistance, and the technical experience of WHO, in the field of maternal and child welfare. The priorities governments envisage are:

1. training of personnel
2. expansion of services etc., where equipment and expendables will be required.

Such programmes would be on a permanent basis, and would, therefore, be extended to the rural areas of the countries concerned.

It will be necessary for careful preparations to be made in order to establish an effective means of reaching the rural populations and enlisting their collaboration, and such plans will require intensive study before we can expect any large scale programmes to be submitted.

/Nutrition

### Nutrition

As indicated in the Executive Director's Progress Report, we do not envisage at the present time any mass campaigns of this nature until campaigns in progress have been adequately evaluated. It is believed, however, that UNICEF should encourage assistance to smaller pilot projects where reasonable chances of success, control and evaluation exist, and where there is a possibility of wider application. Another important field of interest for UNICEF will be that of encouraging production of local foods. We have received general expressions of interest in this field and a request has been received from the Nigerian Government to examine the possibility of drying buttermilk, which is at present being wasted. In Uganda experiments are being carried out in vegetable production in the form of sunflower powder to be added to local food, and the present project in Indonesia to produce milk out of soybeans will also be of great interest in Africa. We believe it would be helpful to acquaint governments and their research institutions of the interest in, and the emphasis being given by the Board to problems of nutrition.

### POLICY CONSIDERATIONS

As was explained at the last Board meeting, UNICEF has come into contact with the major territories of Africa towards the end of a very important development period. As the Executive Director's Progress Report indicates very little international aid has been directed towards the development of African territories in the past. On the other hand, metropolitan governments have, since 1946, made sizeable funds available for ten year programmes aimed at the development of economic resources and the raising of living standards in Africa. Such action has been taken by the Belgian, French, British and Portuguese governments. Plans have already been worked out and funds earmarked in budgets for these development projects for which territories plan to assume financial responsibility and control within the next few years. Territorial resources will be severely taxed by the assumption

/of these



of these responsibilities, and the outlook for the raising of additional revenue has not been encouraged by falling raw material prices, which form the main source of income for these territories.

UNICEF and other UN agencies are still quite a new venture in Africa, and have not yet proved their worth to governments. Long before the appearance of UN organizations in Africa these governments had been engaged in extensive research activities in fields in which UNICEF is operating, and as a result they prefer to await the results of their own research before they seek UN cooperation. A further problem is that governments are apprehensive of the cost of joint campaigns of a mass character against single diseases for the protection of such sparsely populated areas, where communications are bad and trained personnel at a premium.

In order to formulate our own position we believe it is entirely up to the governments to decide if they wish to take advantage of the assistance of UNICEF and the UN agencies. It is also up to them to decide the rate of work, and the priorities to be given to problems of health and related fields. UNICEF should take the responsibility of approaching governments directly, where necessary, in conjunction with FAO and WHO in order to explain the possibilities of assistance and the means of associating our aid with their own development programmes.

Furthermore, we should not reject the idea of encouraging smaller programmes at the beginning of joint ventures, the only qualification being that we could not assist pilot projects which have a purely research purpose. We should be interested in pilot work which is designed to develop the most appropriate methods and techniques in certain fields, with the understanding that results will be evaluated with a view to implementation in an expanded programme, such expansion to take place phase by phase. Governments are very anxious to try small programmes, not only to test their effectiveness, but also to determine the cost factors involved. The

two new recommendations before the Board are typical of this approach, although they present a certain difference in application from policies in other areas.

There are many fields in which UNICEF participation is being favourably considered, and if we take account of the problems of governments, adapt our approach accordingly and allow for gradual expansion of our projects, then we can expect to make a very real contribution to the improvement of child welfare in Africa. We believe the hopeful start on mass campaigns to fight malaria, yaws and leprosy, and the success which we expect to have, will prove more convincing than anything we can say in helping governments to assess the value of our participation in programmes for the improvement of the welfare of African children.

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