



CF Item = Barcode Top - Note at Bottom =
CF_Item_One_BC5-Top-Sign

Page 145
Date 2003-Nov-04
Time 3:44:10 PM
Login ask



CF-RAD-USAA-DB01-2000-06662

Ill Document Register Number [auto] **CF-RAD-USAA-DB01-2000-06662**

ExRef: Document Series / Year / Number **E/ICEF/1953/242 (PDF-Eng)**

Doc Item Record Title

C.A. Egger - Statement to Executive Board (Eastern Mediterranean)

Date Created / On Doc
1953-Sep-16

Date Registered
1997-Jan-01

Date Closed / Superseeded

Primary Contact
Owner Location **Office of the Secretary, Executive Bo = 3024**
Home Location **Office of the Secretary, Executive Bo = 3024**
Current Location **Record & Archive Manage Related Functions=80669443**

1: In Out Internal, Rec or Conv Copy?
Fd2: Language, Orig Pub Dist **English , L.Avail: E,F ; L.Orig: E-?**
Fd3: Doc Type or Format

Container File Folder Record
Container Record (Title)

Nu1: Number of pages
0

Nu2: Doc Year
1953

Nu3: Doc Number
242

Full GCG File Plan Code

Da1: Date Published
1953-Sep-16

Da2: Date Received

Da3: Date Distributed

Priority

If Doc Series?: **CF/RA/DS/USAA/DB01/2001-0024**

Record Type **A04 Doc Item: E/ICEF 1946 to 1997 Ex Bd**

DOS File Name

Electronic Details

No Document

Alt Bar code = RAMP-TRIM Record Numb : **CF-RAD-USAA-DB01-2000-06662**

Notes

Document Format Series/Year/SubSeries/Number/Rev: E/ICEF/1953/242; Doc
Series/SubSeries/Year/Number/Rev: E/ICEF/1953/242
Doc Series: E/ICEF; Series Valid date on import: 01-Jan-1946; Doc Year: 1953; Doc Number: 0242; Doc

Print Name of Person Submit Images

Signature of Person Submit

Number of images
without cover

R. Tooker

R. Tooker

9

UNITED NATIONS
ECONOMIC
AND
SOCIAL COUNCIL



GENERAL

E/ICEF/242
16 September 1953

ORIGINAL: ENGLISH



UNITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND

Executive Board

UNICEF AID TO THE EASTERN MEDITERRANEAN AREA;
STATEMENT TO THE UNICEF EXECUTIVE BOARD ON 9TH SEPTEMBER
1953; BY CHARLES A. EGGER, DIRECTOR, UNICEF REGIONAL
OFFICE FOR AFRICA, EASTERN MEDITERRANEAN AND EUROPE

1. An overall analysis of our work in the Eastern Mediterranean area was given to the Board at its last session, and I am now able to present a broader picture of our work as a result of a recent two months visit I made to that area. I visited a number of countries to follow up on our programmes, and in particular on the work of our mass campaigns and our first projects in the field of maternal and child health.

BCG

2. Here I would limit my comments to the two campaigns in Iran and Iraq, both of which we followed in some detail. The programmes in the other countries in the area are referred to in the Executive Director's Progress Report. The campaigns in Iraq and Iran are about half-way to their original targets.

Iraq

3. This campaign is a very good example of what a mass campaign should be, both in its preparation and implementation, and more especially in the plans that are being made for its integration into the permanent health services of the country. It was particularly remarkable to see the excellent relationship between the national elements and the international advisory staff. Here the responsibility for the direction of the campaign lay with the national team leader, and the international adviser was

/limited

limited to, and concentrated on, his advisory functions. At the BCG centre in Baghdad we were received by the Iraqi director in charge who outlined for us the progress of the campaign and the functions of the centre. It is not insignificant to mention here that the Iraqi doctor in charge of the campaign worked in the same room with the international advisor, and occupied the main desk as an external sign of his responsibilities and position. The international advisor was formerly the national counterpart in Malta and has put his experience there to good use.

4. The Iraq campaign has, since its early stages, placed great emphasis on training, not only in the customary sense of training matching teams, but also in extending training schemes to all kinds of health services which will in the future be called upon to participate in anti-tuberculosis work i.e., school health services, provincial health authorities, TB dispensaries etc.

5. The international advisor helped the government to prepare national legislation to cover TB work in Iraq, and on the basis of this legislation, a five year programme has already been submitted to Parliament for both preventive and curative TB work.

6. A permanent Tuberculosis Department is envisaged within the Ministry of Health, and the BCG and TB centre will act as a practical demonstration centre primarily for training. Small TB centres are planned for every province with a TB advisor and dispensary, and wherever possible measures will be taken for the control and treatment of TB in villages in relation with the expansion of the rural health organization. A system of identification of TB cases is already planned and examinations in schools, offices etc., is in progress. Iraq has introduced compulsory BCG vaccination, and is the first country to do so in this area.

7. While at present our mass campaign is progressing satisfactorily, the long-term measures that have been prepared for the introduction of TB control work are

/an example

an example of how mass campaigns should gradually be integrated into the permanent health structure of a country. The Iraqi health authorities, as well as the international advisory team, deserve full recognition, and in this connexion it is perhaps significant that the Minister of Health was himself the first national counterpart in the early stages of the campaign.

Iran

8. From a purely operative point of view the mass campaign has been developing satisfactorily, however, a disturbing factor has been the rather high percentage of nonreactors. In the light of this fact it is felt that a close study of the future of this campaign should be undertaken before the government and UNICEF are advised to proceed any further. The campaign has been very strongly supported by the Government, but its effects require close analysis, possibly with the assistance of the TB Research Office in Copenhagen. In order to assist governments in developing plans on a broader scale through 1954 and 1955 it is hoped to present proposals to the Board covering the campaigns in Iraq and Iran, and also the campaign in Ethiopia which started last spring.

MALARIA

9. Syria, Lebanon and Iraq, with the assistance of WHO, have embarked on pilot projects to establish a scientific basis for appropriate malaria control measures in those countries. These projects will be the starting point of a much broader attack on this disease. Good progress has been made on all these projects, and the first targets have been reached; however, the time has come for analysis of the first demonstration work in order to ascertain how the results can be applied in the future, and how the work can be developed and integrated into national plans.

10. It is anticipated that Dr. Pampana, the Head of the Malaria Section of WHO in Geneva, will in the near future visit the Eastern Mediterranean area in order to help UNICEF and the governments to appraise the work that has already been done.

/It is

It is hoped as a result that recommendations for assistance in the next stages of malaria control in this area will be available to the Board at its next session.

Maternal and Child Health

11. The words of the WHO representative in presenting the evaluation report to the Board as to the emphasis and importance of this programme in the Eastern Mediterranean area, might almost be applied word for word in relation to the two demonstration and training centres which WHO and UNICEF assisted in Damascus and Beirut.

12. Discussions were held with the Government and international advisers concerning the experience of the centres in Damascus and Beirut over the last six months. Both projects had a very laborious start, but the international advisers and national counterparts have done pioneer work in this field and deserve every praise and support. Maternal and child health work with its emphasis on the preventive aspect is entirely new to the population, and the mothers cannot see why they should bring their healthy baby to the centre, pregnant women cannot see why they should visit a doctor before the delivery and they find it difficult to understand if they bring a sick child to the centre why they should be sent to a clinic or hospital. Much educational work needs to be done, not only in training matching personnel, but also in educating the mothers who attend the centres. Even the representatives of the medical profession and the government need briefing on the functions and aims of such demonstration and training centres.

13. The lack of immediate success by the centres has not inspired governmentsto keep commitments or to accept new ones. Whilst these centres have gone through a difficult period, in all fairness it must be said that some positive results have

/bcen

been achieved. The first training course held for maternal and child health personnel in the provinces was a success and will be repeated, and the normal activity of the centres is gradually being developed and attendance figures show a slow but steady increase. Great efforts have been made in the organization of milk distribution in centres, and it is interesting to note how this very direct activity has assisted centres in attracting mothers and impressing on them the usefulness of the centres. After the initial period is over it is essential that the scope of these projects be widened and real plans for development be worked out in detail. Budgets must be increased, and centres built and reserved to allow for gradual extension into the rural areas in relation to the numbers and quality of staff now being trained at professional and auxiliary levels. So far centres have not been able to give sufficient attention to their function in connexion with the normal training of nurses, health visitors, midwives etc. As important as the training of auxiliaries is the utilization of the facilities of such centres for emphasizing to the regularly trained nurses, midwives and health visitors the importance of maternal and child health work.

14. Relationships with the voluntary agencies must be developed, for they represent a potential source for local participation and interest, and every effort should be directed towards a policy of mutual benefit, UNICEF on the one hand giving the benefit of its experience in the field of modern child welfare, and in return profiting by the support of the public which such agencies can foster.

15. As a last point, more emphasis in the training programmes of these centres should be given to nutrition. An encouraging start has been made in Syria in this direction, but nutritional education needs to be included in all programmes for staff training and attending mothers. In this connexion it is probable that the assistance of FAO will be even more important than it has been in the past.

/17. These

16. These two projects will require constant advice in their early stages from the WHO maternal and child health expert. The assistance that this expert has given in the development of the programmes in this field in the Eastern Mediterranean area has been invaluable.

17. As was reported in the Executive Director's Progress Report, distribution of milk and dietary supplements is going ahead in Egypt and Iran. In Iran conferences were held with the UNICEF Committee which is responsible for all our programmes in the country. The Government, the voluntary agencies and the Ministries are all represented on this Committee. The Committee is extremely anxious to assist in the development of UNICEF work in the country, and much effort has been directed towards the working out of suitable plans of distribution, provision of funds for transportation and warehousing of expendables. The majority of the funds for these programmes have come from the voluntary agencies and a promising start has been made in the distribution of milk and other diet supplements and medicaments in four Iranian cities.

18. In both countries careful evaluation by the Governments and WHO of maternal and child health programmes will be needed, and it is hoped that this will take place in the coming winter. Requests will be submitted to the Board for programmes which will extend aid given in this field and assist in the improvement of training and expansion of existing services.

19. It is hoped as a result of the Executive Board action on the JCHP report to support projects in at least one or two countries for environmental sanitation in relation to maternal and child health activities already being assisted.

NUTRITION

20. It was interesting to note during our travels in the Middle East the emphasis being given by doctors, governments and health personnel in general to needs in the field of nutrition. Not enough food is being produced, it is not the right type

for children, and its preparation does not meet the special requirements of children at their most vulnerable age. An additional factor is that parents are quite often unable to pay for the right types of food for their children. In Egypt, for example, these are all major problems because of the rapid population growth in that country. Food production in the whole Eastern Mediterranean area needs to be greatly increased.

21. There have been two recommendations for emergency programmes in the Eastern Mediterranean area, one for assistance to the Palestine refugees and the other for the border populations in Jordan.

22. In Iraq efforts have been made to introduce a supplementary school feeding programme into the country, and the Government is to be congratulated on the initial steps they have taken in this direction. Much difficulty has been experienced in setting up programmes of this type, and it is obvious that whilst it is easy to buy and ship milk, it is much more difficult for governments to provide matching food to ship supplies to schools and remote areas, to organize facilities for reconstitution and to supervise distribution of the milk to school children. We believe that encouragement should be given to the organization of even smaller programmes of this type in other countries. Milk is not unknown in the Eastern Mediterranean area, and the main difficulty has been simply a question of quality. Large scale distribution of milk to refugees has been an excellent demonstration to both governments and populations of the usefulness of milk as a supplementary food. Lebanon, Jordan, Libya and Syria have expressed interest in school feeding programmes.

MILK CONSERVATION

23. Apart from the distribution aspects of milk our main efforts have been concentrated on improvement of quality and methods of preservation. One of the main impressions gained from the various conversations held with governments in the Eastern Mediterranean area has been their particular interest in the milk conservation

/programme

programme. The governments of Iran, Egypt, Israel, Iraq and Turkey expressed special interest in this field of activity.

24. Governments are participating, probably for the first time in this area, in the improvement of the quality of a potentially major agricultural product, in taking over production, fixing prices for subsidized or free distribution in order to allow a substantial part of the product to go to children and mothers. UNICEF aid is not only required by governments in the development of the technical side of milk production, but in cooperation with FAO, it is needed to cover many fields including marketing and distribution. A considerable responsibility is being undertaken by international agencies when they are advising governments on such a variety of matters in connexion with their programmes such as milk quality, provision of water, sewage, electric energy and sanitation etc., and it will be necessary to draw on all possible sources of assistance from governments to bilateral and multilateral agencies in order to deal with all these problems in their organizational and preparatory stages.

5. It has been gratifying to see the interest taken by the Point Four missions, which, at the request of the governments in Iran and Iraq are contributing to the programmes assisted by UNICEF. This is only the beginning of a much wider development, and our plants must be considered primarily as demonstration and pilot projects. They will provide valuable experience for future steps that can already be envisaged in this field. There is plenty of milk available in the area as our experts have found from their visits, there are increasing demands for milk for children, and there is a growing realization on the part of farmers that development of this project holds out great possibilities for them. An example is in the request from Syria for a milk processing plant in Damascus, which was inspired, not so much by the example of other countries, but by the interest shown by consumers and producers in Syria itself.

/General

GENERAL

26. UNICEF-aided mass campaigns in the Eastern Mediterranean area are all in the operating stage and more emphasis needs to be given towards their gradual integration into existing country health services. Maternal and child health projects in the early stages require a considerable amount of nursing, evaluation and guidance, and at the same time we must use vision and boldness in foreseeing the next steps that need to be taken to bring programmes to full fruition. Our main emphasis at the present time must be on their implementation along established lines. Now that programmes are well in progress, it will be the rate of their development which will indicate what next steps will be necessary to ensure their continuation and expansion. At the same time these programmes will require fairly constant attention, and UNICEF will need to work closely with governments in preparing practical work and schedules, defining targets and planning with foresight for future development.

27. Here it would be well to acquaint the Board with what we believe to be a steadily growing feeling of appreciation and recognition on the part of governments and the general public of the value of UNICEF's work with WHO and FAO in their area. It has been interesting to note also the much more pronounced sense of responsibility that governments in this area are exhibiting in their efforts for the welfare of their peoples, and how the realization of the fact that the main resources lie within their own strength and possibilities will gradually facilitate our cooperation with them. Our aid is properly evaluated and less overestimated than was the case some years ago. There is more consciousness of the need to continue working along carefully planned lines, and to associate international aid with the general development plans in their country, and emphasis is being placed on considerations of overall priorities, rather than the special interests of ministries. This marked social consciousness I consider to be the best basis for future planning.
