



CF/RAD/USAA/DB01/1997-06075

Expanded Number **CF/RAD/USAA/DB01/1997-06075**

External ID **E/ICEF/1950/R.0054**

Title

Europe - MCW (Handicapped Children)

Date Created
5/30/1950

Date Registered
1/1/1997

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**

F12: Status Certain? **No**

F13: Record Copy? **No**

001: In, Out, Internal Rec or Rec Copy

Contained Records
Container

Date Published

Fd3: Doc Type - Format

Da1:Date First Published

Priority

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

Document Details **Record has no document attached.**

Notes

Document Format Series/Year/SubSeries/Number/Rev: E/ICEF/1950/R.0054; Doc Series/SubSeries/Year/Number/Rev: E/ICEF/R/1950/54

Doc Series: E/ICEF/R; Series Valid date on import: 01-Jan-1950; Doc Year: 1950; Doc Number: 0054; Doc Number Short: 54; Doc Revision #:

English, L Avail: E,F; L Orig: E-?

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

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UNITED NATIONS
ECONOMIC
AND
SOCIAL COUNCIL



RESTRICTED

E/ICEF/R.54
30 May 1950

ORIGINAL: ENGLISH

UNITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND

Programme Committee

RECOMMENDATIONS FOR AN ALLOCATION FOR MEDICAL SUPPLIES
AND ASSISTANCE TO HANDICAPPED CHILDREN
FOR EUROPEAN COUNTRIES

1. Five years after the end of the war governments in Europe are beginning to devote greater amounts of budgetary funds to the field of public health. The field of health care for mothers and children is receiving a special emphasis along with efforts to control such major disease problems as tuberculosis and venereal disease, the neglect of which during the war produced a situation threatening the well being of the child.
2. During the past year, UNICEF recipient countries in Europe have been presenting an increasing number of requests for medical supplies. Within the limited resources available, the Fund has been able to meet a few of the most urgent requests in accordance with general policies applicable to medical projects laid down by the Joint UNICEF/WHO Committee on Health Policy and with the technical approval of WHO.
3. The projects assisted by the Fund, which have been fully reported to the Board (E/ICEF/R.29 and E/ICEF/R.29Add. 1) have either already conferred positive benefits (BCG vaccination, streptomycin, penicillin therapy of syphilis in mothers and children, and malaria control) or in the case of a number of newer country programs have begun to operate recently (mobile dispensary services for children, TB diagnosis, premature baby care, and orthopedic treatment).

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/4. In some

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4. In some cases, additional funds are required for the completion of existing projects, and in the recommendations below only those programs which have been previously initiated with UNICEF assistance were considered for additional allocations at this time.

T.B. DIAGNOSTIC EQUIPMENT

5. Recognition has been given by the Board to the importance to Governments of following up positive cases after the BCG campaigns. These children who were not vaccinated, might be TB infected. Diagnosis of TB in children through bacteriological and x-ray examination and the provision of facilities for isolation, treatment and rehabilitation are the next steps required. UNICEF is already assisting considerably in this field. However, certain further assistance is being requested from UNICEF for the completion of existing projects in Bulgaria, Czechoslovakia and Poland (ie. films, some spare parts, mobile units, etc...).

MATERNAL AND CHILD HEALTH

6. Needs in the field of maternal and child health vary depending upon the state of organization, personnel and plans of the government. UNICEF has aided particularly in programs designed to expand networks of special maternal and child health centers, in mass immunization campaigns against childhood diseases, school health programs and modern care for premature babies. The Administration is recommending further limited assistance to Finland, Greece, Italy and Yugoslavia within present resources. If additional funds become available further recommendations for aid to these countries would be considered.

PENICILLIN

7. Evaluation of the anti-venereal disease campaigns have been made by WHO in a number of countries. The major campaigns in Poland and Yugoslavia have had particular success. In Poland, nearly 50,000 mothers and children have been

/treated with

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treated with penicillin through the end of 1949 as part of the national mass campaign against syphilis. In recognition of the efficiency of the methods developed in Poland, WHO, in cooperation with the Polish Government, will be conducting a regional anti-VD training center in Warsaw in 1950. In Yugoslavia, the anti VD campaign has been directed especially at endemic syphilis, the first modern mass attack on this problem. Nearly 300,000 persons were examined in the most infected areas in 1949 and 800,000 more will be examined in 1950. WHO has carefully evaluated the results achieved and has strongly recommended to UNICEF that its support be given to complete this operation. The Administration recommends that both the Polish and Yugoslav programs be aided at least until the end of 1950.

8. In the following sections, specific proposals are made for assistance to each country for anti-TB, maternal and child health or anti-VD projects. These projects have been favorably reviewed by WHO, which will continue to provide technical advice for detailed supply lists and plans of operation.

RECOMMENDATION FOR AN ALLOCATION TO ASSIST HANDICAPPED CHILDREN

9. In addition to this recommendation for provision of additional supplies to continue existing medical projects, the Administration strongly recommends to the Executive Board allocations to European countries for assistance to handicapped children. In this connection the Acting Assistant Secretary-General of the Department of Social Affairs has pointed out that it would be highly desirable for UNICEF to meet requests of Governments for supplies and equipment for dealing with handicapped children, within the framework of coordination arrangements developed by the Department of Social Affairs (Annex I). The proposals recommended below have been developed with the assistance of the child welfare consultant of the UN Department of Social Affairs assigned to the UNICEF Regional Office in Paris.

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10. Certain governments have already applied for assistance in the field of handicapped children and have used a part of their existing allocations for supplies for this purpose. Austria has submitted a request for a project to assist in rehabilitation of epileptic children and for improvement of child guidance centers, and is benefitting from a joint UNICEF/WHO demonstration of surgical treatment of children with congenital heart defects. Bulgaria has received from UNICEF medical supplies for improving the equipment of an orthopedic clinic in Sofia. France has used a portion of its allocation for supplies to improve its facilities for the treatment of child victims of poliomyelitis. The group training programs in France, Switzerland, Sweden, and the United Kingdom on the subject of social pediatrics have always included aspects of the problems of handicapped children in the training given to the participants.

11. Assistance to handicapped children has, however, had until recently not the first priority in the requests submitted to the Fund by European countries. In the first four years after the war, the governments have given first priority in their programs for care of children to supply basic food and clothing needs and to combatting major health problems involving the prevention of epidemics and treatment of the most serious and widespread disease problems.

12. Although the handicapped children have been included in the governments' programs for feedings, clothing, and health care, particular assistance for their rehabilitation and the aid which UNICEF could bring to this problem is now being given special attention. Statistics on the large numbers of children in Europe who were physically and mentally maimed by the war are very incomplete; however this reflects the fact that, up to now, social efforts to deal with it were inadequate.

13. The Administration was represented at a meeting held in Geneva on 27 January to 3 March 1950 of representatives of United Nations specialized agencies called

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by the Department of Social Affairs on the subject of rehabilitation of the physically handicapped, including the blind. Following this meeting, UNICEF Missions have discussed the matter of assistance for handicapped children with the various recipient governments, and a number of countries were visited by the Department of Social Affairs child welfare consultant stationed at UNICEF's European Headquarters.

14. Following these discussions the Administration has received from all the recipient countries in Europe new requests for assistance for handicapped children. These requests reveal the wide extent of the types of supplies needed for these government projects and they also show that governments are prepared to meet or are actually engaged in meeting, on a larger scale, the needs of handicapped children. The assistance required involves supplies for medical care, physical and occupational therapy, manufacture and fitting of prosthetic appliances, and educational and social rehabilitation for a special groups of handicapped children. Many of these requests also include training for personnel who would be conducting the programs in the various countries.

15. The Administration recommends that a total of \$160,000 be allocated to European countries as shown in Annex II for the specific purpose of providing assistance to handicapped children. Further discussion is necessary before drawing up final plans of operations on the various governmental applications. The Administration is actively working together with UN Department of Social Affairs, WHO, and UNESCO to ensure that their contributions of fellowship and advice will be coordinated with UNICEF aid which will be largely in the form of supplies. The allocations proposed are minimum figures when compared with the needs of handicapped children, but are sufficient in each case to make a significant contribution to a particular problem.

/16. Austria

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16. Austria. Projects for maternal and child health and tuberculosis control were recently approved by WHO and UNICEF and can be implemented out of existing unprogrammed balances. No further medical funds are requested at this time. An allocation of \$15,000 to expand assistance to mentally and physically handicapped children is recommended.

17. Bulgaria. Previous reports to the Executive Board have outlined the assistance UNICEF is giving to Bulgaria in its tuberculosis control program. UNICEF is providing x-ray units and a diagnosis laboratory. Only a part of the Bulgarian request could be met out of previous allocations. The Administration recommends a new allocation of \$60,000 to provide x-ray spare parts, films, additional laboratory supplies for an effective diagnostic program, and some equipment for mobile units.

18. Bulgaria has a tuberculosis death rate of over 160 per 100,000, which is one of the highest in Europe. Incidence is almost as high in rural as urban areas. The Government is conducting its own BCG campaign and has a comprehensive plan for diagnosis, and treatment of sick children.

19. UNICEF provision of surgical and therapeutic equipment to the Orthopedic Clinic in Sofia has been a valuable contribution to aiding handicapped children in Bulgaria. This center has received special support from the Government and in September will move to a new building at the University of Sofia. Personnel are being trained to staff sub-centers in other areas of the country.

20. The Administration recommends an allocation of \$20,000 for further assistance to the Sofia center. This will help in equipping a hospital for post paralysis treatment of poliomyelitis; a special operative hospital for physically deformed children; and in the educational and physical rehabilitation of these children.

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/21. Czechoslovakia.

21. Czechoslovakia. The anti-tuberculosis program of the Czechoslovakian Government includes BCG production and vaccination of the new-born, mass examination and diagnosis of tuberculosis in children, and expansion of treatment facilities. While the incidence of tuberculosis has declined from the high rate of 170 per 100,000 in 1942, the numbers of those infected, especially children, remain large.
22. UNICEF assisted in the BCG campaign in Czechoslovakia, provided equipment for local BCG production, and has sent x-ray parts and auxiliary apparatus, laboratory supplies, and streptomycin to this country.
23. The Government is establishing a National Anti-Tuberculosis Institute to organize and direct all anti-tuberculosis activities, with concentration on tuberculosis in children and young adults. The Institute will have its own buildings for clinics, laboratories, and BCG vaccination services, and will conduct training courses and direct social rehabilitation services. Czechoslovakia has the technical personnel to develop such a tuberculosis program, but requires international assistance for certain additional material supplies.
24. The Administration recommends that an allocation of \$80,000 be made to Czechoslovakia to provide additional x-ray units, laboratory supplies, films, and therapeutic equipment.
25. The Administration also recommends that \$15,000 be allocated to Czechoslovakia for assistance to handicapped children. Requests from Czechoslovakia cover therapeutic equipment for rehabilitation centers for physically handicapped children, supplies for mentally backward and deaf children, and equipment for treatment of child victims of poliomyelitis.

26. Finland. UNICEF assistance to Finland for maternal and child health covers mainly care for premature babies and training aids in this field, as well as certain other medical aspects of pregnancy and childbirth. Since the request of the Finnish Government for assistance was only partially met, the Administration recommends that an allocation of \$15,000 be made to Finland to implement other portions of the Government's program, as recommended by WHO. This allocation would provide supplies and equipment to assist the National Institute of Hygiene in the production of vaccines against diphtheria and whooping cough — diseases which are still serious in rural areas.
27. The Administration recommends also an allocation of \$10,000 to Finland for aid to handicapped children. The Government has submitted requests for possible assistance in founding a central examination and treatment institute for handicapped children, for aid to new institutions being set up for mentally defective children, and for medical supplies for treatment of physically handicapped children, including polio sufferers. Not all of these needs can be met, but the allocation would enable a real contribution to be made in at least one of these fields.
28. Greece. Although school services exist in Greece, there are large areas in which a child may not see a doctor from birth to death. The Government has requested UNICEF aid in setting up mobile units to move through such rural areas for providing medical services. Three such units could be placed in immediate operation and the Government is preparing personnel and will pay for local expenses.
29. The Administration recommends an allocation of \$15,000 to Greece to provide these units. WHO has already approved this project.

/30. Greece is....

30. Greece is one of the European countries with the most serious problems in regard to handicapped children, particularly physically handicapped, because of the long period of war, occupation, and civil strife. With the advice of the Department of Social Affairs child welfare consultant stationed at EHQ, a most comprehensive program, including supplies, local and international training, has been submitted by the Government to UNICEF and the specialized agencies. Priority is given to rehabilitation of crippled children, to the deaf, dumb, and blind, to mentally defective children, and to children disabled by disease (leprosy and tuberculosis).

31. The Administration recommends that an allocation of \$25,000 be made to Greece for assistance in connection with this program.

32. Italy. In Southern Italy, one of the most serious child diseases is trachoma, which is generally debilitating and often results in blindness. Twenty-six provinces on the mainland are involved, as well as Sicily and Sardinia, where the endemic is particularly marked. The overall incidence is 3.6 per cent, and, in some areas, almost 20 per cent of all children are infected. The war disrupted the control system, but by 1949 there were set up or re-established 440 anti-trachoma dispensaries and 37 surgical centers, with an additional 76 dispensaries and 16 surgical centers under construction. Special summer colonies for trachomatic school children have been organized.

33. The Administration recommends that an initial allocation of \$35,000 be made to Italy for assistance with supplies and equipment in a mass attack on trachoma.

/34. Handicapped children....

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34. Handicapped children in Italy constitute a large group of seriously afflicted children whose numbers were greatly increased as an effect of the war. Although the Government has not yet made a formal request to the Fund for assistance, great interest has been expressed in the possibility that UNICEF could provide some assistance in this field.

35. The UNICEF Mission has consulted with Government representatives and representatives of the leading Italian voluntary organizations interested in the problem. The needs are very great, since no particular assistance program has provided for the special needs of handicapped children. It was indicated that, in addition to material assistance, special stress will have to be given to training of personnel in modern methods. Furthermore, although there are some excellent treatment facilities, these are limited in scope and location.

36. The Administration recommends that an allocation of \$25,000 be made to Italy for assistance to handicapped children. The Administration will endeavor to work out with the Government a plan of operations which will take into full consideration the comments above.

37. Poland. To round out the assistance which the Fund has already given to Poland for tuberculosis diagnostic work, the Government has requested supplies of x-ray film, some laboratory equipment for diagnosis, and some spare parts.

38. In the field of maternal and child health, the Administration recommends an allocation for supplies to complete the equipping of the National Institute of Mother and Child, vaccine production laboratories, and mobile rural dispensaries.

39. To carry on the anti-VD program to the end of 1950, the Administration recommends an allocation which would provide 14,000 vials of penicillin.

/40. The total.....

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40. The total allocation recommended to Poland for these medical supplies is \$80,000.

41. Following the visit to Poland of Dr. Rusk, consultant for the Department of Social Affairs, the Polish Government requested the U.N. Department of Social Affairs for assistance in the Government's program for care of the handicapped. Poland, like Italy and Greece, has a very large number of physically handicapped children. The needs for international assistance were set forth by the Government in the fields of rehabilitation and occupational therapy and medical equipment for treatment of crippled children.

42. The Department of Social Affairs is assisting, to the limit of its available funds, in meeting some of the requests for aid to adults. UNICEF has been asked by the Department of Social Affairs to consider the requests for aid to children. UNESCO has expressed its interest in those phases of rehabilitation concerning education and vocational therapy. WHO has already trained teams of specialist personnel to further the work for handicapped children.

43. The Administration recommends that an allocation of \$25,000 be made to Poland to provide supplies for aid to handicapped children.

44. Yugoslavia. The endemic syphilis campaign in Yugoslavia will continue throughout 1950 and 1951. It will be recalled that, when the original request from Yugoslavia was received, WHO had approved the entire program, but the Fund was only able to provide for one-half of the needs for international assistance (E/ICEF/86, paragraph 8). Subsequently, an additional apportionment was made to Yugoslavia out of the special anti-VD allocation to continue the supplies for a further period.

/45. This operation..

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45. This operation has been very successful and, as a result of experience gained, the perspective is that, by continuing the work through 1951, the entire problem of endemic syphilis can be met. WHO has endorsed continuation of this campaign.

46. In order to carry on this campaign throughout 1950, a total of 115,000 vials of penicillin will be required. The existing allocation would provide for only 70,000 vials. The Administration recommends that, at this time, an allocation of \$50,000 be made to Yugoslavia to provide the balance of 45,000 vials of penicillin needed for 1950.

47. UNICEF is providing to Yugoslavia certain basic supplies to expand the work of the Institute of Hygiene in Belgrade and Zagreb in the production of vaccines and sera for mass immunization of children. Deaths from communicable diseases that could be prevented by vaccination are still an important element of child mortality rates. To complete the supplies and equipment needed for these projects, further supplies are required.

48. The Administration recommends that an allocation of \$30,000 to provide the major part of these supplies be made to Yugoslavia.

49. Yugoslavia has presented a preliminary request for aid in a comprehensive program for handicapped children. While the efforts of the Government have resulted in some progress in this field, there is a shortage of equipment for physically handicapped children and particularly specialized equipment for testing, treating, and rehabilitating the blind, deaf, and mentally defective children. Yugoslavia ranks with Italy, Greece, and Poland in the seriousness of this problem.

50. The Administration recommends that an allocation of \$25,000 be made to Yugoslavia for assistance to handicapped children.

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/51. Conclusion...

51. Conclusion. The Administration would emphasize two general observations in connection with the various allocations recommended:

- a) The matching of governments for medical types of programs far exceeds the value of the supplies provided by UNICEF. However, UNICEF aid has been a great stimulus in assisting governments to devote larger resources to health care of children.
- b) It is estimated that requests presented from European governments total actually nearly \$2,500,000 for assistance in medical supplies that cannot be undertaken. The total of \$365,000 (excluding handicapped children) recommended by the Administration is based on the desire to complete projects the Fund has supported and that are already well developed and operating.

52. It is recommended that the sum of \$525,000 be allocated to European medical programme as described above and shown in summary in Annex II.

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UNITED NATIONS
Lake Success, N. Y.

SOA 15/03(1)/CHA

13 May 1950

Dear Mr. Heyward:

In reply to your letter of 5 May 1950, we are most anxious that the United Nations International Children's Emergency Fund give favourable consideration to Government requests for assistance in their programmes for handicapped children.

As you know, under the terms of Resolution 58(I), we endeavor to meet the requests of Governments for advisory social welfare services that include, in certain instances, special equipment and tools for demonstration and training purposes. Our funds for this particular phase of our programme are very limited, and we have never been able to go beyond the terms of the resolution and meet Government requirements for supplies and equipment for production or distribution purposes. It is therefore highly desirable and satisfying that UNICEF is in a position to meet requests of Governments for supplies and equipment for dealing with handicapped children, within the framework of the co-ordination arrangements developed by the Department of Social Affairs.

Yours sincerely,

/s/

Alve Myrdal
Acting Assistant Secretary-General
Department of Social Affairs

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ANNEX IIPROPOSED ALLOCATIONS
FOR MEDICAL SUPPLIES AND ASSISTANCE
TO HANDICAPPED CHILDREN

(in thousands)

Country	Description of Programme	Medical Supplies	Aid to Handicapped Children	Total
		\$	\$	\$
Austria			15	15
Bulgaria	Anti-tuberculosis Handicapped children	60	20	80
Czechoslovakia,	Tuberculosis Institute Handicapped children	80	15	95
Finland	Mother and Child Health Handicapped children	15	10	25
Greece	Mobile Clinics Handicapped children	15	25	40
Italy	Anti-Trachoma Handicapped children	35	25	60
Poland	Anti-venereal disease) Anti-tuberculosis) (laboratory supplies,) film, etc.) Handicapped children	80	25	105
Yugoslavia	Anti-venereal disease Vaccine production, etc. Handicapped children	50 30	25	105
TOTAL		\$365	\$160	\$525

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