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social problems through self-help activities in a country with a low GNP per inhabitant (approximately \$80). In cities priority in admission to the day-care centres is given to children of low-income families. If a day-care centre is located in a factory, the management becomes involved in supporting it. Staff at the centres often begin as volunteers, and selection is on a basis of a person's ability to relate to children. The Directorate of Social Welfare teaches a basic training course for the teachers lasting for 15 days. Lectures by experienced government day-care centre personnel, and local health personnel are given on (a) child development, (b) health methods dealing with children's diseases and prevention, nutrition, hygiene, and food preparation for children, (c) method courses in story telling, songs and poems, handwork, play, and (d) lessons on administrative techniques.^{96/}

218. Example of Cuba. In Cuba, a country with a much higher level of GNP (approximately \$530 per inhabitant) the policy since 1961 has been to extend crèches and day-care centres (circuitos infantiles). This began under the auspices of the Federation of Cuban Women, and there is now a national department of day care and crèches in the Instituto de la Infancia. In Havana about 10 per cent of the children aged between 45 days and six years attend day-care centres, and by 1975 it is hoped to have places for 20 per cent. One hundred and fifty children is a typical capacity for one centre. They are looked after in the following age groups: 45 days to 14 months (lactantes); 14 months to two years (parvulitos); two to three years (párvulos); and pre-school, four to six years (pre-escolares). There is a liberal

^{96/} Burma country case study.

staffing of attendants, including a full-time nurse, and cook. The centres are visited by a paediatrician twice a week.^{97/}

Formal pre-primary education

219. While day care, when it graduates from being only custodial, has many important educational aspects, "pre-primary education" is a specific programme of instruction for a few hours per day in preparing the child to be admitted to, and to function well, in the primary school. Such programmes exist in a number of industrialized and some developing countries, though always on a small scale in relation to the age group (four to six years).

220. Evaluations of pre-primary education in industrialized countries show that there is an immediate advantage in cognitive functioning, which fades away after three years in many cases. Pre-primary education appears to have the greatest long-range effectiveness when it is linked with primary education and when the mother is directly involved in the learning process. There is little evidence that such programmes have lasting value when these conditions are not met. The few evaluations made in developing countries indicate similarly disappointing results.

221. Nevertheless, in a number of developing countries there is an increasing demand for pre-primary education. The reasons vary greatly. For many parents early education is believed to be necessary for subsequent primary school performance. Other families use pre-primary education as a means of improving the chance that their child be admitted to primary school. Still other families use it as

^{97/} Extracted from information submitted to the Executive Board in 1973, E/ICEF/P/L.1576/Add.3.

a substitute for primary school when their child is not admitted to school. These varying motives place great stress upon teaching the child to read, write and to learn some simple arithmetic. The subjects are primarily taught by rote learning, which many educators think is harmful to subsequent learning.

222. The cost per child for pre-primary education is usually much higher than the cost spent per pupil in primary school. For one thing, the classes need to be smaller. Hence it is difficult for a country that does not have all its children in primary school to provide pre-primary education from public resources. A prior step would be to lower the effective age of entry to primary school - often well above the official six or seven years. Formal pre-primary education is usually paid for by parents' fees. As we have seen, it sometimes develops because of an insufficiency of primary schools provided by the State, but this is not really a suitable response to that problem.

223. Industrialized countries are exploring the possibilities of reaching the objectives of pre-primary education by other means. Two such possibilities are briefly described in the following paragraphs. We have no information that they are at present being tried in developing countries, but they could be of interest because they depend on helping either the mother, or older siblings, to develop young children.

224. Helping mothers (verbal interaction). Through her daily care, play and speech, the mother is teaching the child about his environment and simultaneously encouraging intellectual functioning and motor development. Recent studies have demonstrated that the mother's conversation and behaviour with her child can be enhanced in a simple manner to have significant benefits for the cognitive development of

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the child. Through a series of programmed lessons the mother learns a more effective way of stimulating her child's curiosity, creativeness, motivation for learning, perception, and sensory motor abilities through the way she talks and plays with her child. Such stimulation programmes appear to be more effective and less costly than pre-primary education.^{98/}

225. Several curricula have been developed in which a home visitor demonstrates to the mother how to interact with her child by using selected objects. The mother practices this lesson with the child for about 20 - 30 minutes daily for one or two weeks until the home visitor presents the next programmed lesson. This may continue for half a year or longer, depending upon the mother and the total family situation. It would also be possible for an instructor to demonstrate techniques in play, verbal communication, and child interaction to groups of mothers at a health centre or women's club thereby increasing the number of participants, and this could be within the budgetary possibilities of developing countries.

226. Using older children (cross-age learning). Older children have been used to teach younger children for many years. This has now been formalized into a cross-age learning curriculum in which older children can teach the young child. Primary and middle-school children are taught by their teacher how to interact verbally with younger, pre-school children by using the curriculum developed for the verbal

^{98/} Model Programs: Compensatory Education: Mother-Child Home Programme, Freeport (Washington D.C., United States Department of Health, Education and Welfare, Publication No. (CE)72-84, 1972); Lois-ellin Datta, Parent Involvement in Early Childhood Education: A Perspective from the United States (Paris, Organization for Economic Co-operation and Development (OECD), 1973); Norma K. Howard, Mother-Child Home Learning Programs: An Abstract Bibliography (Urbana, III, Eric Clearing House on Early Childhood Education (Eric/ECE), April 1973).
/...

interaction programme described above. The school child works with his younger sibling, relatives, or neighbouring children. By spending about 30 - 40 minutes per day with these young children he will be able to teach them how to play with objects and how to communicate their thoughts. One child can generally teach two or three younger children. The older child learns how to interact with the young child and thus will be a better parent.^{99/}

Handicapped children

227. Many of the services discussed above include actions which help prevent handicaps in young children:

- | | |
|---|--|
| (a) Prevention of Physical and mental retardation | Health services; food and nutrition programmes; water supply; health education; teaching of personal hygiene; |
| (b) Reduction of emotional difficulties | Support of child-rearing in the family; parent education; |
| (c) Prevention of accidents | Home improvements including especially those relating to the cooking fire; |
| (d) Prevention of blindness | In areas affected by conjunctivitis and trachoma, distribution of antibiotic ointment; education;

In areas affected by vitamin A deficiency administration every six months of large doses of vitamin A;

In areas affected by "river blindness" (onchocerciasis), spraying and clearing river courses, now being assisted by the World Bank; |

^{99/} P. Lippitt, R. Lippitt and J. Eiseman, The Cross Age Helping Program (Ann Arbor Institute of Social Research, University of Michigan, 1965).

- | | |
|--|-----------------------------|
| (e) Prevention of measles
and polio | Immunizations; |
| (f) Prevention of other
crippling due to disease
(yaws, leprosy) | Case finding and treatment. |

228. Rehabilitation of handicapped children is much more difficult to deal with within the limits of people and resources available. In many countries, it seems possible to recommend only that there should be a centre for training and for finding and promoting simple and economical methods of rehabilitation adapted to local conditions. For many, simple prosthesis can be made. From the age of three on, it becomes important to deal with polio or orthopedic handicaps, and the deaf or blind respond better to education if it begins about the age of two. Rehabilitation in developing countries is a field in which experience is limited. Non-governmental organizations with a special interest in the handicapped can provide valuable advice and assistance.

Rural - urban differences

229. Most of the preceding sections have taken the village as the point of departure; in slums and shanty towns there are some differences in the priority of needs and in the possibilities of service. Water supply, sewerage and electricity need to be provided by technically more elaborate services. Mothers who come in from rural areas are in particular need of orientation and consumer education to help them cope with the urban environment. Separated from the extended family, working mothers need day-care services for their children. It becomes necessary to provide safe play areas for children. The density of urban population makes it easier in some

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respects to provide maternal and child health services, and referral hospitals will be within reach. It is more difficult to encourage family food production, but not impossible to provide garden allotments. The many shanty towns and squatter settlements that are in the course of improving themselves usually have strong resources of community organization that can help in the improvement of services benefiting children.^{100/}

Other government responsibilities

Manpower planning and training

230. National planning generally includes manpower requirements and the necessary training to develop this manpower. Similarly, a national manpower plan is needed for all services to mothers and children. Based upon each plan, a national training plan can be formulated for all levels of personnel. This is the subject of a report prepared for the Board by the International Children's Centre on "Training of personnel for services for young children (from birth to school age)", circulated as an addendum to the present paper. If a number of common difficulties in training programmes are to be avoided, the training of personnel should be adapted to the country's form of organization of services - the number of posts, the proportion of professional and auxiliary, the location of posts as between urban and rural, and the consequent area of recruitment of personnel and selection of training sites.

^{100/} For a further discussion see "Children and adolescents in slums and shanty-towns", op. cit.

231. The nature of child development and of a young child policy make some aspects of a training programme particularly important, such as:

- (a) Orientation training about children's needs, in addition to their professional training, for all who are connected with services reaching into rural areas and shanty towns;
- (b) Training for working as a team with supporting services;
- (c) Training of polyvalent workers at the local level;
- (d) Frequent refresher training;
- (e) Selection of people from the local level who want and are able to work with children or with families and the community; and
- (f) Training and orientation of local leadership and voluntary agency staff.^{101/}

These aspects have a bearing on UNICEF assistance policy, treated in chapter IV.^{102/}

Use of communication media

232. This study stresses the need to reach out to families in the developing countries with information concerning the health and development of young children. Much of this can only be done by the

^{101/} The training of local women as potential leaders was discussed in a report submitted to the Executive Board in 1970, "Assessment of projects for the education and training of women and girls for family and community life" (E/ICEF/Misc.169).

^{102/} The technical agencies of the United Nations publish manuals on training, such as: A Handbook of Training for Family and Child Welfare, Department of Economic and Social Affairs (United Nations Publication (Sales No. E.69.IV.1)); The Use and Training of Auxiliary Personnel in Medicine, Nursing, Midwifery and Sanitation, WHO Technical Report Series No. 212 (Geneva, 1961); La formation du personnel de l'alphabétisation fonctionnelle, Guide pratique (Paris, UNESCO, 1972), English edition in preparation; D.J. Bradfield, Guide to Extension Training (Rome, FAO, 1966).

field workers reaching the community and the family, who have training in the correct approach and use of communication tools. Such a systematic use of communication techniques for better project implementation is gaining wider acceptance.

233. In addition, the use of the information media can play an important role, especially in light of the weak linkage from the central government to the community, and the need to invite local participation. In countries where the vulnerability of the young child is not fully appreciated, an information campaign via the media can help create awareness on the part of parents, officials, and others, that a critical stage in a child's development is before the age of six. It would be necessary to sensitize information media personnel to the importance of the young child, so that more information materials dealing with child care are produced for the media.

234. Mass media communications should convey information about what government services are available for the young child, and also substantive information and advice about proper child-rearing practices and other activities benefiting the young child. In view of widespread illiteracy in many developing countries and low family income, there are severe limits to the efficacy of both television and newspapers in delivering this type of information, especially in the rural areas where it is most needed. With the advent of transistorized receiving sets, the radio medium has great potential in most places. Useful information concerning child care need not be confined to educational radio programmes; wherever possible, such information can be woven into other types of programme, e.g. serialized stories and other entertainment programmes. Television

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and publications, as well as posters, have a supporting role to play, especially in the urban and peri-urban areas.

235. Radio listening groups can overcome one drawback which radio does have - lack of feedback and interaction. These groups afford the opportunity for two-way communication and have been used successfully, especially for farming groups, in a number of countries including Colombia,^{103/} Ghana and India. In general the results justify the organizing effort and cost involved in establishing and servicing them.

236. In practice the most difficult aspect of the use of mass media is the preparation of adequate programme material that can convey accurately the messages concerning health, nutrition, and child care. It is important to take into account national attitudes and cultural contexts, as well as the special considerations within given localities. Imported concepts and formats may have certain uses in developing countries, but those who deal in local media, including traditional folk media, should be encouraged to develop their own formulae, which may well include a blend of the modern media with appropriate traditional media. Thus financial provision has to be made for developing local material.

Needed services given little or no discussion

237. Services to meet a number of important needs of the young child have not been discussed because useful information was not obtained

^{103/} E.M. Rogers and L. Svenning, Modernization among Peasants: The Impact of Communications (New York, Holt, Rinehart and Winston, 1969).

to enable us to make recommendations about them. Some of these are directly related to poverty, and are difficult to handle except by raising the economic level of the population.

Clothes

238. Many of the developing countries are in tropical and sub-tropical countries. However, there are areas where it is rather cold at night or where there are significant seasonal changes in temperature and the children suffer a great deal from the cold. Lack of blankets and clothes even increases significantly their consumption of calories and therefore their need for food. Cold is probably one of the reasons for the high prevalence of respiratory infections. In addition to clothes and blankets, in many areas mosquito netting would make an important contribution to the reduction of malaria and some other insect-borne diseases. The wearing of sandals or sneakers would also lower the risk of infection by worms. The production of sandals from old tires is a craft that is being encouraged in many countries. Help may be given through women's clubs or other channels for women to make cloth and clothes.

Orphaned, abandoned, neglected and abused children

239. Many developing countries have a considerable number of orphans and abandoned children, victims of abuse and neglect, and children with sick parents or parents with family problems. Such children are at special high risk and require protective services such as foster family homes, adoption, or institutional care. Though the disadvantages of putting children in residential institutions are now known, the lack of machinery or cultural patterns for the equivalent of adoption or foster family care, and the breakdown of responsibility normally carried by an extended kinship network often

results in this being the only possibility. The improvement of the quality of care of children or institutions would require upgrading the training, numbers, and remuneration of personnel. At the same time the number of homeless children may be expected to increase with urbanization and breakdown of traditional customs. There appears to be little prospect of such costs being met and no satisfactory solution is apparent. Some preventive measures can be strengthened. Family welfare and community welfare social services should extend programmes which emphasize parent education, family counselling, and family life education; health, education and extension services may be used to help.

Retarded and mentally disturbed

240. The number of retarded and mentally disturbed children is probably quite large. More needs to be done to identify children with these problems and to know what can be done for them through education of the mother and the family and through various services, non-governmental as well as governmental.

Worms

241. Worm infestation is almost universal and is a very important element in the diseases of children. Some treatments can only be given through health centres. Reinfestation usually occurs rather rapidly in the absence of good environmental sanitation and the wearing of shoes.

Endemic communicable diseases

242. A number of diseases covering quite large areas of the world have not been discussed because at present there is not an economically feasible technology of control. Schistosomiasis can be reduced or

prevented by keeping waterways clean, which requires a long-term educational campaign in environmental sanitation. Various filarial diseases can be prevented by keeping away the vector; this usually requires substantial action on the environment to clear away its breeding sites. Once the child is infected, the treatment is quite difficult and expensive.

Dental health

243. We hope to be in a position in the final version of this report to comment on dental health for the young child, particularly preventive measures.

Emergencies

244. Experience shows that often in emergency situations the special needs of young children are not widely known to those who are called upon to administer relief measures to a disaster area. The subject needs to be studied and the findings widely disseminated.

Studies required

245. National investigators who participated in this study have raised additional questions in their reports and correspondence. This continuing interest is invaluable in enlarging the awareness and interest of the countries, and in suggesting new lines of action in areas of critical importance to the young child. The main questions about which further information are needed may be summarized as follows:

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- (a) Evaluation. Evaluative studies of essential services affecting the young child should include costs, staffing, community linkages, and outcomes. The following points need to be borne in mind in connexion with these studies: (i) existing cost data are scarce, and though the techniques of cost analysis exist, they rarely have been applied; (ii) related to costs is the greater use of auxiliary staff, resident in the community; supervisory services have to be organized; (iii) services have linkages to the people through the local community and its formal and informal structures, and to zonal and national administrative levels - little is known of how this network is functioning and ways of simplifying the co-ordinating structures; (iv) there are very few evaluative studies that look both at the immediate and long-range outcomes of various services;
- (b) Community participation. With rare exception, reports and conferences concerned with families and children recommend local community participation and involvement in the issues, planning, and programme development that affects them. However, there is little knowledge, including good case histories, about the best way to orient and work with community leaders and the community, and the reasons for successes and failures;
- (c) Special services. There are children with special problems due to physical or mental handicapping conditions, abuse, neglect or abandonment. These are complex and costly problems in which non-governmental organizations have played a pioneering role and whose experience would be useful;

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- (d) Role of the mother. The importance of the mother-child interaction requires greater recognition in programme activities. However, there is very little factual information concerning the mother, such as how much time she spends at her daily tasks, her use of cash and control of the family budget, the long-range consequences of functional literacy and other non-formal education, cultural barriers to status and role changes, occupational patterns, and role as head-of-household;
- (e) Role of the father. Little information emerged from the country case studies regarding the role of the father in the care of the young child, and it is not clear how significant his involvement is, except as the head of the household and through the mother. His relationship to such matters as raising the mother's status, and house and village improvement is certainly important but there is little guidance on how to inform and influence him;
- (f) Psychological and sociological environment of the child. More is known of the physical than the psychological environment of the child. Child rearing under varying cultural conditions should be examined, especially the contribution of traditional life patterns, and how they provide values; and what values should be preserved throughout the modernizing process;
- (g) Country problems. Several of the country case studies have touched on issues of special interest in the country on which follow-up studies are felt to be useful.

ANNEX TO CHAPTER III

Illustration of the reduction of women's work

An example of simple inputs with modest investment which will reduce arduous labour for women in villages can be found in various locations in East Africa, where the hand pounding of cereals has been replaced by small capacity power-driven mills. Hand pounding of cereals is hard work and time consuming; a village family consumes about 2.5 kg. per day of corn, the pounding of which requires up to one hour.

It has been observed in villages in East Africa that women will take advantage of commercial grinding facilities, even though they will be required to carry headloads of 24 kg. three or four miles to the nearest highway, take a bus for another five miles, to have the maize ground in a small commercial mill. The economics of this are interesting, since at a time when maize cost 30 EA cents per kg., women were prepared to pay 120 cents to have 8 kg. ground. At this rate, the grinding cost is equivalent to half the cost of the product, while the total cost involving 100 cents for the return bus fare and allowing 10 per cent "loss" of product which is retained by the miller, gives a total cost for transportation and grinding of 19.6 cents per kg., equivalent to two thirds of the cost of the product (at 1973 prices).

Villagers in areas where commercial mills are not available, have expressed interest to establish small capacity milling facilities. In some areas where rural electrification has been completed, the mills may be driven by electric motors. In other areas diesel driven units would be required. The economics of the two types of drives have been reviewed and are cited below:

Cost of cereal mill, capacity 50 kg./hr	\$600
Cost of 3HP diesel drive	\$800
Cost of 1 1/2 HP electric motor	\$100

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<u>In East African currency</u>	<u>In shillings</u>
Diesel units plus mill, installed	10,000
Building costs	<u>2,000</u>
Total capital costs	12,000
Electric motor drive plus mill, installed	6,000
Building	<u>2,000</u>
Total capital costs	8,000

Operating costs

	<u>Diesel</u>	<u>Electric</u>
	- in shillings/day -	
Man and helper	20	20
Diesel fuel 1 shilling/hr.	12	--
Oil	1	--
Electricity - 0.5 shillings/kwh	—	6
Maintenance	<u>2</u>	<u>1</u>
	35	27

Output: 50 kg./hr. 12 hours, 75% efficiency: 450 kg.

Cost kg. meal: $\frac{3500}{450} = 7.8$ cents E.A. from diesel mill

450

$\frac{2700}{450} = 6.0$ cents E.A. from electric mill

450

Now if an allowance is made for depreciation of the equipment assuming a ten-year life for the combined units:

Diesel	1,000 shillings
Electric	600 shillings

On the basis of annual throughput of 160,000 kg. depreciation charges would be:

Diesel unit - 0.6 cents/kg. meal
Electric unit - 0.38 cents/kg. meal

Total costs ground meal	8.4 cents/kg. from diesel mill
	6.4 cents/kg. from electric mill

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These costs are 56 per cent and 42.5 per cent respectively, of the commercial grinding costs in the area. Average use/day/family: 2.5 kg./day of corn meal. Therefore, the mill could handle requirements of 180 families. Since an average village has 40 - 50 families (200 - 300 persons), the mill could process flour for four villages. In many areas four villages will be found within a three-mile radius - walking distance even with a head load. Thus, a small mill centrally located to serve four or five villages, installed at a cost ranging from 8,000 - 12,000 shillings, depending on the availability of a reliable electric supply, would reduce the workload of 180 women from up to one hour hand pounding each day, to a three-hour work period once in ten days, when the maize could have to be carried up to three miles to the mill, and back.

There is a good potential of such a mill to generate a small profit and to serve as the focus for other activities requiring a power input. A charge of two cents EA/kg. of meal would generate 3,000 shillings/year - sufficient to purchase a hand pump for water and to sink a shallow well.

The psychological effect of this first step in the new world of the application of a mechanical energy source to replace human energy, can be used for the stimulation of new ideas and actions which, if channelled constructively, would lead to other labour-saving developments.

IV. UNICEF ASSISTANCE POLICIES

Contents

	<u>Paragraphs</u>
Summary	246
Trends in UNICEF aid	247-251
Emphases in assistance policies	252-280
Village water supply	256
Food and nutrition	257
Mother and child health services	258-263
Literacy and education for mothers	264
Home improvement and reduction of women's work	265
More specialized services	266-268
Governmental supporting services	269-272
Assistance for the preparation of policies and projects	273-278
UNICEF organization	279
Next review	280

Summary

246. Chapters II and III have tried to suggest the basis for a systematic national approach to improving the situation of the young child. The Executive Board of UNICEF has indicated the high priority it gives to assistance in support of this objective, including sectoral components that could ultimately form part of a national effort for the young child. The purpose of this chapter is to review relevant UNICEF assistance policies in the light of the preceding suggestions for national action, to see if any changes of emphasis are desirable. In addition to recommending some development of assistance policy in the fields of water supply, food and nutrition, and maternal and child health services, the chapter recommends more support for women's literacy campaigns and for the improvement of home and village living conditions, in order to better the indoor and outdoor environment of the child while also reducing the excessive drudgery of the mother's work. A final section deals with the organizational problem of how UNICEF, apart from offering material programme aid, might stimulate further interest in improving the situation of the young child within developing countries, and among bilateral aid agencies and non-governmental organizations.

Trends in UNICEF aid

247. The following table shows UNICEF commitments approved by the Board since 1960 for projects benefiting young children, within the framework of all programme assistance.

/...

Annual average of UNICEF commitments for projects
benefiting young children, 1960-1973

<u>Fields of assistance</u>	Annual averages					
	1960- 1964	1965- 1969	1970- 1973	1960- 1964	1965- 1969	1970- 1973
	in thousands of US dollars			- in percentages -		
Child health	18 100	19 200	22 800	52	49	37
Water supply	2 300	1 800	7 100	7	5	12
Child nutrition	6 800	3 800	5 800	19	10	9
Family and child welfare	1 100	1 600	3 500	3	4	6
Subtotal for young children	28 300	26 400	40 200	81	68	64
School feeding	900	300	100	3	1	0
Education	3 400	8 900	15 600	10	23	25
Other long-term aid	1 000	1 700	4 000	3	4	7
Emergency aid <u>a/</u>	900	1 400	2 700	3	4	4
Total aid	34 500	38 700	61 600	100	100	100

a/ Rehabilitation included in the other fields of assistance.

248. The content of projects within the various fields of assistance varies somewhat from country to country, and are not broken down according to the age group of children to be assisted. Nevertheless, it is reasonable to say that projects for child health, water supply, child nutrition and family and child welfare especially benefit the young child. On the other hand, assistance to education benefits school-age children.

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249. The table shows that since the Board's consideration in 1965 of assistance policy to projects benefiting the young child, there has been a substantial increase in the dollar amount of support to such projects. Assistance to child health projects has increased by 20 per cent; to village water supply projects by more than three times; to child nutrition by 50 per cent; and to family and child welfare by 100 per cent. In total, assistance to these projects has increased by over 50 per cent.

250. The second part of the table shows however that there has been a reduction of the proportion of assistance going to fields, particularly benefiting the young child. Behind this lies the fact that in 1961 the Executive Board decided to assist projects in whatever fields were agreed to be of the highest priority for children in the country concerned, and in which effective action was possible.^{104/} This opened the way in the following years to assisting education, to which many countries, particularly in Africa, attached the highest importance. Since UNICEF advocates a comprehensive and systematic approach at the national level to deal with children's needs, it is logical also for UNICEF to be ready to give assistance to those components that are agreed to have the highest priority. Furthermore, for the reasons mentioned earlier, assistance to the education of girls and boys, which may include specific instruction about health, nutrition and child rearing, will certainly make these children into better-informed parents in the future. It also has an immediate effect in those families where they are helping to look after younger children.

251. In the field of child nutrition, participation in supplementary feeding in schools was phased out. Some of this was taken over by the World Food Programme and non-governmental organizations working

^{104/} See Official Records of the Economic and Social Council, Thirty-second session, Supplement No. 13B (E/3525 - E/ICEF/431), paras. 70-73.

overseas. UNICEF's assistance was more concentrated on the difficult field of helping to improve the nutrition of the young child. The PAG began its work in 1955. At first it gave special attention to ways of using indigenous resources for meeting the food needs of children including particularly vegetable sources of protein and weaning foods. UNICEF has since been helping a number of countries develop their manufacture of weaning foods, principally for the urban young child. It was in 1957 that the Executive Board adopted the policy of "expanded aid to nutrition" (later called "applied nutrition"), designed to help the rural population grow and use foods needed for better child and family nutrition, and to support nutrition education and the training of the personnel required. There is no doubt that such projects, where successful, are more useful in the long run than distribution of food from outside; they are also far more complex, and the expansion of assistance in this field has been less than the Board desires.

Emphases in assistance policies

252. In general UNICEF assistance should be available to help countries implement the recommendations that are given in chapters II and III, within the limits of resources, and selectively according to the priorities found in each country. In fact UNICEF's existing assistance policies make this possible. However, there should be some change of emphasis in their application in order to take advantage of opportunities offered by national policies that are evolving to give more attention to disadvantaged areas, and by technological developments.

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253. Among the approaches discussed in chapter II, the Executive Director recommends that UNICEF give emphasis to helping countries to:

- (a) Encourage local participation in services benefiting the young child;
- (b) Develop functional services in ways that are mutually supporting at the field level;
- (c) Extend basic services widely into areas substantially unserved;
- (d) Strengthen their planning and monitoring machinery for the above.

254. UNICEF's aid for pilot or innovative projects should be particularly used for helping countries to work out methods of community participation and national and local government support for it; for working out patterns of organization, training and services that are within the financial means of national and local budgets (including contributions from the communities). UNICEF's aid for project preparation should be used to assist the participation, in this work, of universities and research centres in developing countries, both specifically for their own countries and on a regional or sub-regional basis.

255. The following paragraphs view current UNICEF assistance policies in the light of what has been set out in chapter III on potentials for the development of services and programmes.

Village water supply

256. UNICEF assistance in this field is growing rapidly in response to very great interest in developing countries. The assistance policy approved by the Board in 1969, stating that UNICEF aid should concentrate on demonstration projects, was subsequently broadened by the Board's approval of aid to a number of projects with wide

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coverage. New guidelines for this more extensive assistance are being developed by the WHO Secretariat in consultation with UNICEF and others. The study supports this broader approach. At the same time it suggests that assistance be used to encourage the improvement of the quality and effectiveness of projects through such means as health education, and the use of planning and working methods that secure community participation for installation and maintenance. Furthermore, assistance should be used to encourage various possibilities of follow-up to the provision of water, which would then become a starting point for village and home improvement and provision of new children's services.

Food and nutrition

257. The assistance policies in this field call for few remarks at this stage since the Executive Board will be reviewing them at its 1975 session on the basis of a report being prepared by Dr. Jean Mayer. However, as is indicated in the Executive Director's General Progress Report to this session, there is a special problem in 1974, which we may expect to continue for the next few years, in that the substantial increases in the prices of staple foods will have a bad effect on the nutrition of children in families in the lower socio-economic classes. Expanded assistance may be requested by countries undertaking measures to counteract this. This may require an expansion of assistance to supplementary feeding for young children, and also to "applied nutrition" projects. Assistance for the home storage of foodstuffs could be included as one of the best means to obtain a rapid increase in food availability during the period between harvests.

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Mother and child health services

258. MCH is the major field of UNICEF assistance. Ways in which services can be extended into disadvantaged areas will be coming up for review by the Executive Board at its 1975 session on the basis of a study by WHO and UNICEF.

259. Local participation. The emphasis in the present report on the advisability of starting with services that local communities understand and want, and in which they will participate, should influence the content of UNICEF aid. Relatively simple measures, which in themselves cost very little, can deal with a large proportion of the priority health problems from which children in developing countries are suffering. They can be applied over a wide area wherever a simple service delivery system can be organized. UNICEF should give more assistance to helping countries solve financial, organizational and administrative problems in their delivery of services. Among the technical possibilities that could be much more fully exploited are wider coverage of immunizations, prevention and treatment of anaemias, and of vitamin A deficiency, treatment of trachoma, and treatment of diarrhoeal diseases and dehydration and of malaria in children. Used in this way UNICEF aid can help some essential maternal and child health services to reach out to the surrounding population, to educate them and to stimulate the growth of a health network for the community.

260. Responsible parenthood. The support of responsible parenthood through health and welfare services that help parents to assure the development of each of their children deserves increasing emphasis in UNICEF assistance.

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261. Measles and polio vaccinations. Among the immunizations that should be given more widely wherever the necessary organization can be set up, measles vaccination deserves special attention. In view of the great importance of measles in the mortality of young children, of the effectiveness of the vaccine, and its recently lower cost, greater UNICEF assistance would be justified to help countries to extend their immunization programmes. The wider use of polio vaccination should also be assisted.

262. Trachoma and other treatments. Means should be explored to overcome the lag during the last ten years in the treatment of trachoma, a major scourge of children in a large region of the world. Secondly, UNICEF's standard supplies, equipment and drugs for a wide range of medical care need to be updated to take account of recent pharmaceutical advances and the lower prices of some drugs and vaccines. WHO is now advising us on a revision of guide lists for drugs and medical supplies.

263. Discouraging early weaning. UNICEF should be ready to assist the various steps described in chapter III for discouraging early weaning: the study of the situation in each country, orientation of medical and health personnel, the education and encouragement of mothers in this regard, use of mass media, schemes of supplementary feeding for nursing mothers, and other measures that may be suggested for trial as a result of local studies. UNICEF should continue support of the PAG, along with the sponsoring agencies, in promoting co-operative action by paediatricians, government agencies and the infant food industry in minimizing problems of early weaning.

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Literacy and education for mothers

264. The over-all objective of raising the status of women would be an important contribution to responsible parenthood and also to child care. Among the indirect measures that can be taken to raise the status of women in the eyes of their families and of the community, probably the teaching of literacy is one of the most practical actions that can be taken. The Executive Board in 1973 agreed on greater emphasis in the field of non-formal education, of which literacy programmes are an important part. UNICEF has begun to assist a few projects for teaching of literacy to women and adolescent girls with content related to the needs of household and family as described in chapter III, paragraphs 191-196. UNICEF has also been assisting women's clubs and the women's section of community development, which sometimes include promotion of literacy in their programmes. More assistance than in the past should be given to the expansion of literacy projects for women and adolescent girls, including the necessary accompanying measures to strengthen women's clubs, co-operatives, extension services, etc., and the regular circulation of reading material. The increase in the school attendance of girls and the improvement of the curriculum are also important contributions, which fall outside the scope of the present report.

Home improvement and reduction of women's work

265. This report recommends greater assistance for home and village improvement with the objective of reducing the excessive drudgery of mothers. Some assistance of this type has been given in the past as part of women's community development work and home economics extension. The attention now being given to intermediate technology by private research, governmental and voluntary agencies can indicate

new solutions, which have to be tried out through community development organizations, women's clubs, the extension organizations, co-operatives, etc., and then adopted on a wide scale. UNICEF could make an important contribution to this process.

More specialized services

266. Day care. The need for day-care services is growing rapidly as more women go into types of employment where they cannot take their children along. More UNICEF assistance will be required, but this does not pose a problem of policy; rather it involves finding ways to establish and maintain more such centres at costs which the country and the family can afford, and to improve the quality of the care they provide. Improvement of quality includes play, and developing the educational functions of day care. Assistance to formal pre-primary education (teaching of reading and writing) would generally not be given in areas where primary schools are not yet available for a substantial proportion of children, for the reasons set out in chapter III. An exception might be made for the purpose of applied research and teacher training.

267. Handicapped children - prevention. There is greater scope than in the past for helping countries in the prevention of handicaps of the young child. Many of the important causes of blindness could now be attacked by preventive action. UNICEF assistance has recently started for the prevention of child blindness due to vitamin A deficiency. In earlier times, assistance has been given to the control of conjunctivitis and trachoma through mobile campaigns, which have often been too costly for countries to maintain; it may be possible in future to reach more young children than at present through such channels as health centres, schools, more local auxiliary staff, and the use of cheaper forms of transport. The use and

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expansion of existing services for more effective prevention of handicaps would require some central unit responsible for organization, training and supervision. UNICEF should take up opportunities to review these possibilities with interested countries.

268. Rehabilitation of the handicapped. UNICEF assistance policy includes assistance to national centres for the training of personnel for the rehabilitation of the handicapped, and related demonstration service facilities. There is scope for greater efforts by UNICEF, in collaboration with other organizations, to help find methods of early diagnosis and rehabilitation that are within the resources of personnel and money that developing countries can make available.

Governmental supporting services

269. Training. A vital component of the programmes discussed earlier is the training of officials and personnel, for all the levels involved from direction and supervision to the auxiliary field worker. It includes the appropriate orientation of people working in the various services in the area, where they are not directly or obviously related to the young child. UNICEF assistance policy is to support training for all types of personnel working in services benefiting children, appropriate orientation courses for other services, and practice areas around training institutions for giving field training. A priority use of UNICEF assistance would be to encourage the development of types of training that are frequently lacking at the present time. These include the orientation of staff to young child problems extending beyond the limits of their strictly professional training; the training of polyvalent workers at the field level; training of workers in different professional fields to work together as a team; and the training of field workers in the use of communication techniques and tools, and working with community leaders and the community generally.

270. UNICEF gives a substantial part of its assistance for training, and it would be appropriate to give correspondingly important attention to the adaptation of the training it is assisting to the form of organization to be staffed, and to revision of curricula in order to prepare trainees for the types of approach outlined in chapters II and III.

271. Use of communications media. UNICEF assistance would be important for the most frequently neglected aspect of information media, namely adequate investment in the preparation of materials designed to reach various levels of the population, including the parents, on the various vulnerabilities of the young child and what can be done about them.

272. Planning, monitoring and evaluation. UNICEF assistance for the strengthening of national machinery for planning, monitoring and evaluation in fields benefiting children should have particular application in services benefiting the young child. This would not constitute a departure in assistance policy, as it was discussed in the Board in 1973 (E/ICEF/629, paras. 109-112), but the policy should receive a wider application.

Assistance for the preparation of policies and projects

273. For any policy or project going beyond a single ministry, the initiative will usually be taken by the national planning commission, the presidency or a zonal planning authority within the country. UNICEF should be in a position to respond to requests for help from such sources for work benefiting the young child. That the problem is multidisciplinary is an additional reason for making maximum use of national and regional research and teaching institutions - not only those dealing with development but also those in such fields as administration, agriculture, health, nutrition and social welfare.

UNICEF has some relevant experience along these lines from its work with countries that have wanted to make more explicit provisions for children in their next five-year plan.

274. Assuming that the best efforts have been made to use the resources available in the country and the region, there still may be need for a consultant or consultants from outside. It is neither practicable nor desirable to have large numbers of consultants in any one country for programme preparation. Therefore, such requests should be handled selectively. One type of request relates to a consultant to help with a comprehensive approach. In this case the situation is somewhat similar to that followed by UNICEF in helping countries prepare studies which were the basis of the Lomé and Guatemalan regional conferences and the Andean Group Conference on nutrition planning. In all of these cases the necessary help was given by several not-too-long visits by one consultant. The Executive Director is developing a panel of persons who could be called on for this type of work.

275. A second type of request relates to a particular aspect of a more comprehensive approach. This type of consultant may more readily be found in consultation with the specialized agencies and some non-governmental organizations.

276. In addition to action at the country level, some encouragement and help should be given at the regional and international level, for the exchange of publications, information and experience among countries; for applied research; and for the orientation or training of key personnel towards the comprehensive approach that is the basis of the present report. Foundation and other aid sources may also be willing to contribute to these requirements.

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277. Many of the country case studies prepared in support of the present report, provide a basis for discussion for developing a young child policy and extension of programmes. A number of programmes have come, and others are in preparation, as a result of earlier conferences or seminars where national planners met people concerned with children's needs, e.g. Lomé 1972, Guatemala 1972, Madras 1970. The awareness created by these discussions will still yield further results in programmes. Apart from such special occasions, the discussion of country programming under the auspices of UNDP offers the opportunity of bringing to explicit attention young children's needs and possibilities for action.

278. However, progress in this field will not be rapid, and UNICEF support will be necessary for a number of years in order to obtain results.

UNICEF organization

279. The UNICEF representative will usually be able to get the help he needs for his own office by the use of a consultant. In one field office serving one large country with a substantial programme for the young child, there is a programme officer with special responsibility for it; and more such cases may occur in the future. In 1965 the Executive Board suggested the appointment of a person at Headquarters to be responsible for the encouragement of policies and programmes for the young child, and for furthering the implementation of the Board's assistance policy in this field. Instead, the attempt was made to use only consultants required for particular projects. In retrospect, it appears that continuing attention by a staff member in addition to the use of consultants, would probably have produced more results. Therefore the Executive Director is including such a post in the 1975 budget estimates. The responsibilities of the UNICEF

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officer would include helping field offices in their consultations with government ministries concerned, and in getting for them the consultant services and information they will need; helping to arrange training activities; encouraging applied research, including further studies of UNICEF assistance in areas not covered in this report; assisting a greater exchange of information and experience nationally, regionally and internationally, and liaison on these matters with other members of the United Nations family and non-governmental organizations.

Next review

280. Assuming that this person would take up duty by early 1975, it would be desirable to review in 1978 or 1979 whether the over-all assistance strategy outlined in this chapter is working, and whether to continue it, or modify it.

ANNEX I

SELECTED BIBLIOGRAPHY

This is a selection of publications that may be useful for obtaining further information for preparing policies and programmes. In accordance with this purpose, it includes some publications that are not referred to in the report, and does not provide a complete listing of the references in the text.

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ANNEX II

Note on country case studies

As background for the study and in order to help a number of developing countries examine their own national efforts affecting the young child, case studies were undertaken in 18 countries. The studies were primarily carried on by national institutions, scholars and researchers, with a minimum of external technical assistance and with some material assistance from UNICEF. To the extent possible, the studies bring together and analyze existing reports and data. A number of studies are still in process.

In 8 countries - Colombia, Honduras, India, Niger, Peru, Republic of Tanzania, Thailand, Tunisia - the studies involve: (a) a review of national policies and programmes, and (b) field observation in selected areas with differing socio-economic situations.

In 10 countries - Burma, Egypt, Ghana, Malawi, Mali, Mongolia, Philippines, Senegal, Yemen, Zambia - the studies are focused largely on examples of individual programmes and activities.



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