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**' Simple ways to save lives: UNICEF's 40-year war against infant mortality ' by V. Tarzie Vittachi, UNICEF Deputy Executive Director, External Relations, 1980 - 1988. Article printed in World Times, Inc. December 1986**

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## LEVEL 1 - 5 OF 5 STORIES

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December, 1986

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LENGTH: 921 words

HEADLINE: Simple ways to save lives

BYLINE: By Tarzie Vittachi

HIGHLIGHT:

UNICEF's 40-year war against infant mortality

BODY:

Driving with a colleague along the narrow road leading to my village in Sri Lanka, I stopped to let a funeral pass. Stopping for a funeral out of respect for another's grief is something that we would do even on a broad highway. The sorrow we witnessed here, however, was more poignant than most.

There were only four people at this funeral: a mother, a father and two children. The father carried a two-foot-long infant's coffin; the mother, behind, sobbed into her hand; and the two siblings, bright-eyed, were too stunned to comprehend the enormity of death.

We sat silent in the car, ourselves uncomprehending, knowing more than they did, that there were 40,000 such funerals taking place in the world that day and every day. Children of the poor, dying from vaccinate illnesses, from diarrheal infection, from malaria, other parasitic diseases, and from pneumonia.

A third of those funerals could have been avoided if the parents knew that a simple mixture of salt and sugar -- or rice water -- could have prevented the deadly dehydration that diarrhea brings. A fourth could have been prevented by six vaccines, all costing less than a dollar. Many of the deaths from infection could have been avoided by an elementary knowledge of sanitation and personal hygiene -- using a latrine, not throwing kitchen garbage out of the door or near the well or the water pump to breed flies, washing hands and under the fingernails to scour away fecal matter. Washing hands is the most important health practice in all history. So simple. So cheap.

Yet, so many children die. What about malnutrition? You will be surprised -- as I was -- to learn that most malnourishment is due to infection. Even the scanty food the poor eke out for their children is wasted by lack of appetite and by parasites. Malnutrition is a furtive killer. It steals life, it kills from within by weakening children and making them more vulnerable to measles, tuberculosis and the other killers which could be countered by immunization.

Why then do we let this horror go on? Has the world supped so full of horrors that it is incapable of caring about others? No. When a famine or an earthquake or a flood or a Bhopal disaster hits the headlines people are moved and public empathy moves governments to mitigate the effects of what UNICEF calls "loud emergencies." But the "silent emergencies," the daily, needless suffering and dying of children from malnutrition and preventable diseases

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does not make prime time and page one. It is not even worth a mention.

But more children die each day in India than the total number who died during the Bhopal disaster. More children died from diarrheal dehydration and from immunizable diseases the day the Arenas volcano exploded in Armeno, Colombia than died from the mud slide that the volcano caused. More children died in Mexico from those same diseases than died the day the earthquake struck downtown Mexico City.

No. It is not that people do not care. It is just that people are not informed. The media does not know how to keep the silent emergencies of the world on the front page. The motives which move journalists to report loud emergencies do not prevail when the crisis is over.

That is why UNICEF, which earned a reputation for being able to deal with children victimized by war and violence in Europe and Japan at the end of World War II and later in Biafra, Lebanon, Uganda and in Kampuchea has, at 40, turned around its program strategy from the traditional supply approach to the demand approach.

By putting information and communication into the center of its program, indeed by making them the leading edge of programs, UNICEF is trying to empower parents of the poor with the information and education they need to make responsible decisions to protect and nurture their children.

When they understand the reason for putting a little bit of disease into their children's blood to immunize them against the full horror of measles or polio, they demand vaccination. When they know that a two-finger pinch of salt and four-finger clutch of sugar dissolved in half a liter of water can, almost miraculously, prevent a child from dying of dehydration, they demand that stocks of packeted salt and sugar mixtures are kept at the nearest clinic or sari-sari store.

When they have seen an audio-visual exhibit which shows them what a germ looks like, and what wild life may be growing under a fingernail or on a fly's foot, they will not easily forget to wash their hands, keep their water clean and their food covered.

The demand approach is taking hold in many countries across the developing world. Immunization rates have doubled over the last two years and oral rehydration therapy is becoming widespread. More than a million children who might have died were saved last year by these simple interventions.

The prospect of universal immunization by 1990 is no longer the mirage that it was a couple of years ago. The prospect of persuasively informing every family that they can do their own rehydration therapy at home is no longer an illusion.

The prospect of dramatically reducing the 40,000 daily deaths of children by the end of the century is no longer beyond the boundaries of reason.

The health technology is there, the communications technology is there, and the demand strategy is proving itself. Can we make those silent funerals, so many of them, a story of the past like the bubonic plague and smallpox? We must.

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