

UNITED NATIONS
TRUSTEESHIP
COUNCIL



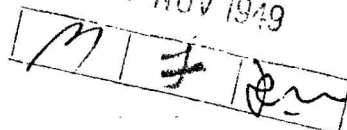
GENERAL

T/418
22 November 1949
ENGLISH
ORIGINAL: ENGLISH-
FRENCH

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MASTER

29 NOV 1949



REVISION OF THE PROVISIONAL QUESTIONNAIRE

Note dated 1 November 1949 from the Director-General
of the World Health Organization
to the Secretary-General

The Director-General of the World Health Organization presents his compliments to the Secretary-General of the United Nations and draws attention to the Provisional Questionnaire as approved by the Trusteeship Council at the twenty-fifth meeting of its first session on 25 April 1947,^{1/} and at present before the Council.

The First and Second World Health Assemblies instructed the Director-General to co-operate with the Trusteeship Council with particular reference to the revision of the Questionnaire from the technical point of view. The Director-General has therefore consulted with experts in this field, and attached will be found the recommendations of the World Health Organization for the revision of the Questionnaire. It is requested that this letter and these recommendations be brought to the attention of the Trusteeship Council.

Attention is drawn to the views of the World Health Organization on this matter, namely that such modifications should be gradual and evolutionary, and that the aim should be to obtain the most useful information with the minimum of additional burden on the administrations concerned.

The suggestion is made that replies to a fuller Questionnaire made perhaps once in every five years would enable a better appraisal of the situation to be made. Information for the intermediate years should then be supplied on the changes taking place and the progress realized. It is understood that such a procedure cannot be considered at the moment, since the Trusteeship Council has not authorized it. Nevertheless, a recommendation to this effect is made with the

suggestion that it should be examined before any subsequent revision.

In these territories the imprecise nature of the statistics is often due to incomplete census material caused by the absence of registries and the difficulty of medical determination of the causes of death. Since accurate statistics cannot usually be established for the whole of the territory, the suggestion is made that valid figures for a well known but limited zone should be supplied. The extension of this method to other zones would then furnish more satisfactory statistical results.

RECOMMENDATIONS FOR THE REVISION OF THE PROVISIONAL
QUESTIONNAIRE OF THE TRUSTEESHIP COUNCIL, PRESENTED
BY THE DIRECTOR-GENERAL, WORLD HEALTH ORGANIZATION,
TO THE SECRETARY-GENERAL OF THE UNITED NATIONS,
FOR PRESENTATION TO THE TRUSTEESHIP COUNCIL.

TRUSTEESHIP COUNCIL

PROVISIONAL QUESTIONNAIRE

As approved by the Trusteeship Council at
the twenty-fifth meeting of its first session on 25 April 1947.

POPULATION

1. Give population figures, stating the basis on which they are calculated, and the year in which the census or estimate was made. So far as is possible figures should be classified by age, sex and race.

VITAL STATISTICS

2. State whether births and deaths are registered throughout the whole territory, or in one or several parts of it.

Give

- (a) the birth rate,
- (b) the death rate,
- (c) the infant mortality rate,
- (d) the maternal mortality rate.

Give this information for the whole territory, but if sufficiently accurate data are not now available for the whole of it, supply data for limited areas of it.

Give the date available on the infant mortality rate and the maternal mortality rate* for the whole population or for those parts of it for which accurate figures can be collected. So far as is possible indicate the stillbirth rate; the death rate of infants aged under one year; of children aged 1 to 4 years inclusive, and for other age groups.

ORGANIZATION OF MEDICAL SERVICES

3. Describe the organization of the Medical Department, its methods of work and its staff.

FINANCE

4. Give details of the financial expenditure on medical and health services -

* Deaths from causes 640 to 689 in the Sixth Revision of the International Lists of Diseases and Causes of Death per 1,000 live births.

- (a) distinguishing between recurrent expenditure on normal medical work and capital expenditure on new works,
- (b) specifying whether the cost of public works of a sanitary nature executed by non-medical departments are included in the figures,
- (c) stating what proportion of the total revenue of the country the expenditure represents, and
- (d) stating whether the metropolitan government contributes to the expenditure, and to what extent.

INSTITUTIONS

5. State how many government medical institutions of various types exist in the territory: classify them according to size ranging from large hospitals to dispensaries, indicating the number of beds by categories.

Give the same information for specialized units, notably those concerned with-

- (a) maternal and child health,
 - (b) the treponematoses,
 - (c) leprosy,
 - (d) other special subjects.
6. State what institutions or organizations in the territory are engaged in research related to medicine and hygiene.
7. State whether there are any medical organizations or institutions other than those enumerated in answer to 5 and 6 employing one or more qualified medical practitioners, attached to Missions or industrial organizations or private clinics. Give information on their importance and also on their relationship to the Government Medical Department.

MORBIDITY

8. Give a general statement on the condition of health and nutrition of the population followed by specific information supported by statistics on -
- (a) epidemic diseases,
 - (b) endemic diseases: malaria and other diseases of importance for the territory,
 - (c) tuberculosis, leprosy, venereal diseases and others of social importance,
 - (d) diseases due to nutritional deficiency.

MORTALITY

9. What are the principal causes of death?

Give statistics which should be based only on deaths of which the cause has

/been medically

been medically certified.

Specify the causes of maternal and infant and child deaths separately, the latter by age groups.

PUBLIC HEALTH ACTIVITIES

10. Give a statement of the epidemics which have occurred, and of the measures taken to control them.
11. State what measures have been taken to prevent -
 - (a) malaria and other endemic diseases,
 - (b) tuberculosis, leprosy and venereal diseases and other diseases of social significance.
12. Describe the action taken to reduce infant and maternal deaths and to remedy nutritional defects.
13. Describe the measures taken for the protection of the health of workers employed in industrial and agricultural enterprises.
14. State what arrangements have been made -
 - (a) for the disposal of waste matters,
 - (b) for the multiplication of hygienic latrines,
 - (c) to assure the supply of potable water to urban and rural communities.
15. Is there a service for the inspection of milk, meat and other foodstuffs? Describe its work briefly.

MEDICAL EDUCATION

16. What qualifications or other conditions entitle the holder to practice as a (a) medical practitioner, (b) pharmacist, (c) dentist, or (d) in one of the other categories of the medical service.
17. Is there a medical school of University standard in the territory at which people of it can acquire a qualification as doctor, pharmacist or dentist? If not, what facilities are provided for them to acquire such qualifications elsewhere?

Are there any institutions in the territory for the training of nurses and auxiliary medical and nursing staff and what qualifications do they give?

Enumerate the categories provided for, giving for each the conditions of admission and the period of study required for the acquisition of a qualification.

If certain of these institutions do not exist in the territory, state what facilities are provided for the people of it to acquire such qualifications elsewhere.

In all statistical information it is strongly recommended that comparative statements for the previous five years should be included. This comparison should be in graphic form.