



UNITED NATIONS

UNITED NATIONS CHILDREN'S FUND

REPORT OF THE EXECUTIVE BOARD

21 December 1961

ECONOMIC AND SOCIAL COUNCIL

OFFICIAL RECORDS: THIRTY-THIRD SESSION

SUPPLEMENT No. 3

NEW YORK

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NOTE

Symbols of United Nations documents are composed of capital letters combined with figures. Mention of such a symbol indicates a reference to a United Nations document.

E/3568
E/ICEF/440



UNITED NATIONS CHILDREN'S FUND
Report of the Executive Board (21 December 1961)

I. ORGANIZATION OF THE SESSION

1. The Executive Board of the United Nations Children's Fund held its 277th and 278th meetings at United Nations Headquarters on 21 December 1961. The attendance at the session is given in annex I.
2. The agenda (E/ICEF/434/Rev.1), as adopted, consisted of the following items:
 1. Report of the Programme Committee on its session held on 18 and 19 December 1961 (E/ICEF/P./L.163 and Corr.1);
 2. Report of the Committee on Administrative Budget on its thirtieth session (E/ICEF/AB/L.15);
 3. Progress report on development of social service projects (E/ICEF/438 and E/ICEF/NGO/75);
 4. Joint Policy Committees (E/ICEF/437);
 - (a) Composition of UNICEF representation and frequency of meetings of FAO/UNICEF Joint Policy Committee;
 - (b) Elections to and agenda for UNICEF/WHO Joint Committee on Health Policy;
 5. Other business.
 3. A list of all documents issued in connexion with the session is contained in E/ICEF/INF.20/Rev.1.

II. STATEMENT BY THE EXECUTIVE DIRECTOR

4. In an opening statement the Executive Director observed that the new emphasis and approach adopted by the Executive Board in June 1961 had been a source of encouragement to the UNICEF staff in the field and to the governments with which they worked. The endorsement of that new emphasis and approach by the Economic and Social Council and the General Assembly was important and also encouraging.

5. As a result of the policy decisions taken at its session in June 1961, the Board had before it one project in a field of aid that was new to UNICEF — namely, an urban project for Mexico (see paras. 34-35 below). For a number of years UNICEF, reflecting the desire of governments, had laid stress on aid to mothers and children living in villages; with the great influx of population from the villages to cities, however, it was clear that serious urban social problems were being created which also required aid from UNICEF. The Executive Director expected that other projects dealing with urban problems of children and youth would be presented to the Board for approval at future sessions.

6. Owing to the increasing long-term planning by governments and the broadening of the range of aid which could be requested from UNICEF, a greater volume of aid would be requested in 1962 and a wider

variety of problems would be tackled; and there would inevitably be a further increase in 1963 and subsequent years.

7. At the invitation of the Director-General of the Food and Agriculture Organization of the United Nations (FAO), he had made a statement on behalf of UNICEF at the opening of the eleventh FAO Conference, in which he had outlined the types of project in fields of interest to FAO to which UNICEF was prepared to give its encouragement, and had explained the views of the Board with regard to the long-term financial relationship between the two organizations.

8. Reporting on his subsequent consultations with governments in Rome, Paris, Moscow, Warsaw and London, the Executive Director stated that he had combined his fund-raising efforts with exchanges of views with key individuals about the needs of children which UNICEF might meet. He had indicated the opportunity for a substantial expansion of the work of UNICEF in the future. The Executive Director had also indicated a number of candidates for positions with the United Nations Secretariat, including UNICEF.

9. In 1961, UNICEF income was expected to be \$27.8 million, or approximately \$2 million more than in 1960. The total number of governments contributing

was expected to rise from ninety-eight to over a hundred. Popular support for UNICEF was growing in many countries, and the Executive Director believed that in 1962 there would be an increase in contributions from private sources as well as from governments.

10. The Executive Director referred to a widespread misunderstanding about an advance of \$10 million made by the United States Government to the United Nations earlier in the year. An amount of \$12 million had been pledged by the United States Government for contribution to UNICEF for the 1961 financial year. Under the usual conditions, the United States Government would normally have paid this contribution to UNICEF when "matching" contributions were received from other governments. However, in the light of the general financial position of the United Nations budget, the United States Government transferred a sum of \$10 million from the monies set aside to meet this pledge to the temporary custody of the Secretary-General. It had been ascertained in advance that this would have no adverse effect on UNICEF programming. It was understood that

the amount in question would be transmitted to UNICEF before the end of 1961.¹

11. The fifteenth anniversary of UNICEF, on 11 December 1961, had been commemorated in many countries by special exercises and radio and television programmes. A number of countries had issued special postage stamps, and the United Nations itself had brought out three commemorative stamps. Warm expressions of goodwill had been received from Heads of State and other high officials, from international non-governmental organizations (see E/ICEF/NGO/76/Rev.1), and from individuals in many countries.

12. The Executive Director believed that, with a continuation of the high quality of work in the field and the wise use of resources that had characterized UNICEF policy in the past, there was ground for optimism that UNICEF would be able steadily to expand its contribution to the welfare of children throughout the world.

¹ The sum of \$10 million was paid to UNICEF on 27 December 1961.

III. ALLOCATIONS

13. The Executive Board approved allocations totalling \$18,799,594. Of this amount \$16,253,858 was for aid to projects, \$2,426,950 for administrative and operational services in the first six months of 1962, \$85,000 for supplementary administrative and operational services in 1961, and \$33,786 to replenish a self-insurance reserve. Funds available for allocation for the period ending 31 December 1961 were estimated at approximately \$19 million.

14. The amount allocated to UNICEF-assisted projects was higher than that approved at any previous Board session. The number of projects approved — 134 — was likewise the highest on record.

15. The Board considered the report of the Programme Committee (E/ICEF/P/L.163 and Corr.1) and took note of its summary of the various questions and views that had arisen in the course of the Committee's discussion of recommendations for allocations to projects or groups of projects. Brief descriptions of the projects for which the allocations were approved are contained in annex II. Table 1 shows the allocations by programme and geographical area.

16. Included among the projects were thirteen for which the aid approved exceeded the initial amounts allocated. Recommendations for allocations of the balance of funds required for these projects will be submitted to the Programme Committee by the Executive Director in the course of the next two or three years. The total assistance contemplated for these thirteen projects amounted to \$6,276,000, of which \$3,029,000 was allocated immediately, while \$3,247,000 will be subject to allocation later. Including similar outstanding commitments held over from previous sessions, the balance of approvals for which allocations will be

subject to later appropriation totalled \$9,128,000 at the end of the session (E/ICEF/P/L.130, paras. 10-12).

Programme trends in the regions

17. The Programme Committee received reports on programme trends by the directors of the respective regions. For Africa (not including countries in the north-eastern part of the continent) allocations had increased from \$2.2 million in 1958 to \$3 million in 1960 and, taking into account decisions at the session, the total allocations for 1961 would rise to \$4.6 million. While in earlier years UNICEF assistance to African countries had been almost exclusively in the field of mass disease control, help was now being extended for the building of basic health services and there was also an accelerated development of programmes in the field of nutrition, and a growing number of requests for help in regard to social services and education.

18. In Asia almost all targets for 1961 had been met. The work in milk conservation had been more widespread than ever before. Applied nutrition projects in India were under way and expansion was being considered. Although the number of leprosy cases treated had doubled in 1961, only 10 per cent of the estimated number of sufferers in Asia had been reached. Interest in social services, mothercraft and homecraft, and care of handicapped children was increasing, and practical means were gradually being found to help in environmental sanitation. Although three new pilot projects for treatment of tuberculosis had been undertaken, governments of Asian countries had to rely mainly on preventive measures and continued to give 12 million BCG vaccinations a year. Work against malaria had pro-

Table 1

ALLOCATIONS APPROVED AT THE DECEMBER 1961 SESSION OF THE EXECUTIVE BOARD, BY PROGRAMME AND AREA

(In U.S. dollars)

	Africa	Asia	Eastern Mediterranean	Europe	The Americas	Inter- regional	Total	Per cent
Health services	978,700	1,123,000	472,500	30,000	2,407,000	395,500	5,406,700	33.26
Family and child welfare	137,800	241,000	64,500	—	—	—	443,300	2.73
Urban project	—	—	—	—	247,000	—	247,000	1.52
Disease control	560,000	425,500	1,211,500	—	2,347,000	331,000	4,875,000	29.99
Malaria eradication and control ..	—	—	1,105,000	—	2,173,000	—	3,278,000	20.17
TB/BCG	76,900	209,500	65,500	—	174,000	331,000	856,900	5.27
Leprosy control	315,600	105,000	41,000	—	—	—	461,600	2.84
Yaws control	167,500	26,000	—	—	—	—	193,500	1.19
Trachoma control	—	49,000	—	—	—	—	49,000	0.30
Other ^a	—	36,000	—	—	—	—	36,000	0.22
Nutrition	366,000	681,000	120,500	390,000	178,358	3,166,000	4,901,858	30.16
Child feeding	—	—	—	—	—	2,582,000	2,582,000	15.89
Milk conservation	169,000	100,000	73,000	390,000	24,000	95,000	851,000	5.24
Other high-protein food develop- ment	—	—	—	—	65,000	—	65,000	0.40
Nutrition education and related activities	197,000	566,000	47,500	—	89,358	489,000	1,388,858	8.54
Other nutrition	—	15,000	—	—	—	—	15,000	0.09
Education: health and nutrition aspects	—	42,000	—	—	15,000	—	57,000	0.35
TOTAL FOR LONG-RANGE AID	2,042,500	2,512,500	1,869,000	420,000	5,194,358	3,892,500	15,930,858	98.01
Emergency aid							323,000 ^b	1.99
GRAND TOTAL FOR PROGRAMME AID							16,253,858	100.00
Estimated operational services } first six months 1962							1,447,400	
Estimated administrative costs }							979,550	
Supplementary allocation for 1961							85,000	
Reserve for self-insurance							33,786	
							GRAND TOTAL	18,799,594

^a Includes bilharziasis control \$17,000 and virology centre \$19,000.^b Includes \$58,000 for Republic of Viet-Nam, approved by mail poll on 7 December 1961.

gressed well. The Executive Board was informed that bilateral aid was being increasingly directed to industrial development and that the amount of aid going to health was being reduced. It was therefore possible that UNICEF might be requested to help in order to prevent valuable health programmes from collapsing.

19. In the Eastern Mediterranean region, where children under fifteen years of age made up 40 per cent of the population, there was enormous pressure to provide more primary education. The training of teachers was a major concern. However, the rate of progress in the field of child welfare varied widely from one country to another. While in some countries special institutions had been established for long-range planning, it had frequently been found that, even where planning was institutionalized, not enough priority was given to child needs, or to social development. Co-ordinated plans of social and economic development were needed, and in this UNICEF had an increasing role to play.

20. In Europe, UNICEF assistance over the years for the improvement of dairy production and consumption had brought warm expressions of appreciation from the Governments of Finland, Italy, Poland and Yugoslavia. In the latter two countries, UNICEF has also given considerable help in basic maternal and child health programmes. In the Mediterranean basin, where economic development had not reached the level of that of the rest of Europe, UNICEF had helped in maternal and child health work, disease control and milk conservation. A number of governments in Europe, and private groups as well, were making increasing financial contributions to the work of UNICEF.

21. For the first time since 1956, the value of assistance to basic health projects for the Americas was greater than that for malaria eradication campaigns; this trend was expected to continue. In many parts of the continent, malaria was disappearing, and spraying was now concentrated in areas where, for various reasons, malaria

transmission had not yet been interrupted. The creation of the Alliance for Progress in the Americas had offered UNICEF a singular prospect of defining its activities in relation to a broad assessment of child needs in the context of comprehensive national planning that would take those needs into account. As programmes were drawn up for public health, education, nutrition, environmental sanitation, pre-vocational and vocational training and social services, which would benefit from larger financing than UNICEF could offer, it would be more necessary and more practicable to define the modest contribution UNICEF could make to the over-all schemes in promoting the interests of children.

Health services

22. The largest single group of projects approved by the Executive Board related to health services. The allocations for forty-nine projects amounted to \$5,406,700, or about one-third of all the project allocations. Included were thirty-five projects for basic maternal and child health services, eleven for environmental sanitation and three for the care and rehabilitation of handicapped children.

23. Amongst the noteworthy developments were seven projects which provided UNICEF aid for the first time to basic health projects in the African countries of Cameroun, Chad, the Congo (Leopoldville), Mauritania, the Western Region of Nigeria, Ruanda-Urundi and Togo. Of considerable interest in some of these projects was the combination of health and social services. As regards the Americas, the Board approved an extension of UNICEF aid on a substantial scale to nation-wide basic health schemes in Brazil and Mexico. In Asia, significant projects for strengthening basic medical training (in paediatrics in Afghanistan, and in social medicine in India) were approved by the Board.

Family and child welfare services

24. The Board approved allocations totalling \$443,300 for family and child welfare: \$333,300 for eight social service projects, six of which were new projects; and \$110,000 for one new mothercraft and homecraft project and one continuation. This reflected the growing interest that governments were taking in UNICEF help for family and child welfare projects. Because of the high priority given to this field by the recipient governments, increasing emphasis was being placed upon the training of persons qualified to plan and direct programmes and also of those responsible for the day-to-day contact with children.

Disease control

25. The Board approved allocations totalling \$4,875,000 for forty-six projects in the field of disease control. The largest amount, \$3,278,000, was for the continuation of fourteen projects for the control and eradication of malaria.

26. Allocations totalling \$856,900 were approved for projects in eleven countries for tuberculosis control,

most of them envisaging the use of chemotherapy along with BCG vaccine. For four countries — Bolivia, Ghana, Libya and Panama — UNICEF aid was approved for the first time. Most of the projects related to pilot areas with limited populations, in which the intention was to measure the importance of the problem, devise methods for control adaptable to local circumstances, and train national staff. Included in the allocations was an amount of \$331,000 to provide, in addition to isoniazid, more costly "companion drugs" for the pilot projects.

27. The Board approved allocations totalling \$461,600 for eleven leprosy control projects, including one aided for the first time in Turkey. Allocations totalling \$193,500 were also approved for eight yaws control projects, including one aided for the first time in Tonga. Allocations totalling \$85,000 were approved for other disease control projects (trachoma control in India, and bilharziasis control and aid for a centre to help control viral diseases in the Philippines).

Nutrition

28. For the group of projects in the field of nutrition, the Board approved allocations totalling \$4,901,858, including an amount of \$1,875,000 (in addition to \$600,000 available from previous allocations) to cover the cost in 1962 of freighting 110 million pounds of dried milk, and an allocation of \$707,000 for the supply of vitamin A and D capsules.

29. The Board approved seven projects totalling \$851,000 in the field of milk conservation. Of particular interest was a new project designed to promote milk production in Kenya and distribution to villages through a network of rural milk centres. This scheme reflected an interesting new approach; in the past UNICEF had given aid in many countries to dairies serving urban areas.

30. The Board approved allocations for a new goitre control project in Thailand (\$15,000) and for the continuation of a fish flour production project in Chile (\$65,000).

31. It also approved allocations totalling \$1,388,858 for ten projects in the field of nutrition education and related activities (five of which were projects aided for the first time) and one to help support several national nutritional seminars to be organized by the Inter-American Children's Institute. One of the projects — in India — constituted the beginning of a national effort to introduce training in improved practical nutrition into the technical education of personnel for rural development (agricultural extension workers, home economists and community development workers), in order to enable them to help villagers to produce better food and introduce it into the family diet. Other projects in this field approved by the Board involved training programmes in nutrition for various categories of workers — agriculturists, teachers, health personnel and village groups. The aid approved included nutrition surveys in four countries (Dahomey, Kenya, Iran and the United Arab Republic). It was expected that these would lead to plans for concrete action, as was the case with one

project (for the Ivory Coast) which the Board also approved at the session.

32. Included in the allocations for nutrition was an amount of \$584,000 to be paid to FAO to finance international expert personnel and fellowships in the FAO/UNICEF-assisted projects in 1962. The total sum required to cover the costs of expert personnel and fellowships for joint FAO/UNICEF-assisted projects is \$1,307,000, of which \$723,000 will be forthcoming from the Expanded Programme of Technical Assistance, leaving the balance to be provided to FAO by UNICEF. In response to comments by representatives that the time should be approaching when FAO would meet those costs itself or else they would be met completely from the funds of the Expanded Programme of Technical Assistance, the Board was informed that UNICEF field staff would further consult with governments and the Resident Representatives of the Technical Assistance Board in their respective areas. Further attempts would be made to secure the inclusion of as many experts and fellowships as possible in Category I of the government requests for assistance for 1963/64 under the Expanded Programme of Technical Assistance. (See also para. 7 above.)

Education: health and nutrition aspects

33. The Executive Board approved allocations totalling \$57,000 for continuation of a project in Thailand and for a new project in Haiti to help train rural primary-school teachers in nutrition and health.

Projects involving extended fields of aid

34. As the Board was informed by the Executive Director, the effects of the June 1961 Executive Board decisions making possible a wider range of requests to UNICEF would become apparent only in 1962 and later years. The Board, however, approved an allocation of \$247,000 for one project in a field of aid that was new to UNICEF: an urban project in Mexico combined

housing improvement, environmental sanitation and youth vocational guidance and training in several shantytown areas of Mexico City, building upon the self-help activities which had already begun among the inhabitants. It was expected that health and social services in the project area would be further developed.

35. The project was warmly welcomed by the representatives of the Bureau of Social Affairs of the United Nations Secretariat and the International Labour Organisation (ILO). It was also welcomed by the representative of the International Union of Local Authorities. The representative of the Bureau drew attention to the fact that the project fell within the area of interest of three programmes of concerted action of the United Nations and specialized agencies, namely, housing and related community facilities, community development, and urbanization. While the project would be significant for Mexico, he believed that other countries, particularly in Latin America, would profit from the experience. The representative of the ILO commended UNICEF for entering the field of vocational guidance and training of youth. There was a vast and urgent job to be done in that field, particularly for youth not reached by any other kind of formal education and training. Youth vocational centres had an important role to play in that respect, especially when they became true community youth centres making a broadly based contribution to the special needs of youth development and welfare in the areas they served.

Emergency aid

36. The Executive Board approved two allocations for emergency aid: to Jordan to continue the feeding of border refugees (\$199,000) and to British Honduras for public health supplies for relief following a hurricane disaster (\$66,000). Included in the emergency aid allocations recorded for the session (see table 1) is an allocation of \$58,000 for emergency food relief for the Republic of Viet-Nam following a flood disaster, which was approved by mail-poll vote on 7 December 1961.

IV. DEVELOPMENT OF SOCIAL SERVICE PROJECTS

37. At its June 1961 session the Executive Board decided to bring to the attention of the Economic and Social Council its strong support for an increase in the staff of the Bureau of Social Affairs of the United Nations Secretariat for the purpose of speeding up the preparation of UNICEF-assisted projects in the field of social services for children. It requested the Executive Director to inform it at its December 1961 session of developments which had taken place, including any action taken by the Economic and Social Council and the General Assembly (E/3525-E/ICEF/431,² para. 111).

38. In a joint report (E/ICEF/438) the Department of

Economic and Social Affairs of the United Nations Secretariat and the Executive Director of UNICEF outlined the state of technical services available to help in drawing up UNICEF-assisted projects. The report also drew attention to resolutions 830 G (XXXII) and 830 J (XXXII) of the Economic and Social Council in which the Council had stressed the importance of ensuring that these technical services should be adequate to the requirements of developing countries. The report noted that the Secretary-General had requested four additional professional posts in 1962 for work in the social field. Two of these four posts were to be allocated to "supporting services" for UNICEF-aided projects. Modest travel funds were also provided.

39. In a resolution adopted by the General Assembly

² *Official Records of the Economic and Social Council, Thirty-second Session, Supplement No. 13B.*

at its sixteenth session (1678 (XVI))³ the Secretary-General was requested *inter alia* to support UNICEF in the "new emphasis and approach" adopted by the Board in June 1961 "especially by making available adequate and appropriate technical services, including in particular those relating to social services for children and to training programmes". The Secretary-General had indicated⁴ that he believed he could provide the most urgent services requested in 1962 without further additional financial requirements, provision having been made for the two posts mentioned above.

40. In introducing the report to the Board, the Director of the Bureau of Social Affairs stated that one of the two additional posts would be for Latin America and the other for Asia. In response to questions from board members, she indicated that no guarantee could be given that occupants of the posts would deal exclusively with UNICEF activities. The question of their work priorities would be under the general direction of the respective

³ At the time of the Executive Board session the resolution had yet to be submitted to the plenary session of the General Assembly, but had been unanimously adopted by the Third Committee.

⁴ See *Official Records of the General Assembly, Sixteenth Session, Annexes*, agenda item 12, document A/5032, para. 66.

Executive Secretaries of the regional economic commissions. The importance of the obligation to provide technical support for UNICEF-aided projects has been called to the attention of the regional secretariats of the Economic Commission for Latin America and the Economic Commission for Asia and the Far East, of which the Divisions of Social Affairs are now a part.

41. The Board also received a statement (E/ICEF/NGO/75) on this subject submitted by a group of eleven non-governmental organizations.⁵

42. The Board took note both of the joint progress report on the development of social service projects by the Department of Economic and Social Affairs and the Executive Director (E/ICEF/438), and of the statement by the non-governmental organizations (E/ICEF/NGO/75).

⁵ Catholic International Union for Social Services; International Association of Schools of Social Work; International Conference of Catholic Charities; International Conference of Social Work; International Federation of Social Workers; International Social Service; International Union for Child Welfare; International Society for Rehabilitation of the Disabled; The Salvation Army; Women's International Zionist Organization; World Alliance of Young Men's Christian Associations.

V. JOINT POLICY COMMITTEES WITH FAO AND WHO

43. At its June 1961 session the Board deferred until the December board session any decision on the future composition of UNICEF representation on joint policy committees with FAO and with the World Health Organization (WHO) (E/3525-E/ICEF/431, para. 138). In response to the Board's request, the Executive Director prepared a note on these matters for consideration by the Board at its December session (E/ICEF/437).

44. With regard to the UNICEF/WHO Joint Committee on Health Policy (JCHP), the Executive Director made no recommendations for a change in practice regarding the frequency of meetings or the selection of UNICEF representation. With regard to the FAO/UNICEF Joint Policy Committee, the Executive Director shared the view expressed by the Chairman of the Executive Board and some other representatives at the June session that the best method of selection for UNICEF representation would be similar to that used for the JCHP, namely that the UNICEF representatives should consist of the chairmen of the Executive Board and the Programme Committee, and three other members of delegations elected by name (in contrast to the previous method of electing three governments from board membership, who then selected individuals who, so far as possible, were, or had been, members of their governments' delegations to UNICEF). With regard to the date of the next session of the FAO/UNICEF Joint Policy Committee, the Executive Director proposed that the next session be scheduled for October 1962. This date was based upon a recommendation of the FAO Conference to the effect that consultations be held with the Joint Policy Committee before the preparation of

the regular budget of FAO for 1964/65 regarding the extent to which provisions could be made in the budget for project personnel and fellowships in projects jointly assisted by FAO and UNICEF.

45. Several delegations took the position that the Executive Director's note about the composition of the UNICEF representation on the FAO/UNICEF Joint Policy Committee raised policy issues on which they would prefer not to take action at the session. They proposed that this question, and that of the frequency of the meetings of the Committee, be deferred until the Board took up its main policy questions, that is until June 1962. It was noted that this should not hold up the work of the Committee since it was not proposed, in any event, that the Committee should meet before October 1962. The Board agreed with this position and therefore decided to place on the agenda of the June 1962 board session the question of the composition of UNICEF representation on the FAO/UNICEF Joint Policy Committee and of the frequency of its meetings.

46. The Executive Board designated the following persons to represent it at the next session of the JCHP, scheduled to start at Geneva on 31 January 1962: the Chairman of the Executive Board and the Chairman of the Programme Committee (by virtue of their office), Dr. K. Bain (United States of America), Dr. R. Debré (France) and Dr. W. Germer (Federal Republic of Germany). As alternates, the Board designated: Dr. M. Daftari (Iran), Dr. I. Dogramaci (Turkey), Dr. R. Farah (Tunisia) and Dr. B. Kozusznik (Poland). It was understood that because of his special qualifica-

tions with respect to certain aspects of the JCHP agenda, Dr. Farah would be invited to alternate with one of the standing members for some items at the session. The

agenda would consist of the following items: tuberculosis; aid to premature infants; increasing importance of basic health services; and filariasis and onchocerciasis.

VI. REPORT OF THE COMMITTEE ON ADMINISTRATIVE BUDGET

Greeting Card Fund

47. The Board noted certain actions taken by the Committee on Administrative Budget, within its field of delegated competence, at its thirtieth session (E/ICEF/AB/L.15, paras. 3-10). The Committee had approved a change in the financial year of the Greeting Card Fund so that it would end each year on 31 August rather than on 31 January. In order to achieve this change, the Committee had extended the financial period which was to have ended on 31 January 1962 for an additional seven months, that is, to 31 August 1962. The Committee had also approved a revised budget for the Greeting Card Fund totalling \$880,400 gross to cover the nineteen-month period ending 31 August 1962. The Committee had also noted the report of the Board of Auditors on the accounts of the Greeting Card Fund for the year ending 31 January 1961.

Self-insurance reserve

48. The Board allocated \$33,786 to restore to \$200,000 the reserve for self-insurance of UNICEF supplies against

marine and warehouse losses. The amount allocated represented losses sustained since 1950 when the reserve was established (E/ICEF/AB/L.15, para. 11).

Supplementary estimates for 1961

49. The Board allocated \$85,000 for the 1961 Administrative Contingency Fund, increasing it from \$75,000 to \$160,000. It noted that the Committee on Administrative Budget had authorized the Executive Director to draw upon this fund to cover anticipated deficits in administrative and operational service expenditures in 1961 due to certain mandatory increases in salaries, wages and common staff costs and other unforeseen additional expenses (E/ICEF/AB/L.15, paras. 12-15).

Administrative and operational services for 1962

50. The Executive Board allocated \$2,426,950 to cover the first six months of the 1962 administrative and operational services budget which it had approved at its June 1961 session (E/3525-E/ICEF/431, paras. 183-187).

ANNEXES

ANNEX I

Attendance at the December 1961 Executive Board session

MEMBERS

Chairman: Mr. W. A. E. Green (New Zealand)
Afghanistan: Mr. A. H. Tabibi, Mr. A. S. Ghaus
Australia: Mr. P. J. Curtis
Belgium: Mr. A. Turine
Brazil: Mr. Paulo Pires do Rio
Bulgaria: Mr. D. D. Stamboliev
Chile: Mr. Don Alfonso Somavia
China: Mr. P. Y. Tsao
Ecuador: Mr. L. Valencia
El Salvador: Dr. A. Interiamo
Federal Republic of Germany: Mr. Guido Brunner
France: Mr. J. M. Bouquin
Greece: Mr. J. D. Retalis
Indonesia: Mr. J. B. Maramis, Mr. Tan Bian Kit
Italy: Mr. G. Scolamiero
Japan: Mr. Bunschichi Hoshi
Mexico: Dr. Miguel Bustamante, Mr. J. Calvillo-Treviño
Pakistan: Mr. Iqbal Akhund
Poland: Dr. B. Kozuszniak, Mr. W. S. Pawlik
Republic of Viet-Nam: Mrs. M. Tran-van-Chuong
Sweden: Mr. B. C. G. Holmquist
Switzerland: Mr. O. Exchaquet
Tunisia: Mr. M. Chakchouk
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ANNEX II

Description of projects approved in December 1961

AFRICA — \$2,042,500

Cameroun

Basic maternal and child health (first UNICEF aid)

E/ICEF/P/L.148 & Corr.1

Allocation: \$40,000

Period of aid: 1962

Technical approval: WHO

Particular attention will be given to the training of professional and auxiliary personnel needed for the development of health centres, which will be progressively reorganized at the "prefecture" and sub-prefecture level to provide preventive and curative health services, including special maternal and child health care, public health education, nutrition and control of communicable diseases and social welfare. Demonstration MCH centres will be established in Yaoundé, Garoua and Douala, which will provide pre-natal and post-natal care of women and obstetrical services. Special attention will be given to instruction of mothers in health and nutrition. Training activities will include the provision of fellowships for medical students to study abroad, reorganization of nursing schools, creation of a school to train auxiliary personnel in public health, and training of birth attendants. With the help of private and semi-governmental organizations, the Government will pursue its efforts to train other personnel needed for public health services, such as laboratory technicians, medical nurses, sanitation agents and nurses specialized in preventive medicine. Towards the end of 1963 it is expected that sufficient personnel may have been trained so that it will be possible to begin the reorganization of health services at the prefecture and sub-prefecture levels. The Government proposes to develop school health services which will include health and nutrition education and immunization against communicable diseases. UNICEF will provide training materials and equipment, drugs, soap, dried milk, vitamins, 4 station wagons for supervision of 3 MCH centres and for the MCH director, 3 buses for the schools and 30 bicycles, as well as stipends for 15 trainees. WHO will provide technical guidance and several fellowships for professional personnel.

Yaws control (continuation)

Allocation: \$13,500

Period of aid: 1962-63

Technical approval: WHO

This campaign covers the former territory of the Southern Cameroons, which joined the State of Cameroun on 1 October 1961. Every effort is being made to ensure the continuity of the campaign during the change-over in political status. The entire population (about 857,000) lives in areas affected by yaws. The initial treatment survey was completed in September 1960. By the end of 1960, the campaign had surveyed areas with a population totalling 700,000. It is expected that 1962 and 1963 will see the completion of resurveys and consolidation of the campaign in all affected areas. UNICEF will provide penicillin, a serological unit and transport.

Chad

Basic maternal and child health (first UNICEF aid)

E/ICEF/P/L.158

Allocation: \$89,000

Period of aid: 1962-63

Technical approval: WHO

Reorganization of the health and social services is to be effected including: the setting-up of a health infrastructure organization at the central, prefectural, sub-prefectural and country level, the integration of MCH and social activities in the functions of the health centres and initiation of a health education and community development programme in rural areas. Medical officers, public health nurses and various health technicians will continue to be trained abroad. The national school for auxiliary nurses, midwives and social workers at Fort Lamy will be reorganized and will provide a two-year course. A demonstration area will be created in Fort Lamy at the beginning of 1962. Health educators will become multi-purpose community development workers and will be trained in an *ad hoc* centre under the sponsorship of the Social Affairs Directorate. UNICEF will provide teaching equipment for the national school for auxiliary nurses, midwives and social workers, for the health and community development training centre and for the demonstration area, all in Fort Lamy; equipment for ten medico-social centres, ten sub-centres and five rural maternities; nurses' and midwives' kits, drugs, soap, milk and vitamin capsules; 16 vehicles and 40 bicycles; and stipends. Technical approval is sought from the Bureau of Social Affairs and will depend upon a visit to be made in December 1961 by a representative. Payment of stipends will depend upon the advice of the Bureau.

Congo (Leopoldville)

Basic maternal and child health (first UNICEF aid)

E/ICEF/P/L.156

Allocation: \$65,000

Period of aid: 1962

Technical approval: WHO

Six provincial health centres, each with a maternity centre attached, are foreseen as part of the national programme for care of mothers and infants. The first of these centres, to be opened at N'Djili near Leopoldville, to serve an area of 60,000 inhabitants will be a model for a general preventive health and MCH plan and will provide a demonstration area for the training of auxiliary public health personnel from all six provinces. Services will include mother and child care, school health and hygiene, education in nutrition and sanitation and immunization against communicable diseases. It is expected that the project will attract popular participation and will lead to the development of a broad community development programme affecting all aspects of urban life. UNICEF will provide equipment and drugs for the centre and the maternity annex, a small bus for training activities and two vehicles for supervisory services as well as stipends and travel allotments for 30 trainees. WHO will provide 8 experts to assist in operations of the centre. The principal WHO consultant will collaborate closely with the MCH director of the National Ministry of Health in the technical direction of the project.

Dahomey

Leprosy control (continuation)

Allocation: \$15,000

Period of aid: 1962

Technical approval: WHO

The quality of the campaign has suffered from political changes and lack of co-operation on the part of the population. Until technical assessment of the campaign has been made, the campaign will continue with little change. Assistance in 1963 will be contingent upon an evaluation and assessment of the campaign.

Nutrition survey (first UNICEF aid)

E/ICEF/P/L.141

Allocation: \$9,000

Period of aid: 1962

Technical approval: FAO, WHO

With the assistance of FAO, the Government has undertaken a survey of the nutrition status of the country and is creating a Food and Nutrition Section under the new Committee on Economic Co-ordination. The Food and Nutrition Section will define an agricultural production policy to help meet nutritional needs and will launch a programme of school feeding, school gardening, nutrition and home economics education. The project will be under the Ministry of Economics in collaboration with the Ministries of Agriculture, Education and Health. UNICEF will provide survey and field equipment, a light vehicle and a truck. The project is being assisted by an FAO expert. When his assignment is completed, his functions will be assumed by three local officials who will have been trained in the FAO/WHO/UNICEF assisted nutrition seminar to be held at Dakar in November and December this year. WHO will be invited to give technical advice on the health aspects of the project.

Gambia

Leprosy control (continuation)

Allocation: \$22,000

Period of aid: 1962-63

Technical approval: WHO

Staff difficulties, insufficient supervisory staff, insufficient numbers of mobile teams and lack of popular interest have until recently hampered progress in the inland part of the country. The appointment of an experienced new leprosy medical officer and continued reinforcement by a qualified leprosy control officer are giving new impetus to this project. Expansion of the mobile treatment activities will bring increased efficiency and greater regularity of treatment.

Ghana

Tuberculosis control (National pilot project) (first UNICEF aid)

E/ICEF/P/L.119

Allocation: \$69,000

Period of aid: 1962-64

Technical approval: WHO

The national pilot project has as its objectives: (a) the evolving of tuberculosis control methods suitable and practicable in the local situation and (b) the training of personnel. An area in Tema and a nearby rural area with 50,000 inhabitants have been selected for the project. Work will be based on a new health centre including a tuberculosis clinic. A prevalence and case-finding survey will be organized and domiciliary treatment of active cases instituted. In the first year, 10,000 persons will be examined; in the second year 40,000. A BCG vaccination campaign will also be organized. Major emphasis will be placed on the training of a Ghanaian staff by a WHO advisory team of five persons. WHO will provide a three-month fellowship for training of the national project director. UNICEF will provide X-ray equipment and supplies, vaccinating equipment and supplies, equipment for diagnostic laboratory, drugs and transport.

Yaws control (continuation)

Allocation: \$24,000

Period of aid: 1962-64

Technical approval: WHO

The incidence of yaws (10 per cent prior to 1956) has been reduced to minor proportions. The plan is now to complete the campaign and bring all areas of the country into the consolidation phase by the end of 1964. The campaign has covered areas with

a total of 3,221,000 inhabitants. By January 1962 it will have been extended to the western and central regions, hitherto excluded, to cover an additional 1,300,000 persons. UNICEF will provide penicillin, injection equipment and vehicles.

Guinea

Environmental sanitation (first UNICEF aid)

E/ICEF/P/L.139

Allocation: \$50,000

Period of aid: 1962-63

Technical approval: WHO

The long-term objective is to develop a national sanitation programme which will be carried out gradually in conjunction with the national public health services and in close collaboration with other ministries participating in the national development plan. The immediate objectives are: (a) to train the necessary sanitation personnel; (b) to develop a central sanitation section in the Ministry of Public Health and gradually establish sanitation services at the regional and local level; and (c) to establish a pilot sanitation zone where sanitarians will receive practical training in the use of methods and techniques of sanitation. The Central Sanitation Section will survey sanitary conditions, elaborate a national sanitation programme, carry out plans for improvement in water supply, refuse disposal, ensure sanitary supervision of establishments preparing, handling and distributing food, initiate appropriate legislation and collaborate in preparing plans for town-planning and housing. Sanitation engineers and sanitary technicians will be trained abroad. For the local training of sanitary agents, a school will be created to give a two-year course. A sanitation engineer provided by WHO will collaborate with a national counterpart in directing the National Pilot Sanitation Demonstration Area. A programme of sanitary education will be applied to activate community participation. UNICEF will provide equipment for training, laboratory and well construction, 3 vehicles and 30 bicycles, and stipends for 18 trainees. WHO will furnish the services of a sanitation engineer and a sanitary inspector for two years as well as fellowships for training abroad.

Ivory Coast

Social services (first UNICEF aid)

E/ICEF/P/L.95

Allocation: \$93,000

Period of aid: 1962-63

Technical approval: United Nations Department of Economic and Social Affairs, FAO, WHO

The project will provide social services to mothers, infants and children through (a) special training of professional personnel, particularly social welfare workers and assistants, (b) training of voluntary welfare auxiliaries who will organize and lead women's associations, (c) creation of new urban and rural social centres and strengthening of existing ones. In the initial phase, 1962-63, the emphasis will be on providing services for urban Abidjan and for the principal population centres in the interior, reaching more than 500 villages throughout the country. An inter-ministerial co-ordinating committee for social action will be created to harmonize the various parts of the social services programme. The hostel of the New National School for Social Welfare Training will be expanded to accommodate trainees. Each of the principal social welfare training centres will organize two welfare training courses annually to train about 20 village women. Instruction in child care, household arts and gardening will be given by trained social welfare personnel, by household instruction teams and by specialists in agriculture and health. UNICEF would provide teaching, training and home development equipment; demonstration kits for voluntary welfare assistants; vehicles for the school, for social welfare centres, for the Social Welfare Division, the Division for Moral Protection of Children and the mobile teams, and 32 motor-

ized vehicles for social workers. UNICEF will also provide funds for salaries for two years for the director and the assistant of the National Training School, honoraria for teaching personnel and stipends for trainees. The United Nations Bureau of Social Affairs will provide an expert in organization of social services and an expert in training of social welfare techniques who will be especially attached to the National Training School. FAO will advise and assist in training.

Leprosy control (continuation)

Allocation: \$33,000
Period of aid: 1962
Technical approval: WHO

This campaign has given poor results but now appears to have been satisfactorily reorganized. The plan calls for an extension of health education and training of leprosy inspectors to permit an increase to 30 supervisory circuits. A National Institute of Leprosy will be established with UNICEF assistance and a maintenance workshop will be established to service all UNICEF vehicles. Continuing assistance in 1963 will be contingent upon an evaluation and assessment of the campaign.

Nutrition education and school feeding (continuation)

E/ICEF/P/L.99

Allocation: \$106,000
Period of aid: 1962-63
Technical approval: FAO, WHO

The aim of the project is to improve the nutritional status of the population through accelerated agricultural production, public education and the initiation of school gardens and feeding projects. Government departments engaged in food production, education and social welfare will be regrouped and co-ordinated. In the past six months, the Government, assisted by FAO and UNICEF, has recruited and trained personnel for a school feeding project and has studied methods for assessing available foods and food habits. A feeding programme has been planned which will draw more on protein-rich food resources, and a programme has been prepared for the production of food in communities. Efforts have also been made in a pilot area to provide educational materials, start pilot school gardens and establish pilot pools for fish culture. During 1962 and 1963 the experience gained in the pilot area will be extended to benefit 25,000 school pupils through the creation of 100 school canteens and 75 school gardens, while further training will be given either to future instructors through normal schools or to existing teaching staff through special training courses. A mobile nutrition education unit will tour the country. The plan is subsequently to be extended to the rest of the country. UNICEF will provide equipment for 100 school canteens and 75 school gardens and for an audio-visual unit, peanut flour, fish flour and dry skim milk, a bus for the central training school, a truck for supply deliveries and four vehicles for supervision as well as stipends for 60 educational and institutional personnel and a three-month fellowship for the director of school feeding. FAO will furnish an expert for two years to prepare the initial phase and to plan the eventual extension of the project. WHO is advising on the health aspects of the project.

Kenya

Health and social services (continuation)

E/ICEF/P/L.154

Allocation: \$306,000
Period of aid: 1962
Technical approval: United Nations Department of Economic and Social Affairs, WHO

The assistance approved is for the first year of a two-year comprehensive health and social scheme aimed at co-ordinating community services to families and children by bringing together institu-

tions or activities formerly separated (government health centres, mission hospitals, mobile health team, disease campaigns, social institutions etc.). Rural health centres will be strengthened and training of para-medical personnel intensified under field conditions in order to expand the nature and scope of health services for mothers and children. The network of 130 rural health centres will be increased to 300 to ensure one health centre on the average for 20,000 inhabitants. The health centres will expand their services to include school health; control of tuberculosis, leprosy and trachoma; immunization against whooping-cough, tetanus, diphtheria and smallpox; and nutrition and health education. Health services of private missions will be co-ordinated with the Government's programme. A central advisory committee with representatives of central and local government as well as voluntary welfare bodies will co-ordinate welfare activities. Children's officers will be appointed. A new children's centre is under construction and a central in-service training institute for social services will be created. UNICEF will provide teaching equipment for 2 central and 4 provincial training centres and for a social welfare training institute; equipment for 35 rural health centres, 29 sub-centres and a children's social centre; supplies for BCG vaccination and for the leprosy campaign; a total of 49 cars, trucks and buses for training and supervisory use and for mobile health units, the social welfare institute and the children's centre; 4 scooters for the BCG campaign and 242 bicycles for health centres; stipends for about 440 trainees and honoraria for a part-time lecturer and a part-time case worker in social services. An amount of \$3,000 is approved to aid in a social survey. WHO will provide a public health administrator and a public health nurse. The Government is requesting the Bureau of Social Affairs to provide an adviser to help in the development of the training programme. The Rockefeller Foundation is also assisting in some aspects of the project.

Nutrition survey and training (first UNICEF aid)

E/ICEF/P/L.144

Allocation: \$23,000
Period of aid: 1962-63
Technical approval: FAO, WHO

The objective of the project is to eliminate dietary deficiency diseases from Kenya through a thorough assessment of the existing nutritional status, to be followed by new practical measures. The project includes plans for training in nutrition of selected local personnel and increased emphasis upon nutrition education and agricultural extension activities. A general clinical and dietary nutrition survey will include individual family and institutional studies, the determination of nutrients in human fluids and local foods, the collection of agricultural and live-stock data relative to nutrition, and the collection of related socio-anthropological and economic information. Specific surveys will also be made concerning the relation of malnutrition to disease. UNICEF will provide demonstration equipment, visual aids, reference books, laboratory and statistical equipment, examining instruments and scales, and stipends for 36 trainees. Three vehicles provided for the UNICEF-assisted MCH project will be utilized for the survey. FAO will assist through visits and technical advice particularly with respect to food production, animal husbandry, food policy and nutrition education. WHO will provide the services of a medical officer nutritionist, two non-medical nutritionists and a biochemist, four fellowships and laboratory and anthropometric equipment and supplies.

Milk conservation (rural dairy co-operatives) (first UNICEF aid)

E/ICEF/P/L.138

Allocation: \$119,000
Period of aid: 1962-63
Technical approval: FAO

This proposal is designed to take advantage of the rapidly growing milk-producing potential in many rural areas of Kenya

by fostering the growth of dairy co-operatives for the production, consumption, processing and marketing of milk and milk products through a network of rural milk centres. Fifty rural milk centres will be established to test, weigh and cool incoming milk, sell cooled milk directly to consumers, separate the cream from milk surplus to liquid needs, dispatch milk to milk depots, return skim milk to the producer or dispatch for free distribution, sale, or manufacture of cheese or cream and wash and sterilize the producer's milk cans. Each centre will have a daily capacity of 1,000 litres of fluid milk. The first two-year phase of the scheme will directly benefit about 5,000 rural dairy producers and their families as members of the 50 co-operatives. Another 50 rural milk centres will be established in the following period. Milk and milk products will be available to governmental and voluntary agencies for free or subsidized distribution to children and mothers. UNICEF will provide equipment for 50 rural milk centres, demonstration equipment for a new dairy training centre, transport for field study and supervision, \$5,000 for local staff salaries and stipends for 48 trainees over the two-year period. UNICEF will also assist in the establishment of a nutrition education unit to provide information and public demonstrations showing the importance of increased consumption of milk and other protein-rich foods, especially for children, the nutritional value of cheese and sanitary methods of handling milk. FAO will provide a dairy technologist and a rural marketing expert. A grant of \$14,000 has been made by the International Co-operation Administration towards construction of a building for the training centre.

Liberia

Yaws/leprosy control (continuation)

E/ICEF/P/L.157 and Corr.1

Allocation: \$32,000

Period of aid: 1962-63

Technical approval: WHO

The aim of the project is to continue the yaws control campaign and to undertake a leprosy control campaign, the two to be conducted jointly by multi-purpose mobile teams until a sufficiently large network of static health centres exists in the country. Treatment will be afforded in the next two years to an estimated 8,000 leprosy cases, 3,000 yaws cases and 3,500 yaws contacts. Selected personnel from the current yaws campaign will be retrained to undertake work in connexion with yaws control or leprosy control as the case may be, and rural health work. Leprosy and yaws surveys will be undertaken by mobile teams. Treatment or leprosy cases will not commence until personnel have been adequately trained and will initially be restricted to a pilot area. Yaws surveillance will be carried out both by the multi-phase mobile rural health teams and by the personnel of the clinics and hospitals. UNICEF will provide penicillin, Dapsone and miscellaneous drugs, campaign and laboratory equipment and six motorized bicycles. Vehicles will be provided from the UNICEF-assisted malaria project. WHO will provide a medical officer as project leader, a field technician for leprosy control, a laboratory technician specialized in serological work and nine fellowships as well as certain supplies and equipment.

Mali

Leprosy control (continuation)

Allocation: \$90,000

Period of aid: 1962-63

Technical approval: WHO

Change of political status, personnel difficulties, reorganization and administrative difficulties have hampered progress. However, changes in administration will make it possible to cover the central-southern part of the country, where leprosy endemicity is at its highest, in 1962. In the north, mobile units will be created to treat patients.

Mauritania

Basic maternal and child health (first UNICEF aid)

E/ICEF/P/L.152

Allocation: \$89,000

Period of aid: 1962-63

Technical approval: WHO

The long-term objective of the project is to promote the well-being of mothers and children by creating a Maternal and Child Protection Service as part of the public health service. An estimated 50,000 mothers and children will benefit. MCH centres will be established in important rural communities and at Nouakchott, the capital of the republic. Medical-social personnel and para-medical personnel will be trained and existing personnel will be given reorientation training to enable them to assume responsibilities for preventive health services. Health and nutrition education for the public will be developed with emphasis on such education for women. The pilot at Nouakchott will provide practical training for medical-social nurses and will include a day nursery. Six rural health centres will be strengthened by additional staff. As training permits, a medical-social nurse will be attached to each centre. The centres will offer education for mothers in general health matters and the care and feeding of infants. Children of pre-school age will receive special attention. The centres will distribute milk and other locally produced protein-rich foods. Training will be provided for nurses, midwives, medical-social personnel and birth attendants. UNICEF will provide teaching and training equipment for the school for social nurses, the principal MCH centre and six MCH centres, equipment for social services, kits for public health nurses, drug supplements and dried milk, transport: a bus for nurses' school, two light vehicles for supervision, four Landrovers for MCH centres and the WHO adviser, eight motorized bicycles and a cinema van; millet and peanut flour mixture, and stipends for training 20 medical-social nurses, 7 midwives and 30 birth attendants. WHO will furnish an MCH consultant and a public health nurse.

Niger

Basic maternal and child health (continuation)

Allocation: \$15,000

Period of aid: 1962-63

Technical approval: WHO

The initial objectives of the project have been achieved with a certain delay owing to political changes. A training school for para-medical personnel is in operation in Niamey and trains 20 male and 10 female nurses a year. Female nurses receive supplementary training in obstetrics. There are 5 MCH centres in operation, serving 24,000 mothers and 4,000 infants a year. MCH activities are to be extended in the next period to the towns of Zinder and Maradi and to 7 rural surrounding sub-centres. Health services and the social services will be co-ordinated to increase efficiency. UNICEF will provide 3 vehicles for supervisory activities and 12 motorized bicycles for para-medical personnel operating from the centres. Basic equipment will be supplied to the 3 urban centres and the 7 rural sub-centres, also 10 midwifery kits, drug supplements, whole milk, skim milk and vitamin capsules. WHO will provide technical advice as necessary, and, subject to the availability of funds, will provide fellowships.

Leprosy control (continuation)

Allocation: \$27,000

Period of aid: 1962-63

Technical approval: WHO

The existing network of mobile teams has been unable to reach and treat almost 40 per cent of the newly registered cases. During 1962 and 1963 the main aim of the plan is to strengthen and increase supervision. Rural leprosy communities will be established in

areas where lack of roads and a wide scattering of cases make it impracticable to use mobile treatment units.

Nigeria

Basic MCH (Western Region) (first UNICEF aid)

E/ICEF/P/L.150

Allocation: \$39,000

Period of aid: 1962-63

Technical approval: WHO

New rural health centres will be created and those in existence will be modernized. Preventive health measures, health education and expanded training will be stressed. The Government, with help from the United Africa Company, will create an Institute of Child Health with preventative and curative health sections and laboratory facilities. The school for health auxiliaries in Ibadan (annual intake: 20 community nurses, 40 sanitarians and 25 dispensary attendants) will soon move to new quarters and a field demonstration area will be created for practical training in MCH services and protection of infants against communicable diseases and malnutrition. Increased activity is planned for the Health Education Unit, whose activities have been restricted owing to the shortage of specialist staff. UNICEF will provide health education and training and demonstration equipment, including environmental sanitation equipment for the demonstration area, 60 midwifery kits for the training school and the centres, books and visual aids for the paediatrics department of Ibadan University; vaccines, drugs and dried milk; 2 buses for the training school, 4 vehicles for the health education unit and 32 bicycles. WHO will provide a Public Health Administrator for the field training area and a sanitary engineer for the training area, also fellowships for local personnel to study outside of Nigeria.

Mothercraft and homecraft (Northern Nigeria) (first UNICEF aid)

E/ICEF/P/L.146

Allocation: \$26,000

Period of aid: 1961-62

Technical approval: United Nations Department of Economic and Social Affairs, FAO, WHO

To improve domestic standards among women who have not had an opportunity to go to school, a training programme is planned to prepare women leaders and organizers who will guide and encourage the organization of "women's meetings". A small training school, to provide training in mothercraft and homecraft, is being established in the city of Zaria, a university town with many specialists who can be called upon to assist in the training. Zaria will serve as an experimental centre to train members of "women's meetings" and wives of students at local educational establishments whose husbands will be future leaders. Special one-month residential courses are planned for groups of 12 trainees at a time, priority to be given to leaders of women's groups. A total of 48 women will be trained in the three-year period. The curriculum will include cooking and nutrition, sewing and knitting, family health (including first aid and home nursing), advance literacy, gardening, organization of group work and administration. Upon returning to their groups, the trained women leaders will be closely supervised by local social welfare officers. UNICEF will provide teaching, training and demonstration equipment and a bus as well as \$13,000 to cover the salary, travel and housing costs of the project director for two years and \$6,000 for stipends for trainees.

Yaws control (continuation)

Allocation: \$67,000

Period of aid: 1962-63

Technical approval: WHO

This campaign has succeeded in reducing the incidence of infectious yaws to less than 0.5 per cent over most of the area of

Nigeria. The areas covered are those with the highest incidence, with a total population of about 9 million. The initial treatment survey is to be completed by the end of 1962 in all yaws-affected areas. Re-surveys will be conducted thereafter until incidence falls to a level where the work can be integrated into the regular health services. UNICEF will provide penicillin, field equipment and vehicles. A WHO adviser will continue to assist the campaign at least to the end of 1962 and will be joined in 1962 by a second WHO adviser.

Ruanda-Urundi

Basic maternal and child health (first UNICEF aid)

E/ICEF/P/L.155

Allocation: \$95,000

Period of aid: 1962

Technical approval: WHO

A new training school will be created for auxiliary medical personnel. Health demonstration areas will be started, rural health centres reorganized and extended and co-ordination of the participating ministries and non-governmental organizations improved. UNICEF will help in the first year (1963) of the two-year plan which includes the following:

(a) *Training*: Medical officers, public health nurses and certain other technicians will continue to be trained abroad under fellowships granted by the Government or through external assistance. For Ruanda, medical assistants and sanitary assistants, nurses, midwives and social auxiliaries will be trained in the schools at Astrida and Ruhengeri; from 1962 on, the school for state nurses and midwives of Kabgayi will accept 20 students a year for a three-year course; and in the demonstration area of Astrida, six-week refresher courses will be organized for 30 birth attendants a year. For Urundi, the school which opened at Kitega in October 1961 will train state nurses and midwives in a three-year course, while auxiliary nurses, midwives and social workers will receive 18 months of training in schools at Kitega and at Ngozi. Training for "medical technicians" will be offered at Usumbura for 10 to 15 trainees a year; and 30 birth attendants will be trained each year.

(b) *Demonstration areas* will be created in both Territories with a model health centre and two village sub-centres in each. Public health and mother and child health activities will be combined. In Ruanda, primary-school teachers will undergo a health education course in the demonstration area to prepare them to teach elementary hygiene and nutrition education in the schools.

Reorganized health institutions will receive complementary equipment and their activities will be directed toward preventive and social medicine and mother and child health. Ten medico-social prefecture centres and 10 village sub-centres will be reorganized in Ruanda; 9 medico-social provincial centres and 10 village health sub-centres in Urundi. UNICEF will provide teaching and training equipment, kits for public health nurses and midwives, drugs and soap, dried milk and vitamins, 6 utility vehicles for MCH services and demonstration areas, 8 light vehicles for medical-social centres and 6 buses for the training scheme; also stipends for 55 nurses and midwives, 80 auxiliaries, 60 birth attendants and 70 teachers. WHO will provide technical assistance through visiting regional advisers in MCH and nursing.

Senegal

Leprosy control (continuation)

Allocation: \$59,000

Period of aid: 1962-63

Technical approval: WHO

Reorganization of the Major Endemic Diseases Service and decentralization will permit greater efficiency in the campaign and closer collaboration between static and mobile treatment units.

Supervision of health workers and clinical control of patients will be carried out by 14 leprosy nurse inspectors.

Sierra Leone

Environmental sanitation (first UNICEF aid)

E/ICEF/P/L.109

Allocation: \$33,000

Period of aid: 1962-63

Technical approval: WHO

This project aims to upgrade and extend the training of health personnel by the establishment of a pilot project in a rural area in the vicinity of Bo. Emphasis in the first phase will be on reorganizing the Health Inspector's School at Bo to bring it up to the standard required by the Royal Society of Health. A new building will be constructed to accommodate 45 students in a three-year course. Successful graduates will be employed in the Government Health Service. Practical training will be combined with the development of a demonstration pilot area, which will be provided with sanitary wells and wash places, sanitary excreta disposal facilities and simple latrines, improved housing and waste disposal. A well planned health education programme will be carried out to secure the practical co-operation of the population. In the second phase a central environmental sanitation service will be developed under the direction of a public health engineer. A complete sanitary survey of the country is planned. UNICEF will provide health education equipment, research and laboratory equipment, workshop and well construction equipment, pumps and accessories, a station wagon, a truck and 20 bicycles. The project has been drawn up with the advice and assistance of a WHO sanitary engineering adviser and WHO will provide a health inspector tutor for two years, a public health engineer for the second phase, a six-month fellowship for the national health inspector and a year's fellowship for a civil engineer.

Tanganyika

Milk conservation (Arusha) (first UNICEF aid to this plant)

E/ICEF/P/L.142

Total assistance approved: \$167,000

Period of aid: 1962-63

Initial allocation approved: \$50,000

Technical approval: FAO

A dairy plant will be established in Arusha, Northern Province, with a capacity to process 30,000 litres of fluid milk daily. The plant will also be used in the initial stages for training staff in milk collection, processing and distribution. Organized milk collection, processing and distribution will permit improved balancing of milk supplies during the dry and wet seasons. By improving the keeping quality of milk and broadening distribution, it will be possible to provide good quality milk for areas of low production. The success of this project is expected to lead to the development of milk production in other potential milk-producing areas of the country. An Area Dairy Board will be established (representing producers, distributors and consumers) to license premises of producers and distributors, regulate prices and advise on marketing of milk and milk products. The scheme will be financed by the Government through a loan to the Tanganyika Farmers' Association. The Government will arrange for the free or subsidized distribution of milk by provincial, municipal and local authorities to mothers and children through health centres, primary schools and institutions. UNICEF will provide equipment for dairy and \$5,000 to assist in costs of installation of equipment. FAO will provide a plant management adviser and a milk marketing expert. FAO will also provide two fellowships for plant personnel to attend the dairy training course in Bombay, India.

Togo

Basic maternal and child health and environmental sanitation (first UNICEF aid)

E/ICEF/P/L.97

Allocation: \$87,000

Period of aid: 1962

Technical approval: WHO

The plan for 1962-63 includes:

(a) Training of medical personnel and auxiliary midwives so that within two years all maternities and dispensaries will be staffed with qualified personnel; two new training schools will be established: one for nurses and midwives and one for training in sanitation;

(b) Equipping a network of maternities and dispensaries in order to ensure proper protection to mothers and children;

(c) Establishing a pilot and demonstration area for public health and environmental sanitation including the drilling of 200 wells, improvement of excreta disposal methods, public health education, housing improvements and rodent control.

The allocation approved is for the first year (1962) of the two-year plan. In a later stage these activities are to be expanded and become part of a community development project, ultimately to cover the entire country. UNICEF will provide equipment for maternity and paediatric wards of home hospitals; supplies and equipment for training, laboratories, health education, workshops and well construction; transport; and stipends for 20 trainees. WHO will provide for the two-year period a nursing adviser, a sanitary engineer, a sanitary technician, 6 fellowships and certain supplies.

Yaws control (continuation)

Allocation: \$54,000

Period of aid: 1962-63

Technical approval: WHO

During the control campaign, 1956 to mid-1959, 566,822 persons were examined out of an estimated population of 1,050,000; 12 per cent were found to have yaws; about 50 per cent were infectious cases. The incidence of yaws was reduced to 3 per cent and the incidence of infectious yaws to 1 per cent, but increased by the end of 1959 to 4 per cent yaws and 1.3 per cent infectious cases. The campaign is now to be reopened and continued during 1962/1963 with intensified case-finding and treatment throughout the country and with mobile services co-operating more closely with the fixed medical centres. Mass health publicity will be intensified with the aim of reaching 95 per cent of the total population. About 50,000 to 60,000 cases and 180,000 contacts will be treated in the initial treatment survey. Another 20,000 cases and 100,000 contacts will receive treatment in the re-survey. Nine mobile units will be set up as a first step in establishing the new Endemic Disease Service; a total of 13 mobile units are planned, one for each sub-division. WHO will provide a doctor, a laboratory technician, fellowships and some equipment. UNICEF will provide penicillin, campaign equipment and 16 vehicles.

Tunisia

Basic maternal and child health (continuation)

E/ICEF/P/L.115

Allocation: \$104,000

Period of aid: 1962-63

Technical approval: WHO

The number of nurse-midwives graduating each year is to be increased from 15 to 25. Auxiliary nurses are trained at present

in three schools. Seven new centres will be set up to train auxiliary personnel and the number of trainees will be increased from 130 to 340; 397 nurse-sanitarians are undergoing an *ad hoc* training course. An MCH training and demonstration centre was opened with UNICEF/WHO help in the spring of 1960. A second such centre will be created in 1962 in a semi-rural area near Sfax. Fourteen full-time paediatricians will be responsible for supervision of all MCH work in their respective regions. They will co-ordinate the work of local MCH services with other local services such as environmental sanitation, health education, homecraft-mothercraft, and the work of rural maternity wards and hospital services. Of the 53 MCH centres which were to be set up in 1959/61, 33 are fully staffed and in operation; the remaining 20 are under construction or being reconditioned. In 1962/63 an additional 20 small centres will be set up, chiefly in rural areas. Rural maternity wards now being constructed are linked by 8 mobile teams with MCH centres. Two rural maternity wards are in operation and 4 are nearing completion. Another 10 will be set up in 1962/63. UNICEF will provide equipment and supplies for the demonstration centre of Sfax, 9 new rural maternity wards and 20 new MCH centres, training courses, vaccination equipment and vaccines, 13 vehicles for the regional paediatricians, 16 vehicles for supervision/evacuation for the MCH centres and 8 vehicles for vaccination; also stipends for 24 nurse-midwives, 48 auxiliary nurses and for 14 regional paediatricians for a seven-day seminar and introductory course; and salary supplements for 29 nurse-midwives assigned to rural MCH centres.

Nutrition education (continuation)

UNICEF/P/L.149

Allocation: \$59,000

Period of aid: 1962-63

Technical approval: FAO, UNESCO, WHO

Highlights of the plan for 1962-63 are as follows:

(a) *Visual media*: Mass production will be undertaken of 22 different posters, flannelgraphs, two sets of filmstrips, a series of photographs and charts and a number of manuals which have proven to be the most effective for teaching nutrition in schools, teacher training colleges, fundamental education centres and training courses of the Ministry of Health and Social Welfare.

(b) *Training*: Four two-week introductory courses will be offered for 460 teachers at the University of Tunis under the auspices of the Ministries of Education and Health and Social Welfare. Three-day seminars will continue to train the remaining 550 directors of school lunch-rooms. Three-day seminars on the practical organization of school lunch-rooms and the teaching of nutrition to children will be given for 100 students of teacher training colleges; similar seminars will be held for 100 persons catering in children's homes and villages, hospitals and holiday camps. A six-day seminar to be held in Tunis in 1962 will provide the first link between school feeding and nutrition schemes of the Ministries of Health and Education with officials responsible for promoting community gardens and poultry runs.

(c) *Nutrition education*: Increasing attention will be paid to working nutrition education into national development plans and steps will be taken further to co-ordinate the Nutrition Section of the Ministry of Health and Social Welfare with other governmental services.

UNICEF will provide audio-visual equipment and equipment for visual aids production; 3 vehicles for supervision of school feeding and nutrition education; a vehicle for the visual aids production centre; funds for printing and production costs; stipends for 1,310 trainees; and salary for 6 months for a specialist in publications and visual aids.

Uganda

Leprosy control (continuation)

Allocation: \$40,000

Period of aid: 1962-63

Technical approval: WHO

The progress of this campaign has been satisfactory. The existing leprosy control system, based on 85 treatment villages, out-patient clinics and dispensaries, will be continued. Emphasis will be placed on a search for unregistered cases, increased regularity of treatment by extension of mobile circuits, closer co-ordination of services, public health education and the introduction of rehabilitation measures for crippled cases.

ASIA — \$2,509,500

Afghanistan

Basic maternal and child health: medical training (continuation)

Allocation: \$24,000

Period of aid: 1962

Technical approval: WHO

This project, started in 1950 with the establishment of three MCH centres and a small midwifery school, has expanded to include comprehensive MCH services in Kabul and gradual extension to the provinces, rural health training and demonstration areas, and health services in connexion with community development. The allocation now approved is to help improve the training of medical undergraduates. A field training area is to be developed by co-ordinating several service units in Kabul and in the nearby rural health demonstration area where undergraduates of the Departments of Paediatrics, Obstetrics and Social and Preventive Medicine of the University of Kabul will receive practical training. UNICEF will provide laboratory and hospital equipment, supplies and equipment for MCH centres and transport.

Burma

Basic maternal and child health (continuation)

Allocation: \$17,000

Period of aid: 1962

Technical approval: WHO

Following a visit by the WHO Regional MCH Adviser to Burma in June 1961, certain recommendations were made to the Government for improvement of the MCH and rural health services. The allocation approved is: (a) to provide equipment for a new hospital to serve about 100,000 people in a needy area and to train midwives; and (b) to provide kits for lady health visitors posted to rural services.

Environmental sanitation (continuation)

Allocation: \$27,500

Period of aid: Jan. 1962 - Mar. 1963

Technical approval: WHO

In 1956, with assistance from UNICEF and WHO, the Government added an Environmental Sanitation Section to the national rural health training and demonstration centre near Rangoon to give practical and theoretical training to a large number of health workers, and to improve environmental sanitation in the training area. The area of operations (then 27 villages with about 16,000 people) has since expanded to cover 115 villages with 67,000 people. Progress was slow at first, but the original targets have been met or exceeded in the past 18 months when more than 500 health workers, ranging from health officers to public health inspectors and health assistants, received training. During 1962 and early

1963 the Environmental Sanitation Section will improve training facilities by introducing safe water supplies and proper disposal of wastes in selected schools, health centres and sub-centres in the expanded area of operations and to villages. UNICEF will provide pumps, piping and well-drilling equipment.

Social services (first UNICEF aid)

E/ICEF/P/L.96

Allocation: \$13,000

Period of aid: 1962

Technical approval: United Nations Department of Economic and Social Affairs

Consultation: WHO

With the aim of raising the level and qualifications of all grades of personnel engaged in social service, this project, developed in consultation with the United Nations Regional Social Affairs Office, will be the first step in a broader social service programme. Short courses in family and child welfare will be provided during 1962 to 210 social welfare workers, about half from government service and half from voluntary institutions. The training programme will be organized by the Directorate of Social Welfare, assisted by the Rangoon Social Services Council (comprising representatives of many government departments) and by voluntary agencies. Teaching staff will be drawn from these sources and from the University of Rangoon, the Harcourt Butler Institute and the School of Social Work. Training will range from a seminar for executive staff at the senior civil service rank to refresher courses for community-level workers. The courses will include instruction in health and nutrition education and in social welfare concepts and methods. At the local level classes will be held in volunteer leadership training and in homecraft. UNICEF will provide teaching aids and materials; tools for workshops and demonstration play material; equipment for family clubs, stipends for 210 trainees, honoraria for teaching staff, two buses and nine autocycles. The Bureau of Social Affairs of the United Nations Secretariat is providing in 1961 an adviser in social welfare training to advise the School of Social Work and to help in planning the training programme; an adviser in family and child welfare will be provided in 1962.

Cambodia

Basic maternal and child health (continuation)

Allocation: \$15,000

Period of aid: 1962

Technical approval: WHO

UNICEF aid has been given in the past eight years to the maternity and paediatric wards in the main hospital in Phnom Penh, to midwives' training, to the rural health training and demonstration project near Phnom Penh, and to 10 MCH clinics and 4 maternity wards in provincial capital towns. The Ministry of Public Health, with the help of WHO and the Colombo Plan, proposes to upgrade selected wards in the main hospital in Phnom Penh to provide improved teaching facilities for student nurses taking the professional course, for auxiliary nurses and for first-year student midwives. A new 110-bed block, completed in 1961, is to be remodelled in accordance with WHO recommendations and will be used for teaching. UNICEF will provide ward equipment for this teaching block and drugs and diet supplements for the MCH project.

Yaws control (continuation)

Allocation: \$8,000

Period of aid: 1962-63

Technical approval: WHO

By mid-1961, a total of 225,000 persons had been examined (a coverage of 90 per cent), and 12,300 cases and 70,000 contacts

had been treated. The control teams give smallpox immunization to all persons examined. The Government will shortly activate two additional teams, bringing the total to six, and it is estimated that the campaign can be completed by the end of 1963. UNICEF will provide additional transport, equipment and penicillin to complete the programme.

Ceylon

Basic maternal and child health (continuation)

Allocation: \$110,000

Period of aid: 1962-63

Technical approval: WHO

This project started with development of MCH and paediatric training and services. Services were later expanded to provincial areas and then to paediatric wards in provincial hospitals. The Health Department of Ceylon, in co-operation with a WHO advisory team, has assessed the progress of the project and, as a result of satisfactory findings, has requested equipment for 8 more paediatric hospitals and for maternity wards in all assisted hospitals. A two-way referral system will be maintained between hospitals and peripheral health centres. UNICEF will provide the equipment requested and will assist training programmes in post-basic paediatric training schools for nurse-aides and midwives. Additional transport, kits for newly qualified public health nurses and a continuing supply of DDS for UNICEF-assisted centres will also be provided by UNICEF.

China

Basic maternal and child health (Taiwan) (continuation)

Allocation: \$63,000

Period of aid: 1962

Technical approval: WHO

An MCH institute has been established primarily to give orientation and refresher training in MCH to permanent health personnel. All 22 health centres and 371 health stations in Taiwan have been upgraded with new equipment to support MCH activities. All private practising midwives (about 1,400) are being given refresher training and are encouraged to work with the health centre personnel. Mobile field teams have been established and will visit all health stations and health centres in a two-year cycle, affording both supervision and in-service training on an integrated basis including MCH, malaria control, tuberculosis control, VD and trachoma control activities. UNICEF will provide supplies, equipment and two-wheel transport to further improve the services and training.

Social services (Taiwan) (first UNICEF aid)

E/ICEF/P/L.143

Allocation: \$50,000

Period of aid: 1962-63

Technical approval: United Nations Department of Economic and Social Affairs, WHO

The Government has developed a programme for improving child welfare services, particularly day-care centres for young children. Basic short-term training courses will be organized in the first two years for 294 persons already employed in child welfare services, including 32 supervisors. During this period, 22 day-care nurseries for farmers' children are to be developed on a demonstration basis in the 22 counties and municipalities of Taiwan. Another 106 existing nurseries of the same type are to be improved. Their staff will be among the first to receive training when the training programme begins. UNICEF will provide training supplies and equipment for nurseries and training centres, transport for training and supervision, stipends for training of 32 supervisors and 262 child care workers and honoraria for instructors.

Hong Kong

Social services (first UNICEF aid)

E/ICEF/P/L.100/Rev.1

Allocation: \$53,000

Period of aid: Sept. 1962 - Aug. 1964

Technical approval: United Nations Department of Economic and Social Affairs, WHO

Among the many problems created by the continuous influx of immigrants over the past 15 years, the need for child welfare services is one of the most important, particularly because so many of the immigrants are in dire need. Considerably expanded training is the key to advancement of the Government's Child Welfare plan. The Government is employing three international consultants on two-year assignments to help establish an expanded social welfare training scheme in accordance with the recommendations of an international expert on social welfare. A technical advisory committee will be formed to assist in the organization and conduct of the over-all training scheme, which will include all aspects of training: basic, refresher and in-service. UNICEF will provide the salary of a training officer, stipends for trainees, honoraria for lecturers and translators, teaching equipment, a vehicle, and equipment to refurbish a mobile library unit serving children.

India

MCH: upgrading of medical education (Departments of Preventive and Social Medicine) (first UNICEF aid)

E/ICEF/P/L.129

Total assistance approved: \$194,000

Period of aid: 1962-63

Initial allocation approved: \$99,000

Technical approval: WHO

The Government of India is undertaking large-scale expansion and improvement of medical education in India. UNICEF/WHO assistance for upgrading paediatric training has already been given to 24 medical colleges. UNICEF will now help to upgrade existing Departments of Preventive and Social Medicine, particularly by helping to develop their rural and urban field training areas, and to add nutrition to the training curricula. Help will be given in 1962 and 1963 to 15 departments, which must meet specified criteria. The project will require co-operation of the medical college authorities with the local State Health Department and with municipal and district health organizations for the development of urban and rural training areas. Senior members of the teaching staff will be deputed for training at nutrition courses or seminars to be organized in India. UNICEF will provide visual teaching aids, textbooks and other materials for the 15 departments; equipment for the rural and urban training areas; 2 vehicles; and stipends and travel costs for teaching staff attending nutrition courses or seminars. WHO has made budgetary provision for two posts for visiting professors of preventive and social medicine.

Assistance to blind children (first UNICEF aid)

E/ICEF/P/L.106

Allocation: \$51,000

Period of aid: 1962

Technical approval: United Nations Department of Economic and Social Affairs

The National Centre for the Blind at Dehra Dun, Uttar Pradesh, is the only plant in India producing Braille books and appliances for the blind. The centre operates a model school for blind children, which is to be used increasingly as a training centre for teachers of blind children. It now accommodates 50 resident pupils, but is to be increased to take 100 pupils, and to offer full secondary-school education. Special training courses will be organized for

the 215 teachers of the 94 existing schools for blind children in India. About 60 per cent of the Braille books and appliances manufactured at Dehra Dun are distributed to these 94 schools, which accommodate 4,000 pupils, almost all children. UNICEF will provide equipment for the model school, the Braille printing press and a workshop; also stipends and travel costs for trained teachers requiring additional training in methods of educating the blind and for teachers employed in schools for the blind who have not had teacher-training. This proposal has the technical approval of the Bureau of Social Affairs of the United Nations secretariat and the support of WHO. A United Nations expert, assigned to Dehra Dun for six months under the 1961 Technical Assistance programme, will be helpful in training blind youths in simple workshop skills. The National Centre for the Blind is supported by central government funds.

BCG vaccination campaign (continuation)

Allocation: \$70,000

Period of aid: 1962

Technical approval: WHO

Approximately 20 million tests are accomplished annually. By mid-1961, the campaign had achieved about 168 million tests and 59 million vaccinations. The campaign is now being integrated with the developing national tuberculosis control programme. In 1962 WHO will appoint a short-term consultant to evaluate the programme and to assist in drawing up a new plan of operations, taking into account the field experience and technical guidance of the National Tuberculosis Institute. UNICEF will provide additional transport, supplies and field equipment.

Trachoma control (continuation)

Allocation: \$49,000

Period of aid: 1962

Technical approval: WHO

Six States in India are at present conducting field trials in 11 community development blocks to test various methods of treating trachoma and of approaching the people. There are an estimated 264,000 cases to be treated. The trials were late in starting, but by mid-1961 a total of 72,000 cases (all children under 10 years of age) were under treatment. The projects are reported to be progressing well. Previous allocations by UNICEF provided only for trial projects in 5 community development blocks, but the newly formed state of Gujarat later entered the programme with trials in another 6 blocks. UNICEF will provide antibiotic ointment to finish the trials in all 11 blocks. By that time—the end of 1962—the “trachoma map” of India, which is being prepared by a series of surveys, will be completed.

Applied nutrition (continuation)

E/ICEF/P/L.151

Total assistance approved: \$750,000

Allocation for 1962: \$500,000

Technical approval: FAO, WHO

Practical nutrition training is to be introduced into the basic technical training of agricultural extension workers, home economists and community development workers. Throughout India, this will eventually involve 15 colleges of agriculture, 4 home science schools, 5 training centres for social education organizers and 60 rural extension training centres. Demonstration training areas will be created in community development blocks in conjunction with each training institution adopting the new approach. The Government of India, which contributes substantially to the financing of these institutions, hopes that all may be brought into the plan during the three years 1962-1964. In that case, the total request to UNICEF, if developed along the lines of the present instalment, would amount to \$2,890,000. In the new training plan,

students will live and work in villages during their courses; their teachers will be actively involved in local planning and development. At the village level, the programme will assist communities by providing practical advice and demonstrations, both for producing better food and for introducing it into the family diet. As in the currently assisted programmes (in Orissa, Andhra Pradesh and Uttar Pradesh), poultry keeping, fish farming, milk production and cultivation of legumes and other sources of protective food will be encouraged. Part of the increased production of these foods will be distributed free to children. The State of Madras has already developed detailed plans to implement this new approach, involving 7 training centres for rural extension workers and 3 schools for home economists. This would be the first state plan assisted under this allocation. The assistance approved, \$750,000, will probably cover three states, including Madras. The Board approved an allocation of \$500,000 for 1962. The Executive Director will ask the Board for further authority as soon as necessary to meet the desire of additional states to participate.

Milk conservation: training of dairy personnel (continuation)

Allocation: \$100,000
 Period of aid: 1962
 Technical approval: FAO

In January 1961, when the Board approved aid for this project, approval was given for \$200,000 for the services of international advisers during the years 1961 (part) to 1963 and \$50,000 of this sum was included in the actual allocation for 1961. An allocation of \$100,000 is now approved for the year 1962. The first Dairy Teachers' Tutorial Workshop to be held in India took place at the National Dairy Research Institute at Karnal in Punjab State in May/June 1961; 24 Indian dairy teachers from 5 dairy training institutions participated in the course. Two FAO advisers financed by UNICEF, another under the FAO/EPTA programme and an adviser from the United States Technical Cooperation Mission-ICA took part. The course was regarded as thoroughly useful. The FAO advisers then took up their work in Indian dairy training institutions. There are 5 such institutions in the plan and 2 more advisers will be taking up duty in 1962. Another tutorial workshop will be held in the summer of that year.

Indonesia

Handicapped children (continuation)

Allocation: \$29,000
 Period of aid: 1962
 Technical approval: United Nations Department of Economic and Social Affairs, WHO

The first handicapped children's centre was developed in Solo in 1953. Since then 9 other handicapped children's centres have been established and are presently caring for a total of about 1,600 children a day as in-patients or out-patients. The capacity of the centres is expected to increase to 2,200 by 1963. The total number of children treated since these centres were opened is 6,650. The movement is supported mainly by voluntary contributions, but the Government, through the Ministries of Social Welfare, Health and Defence, provides considerable assistance for capital expenditure, subsidies for the operating cost of the centres and professional services. UNICEF will provide transport, physiotherapy equipment and wheel chairs for the centres not yet assisted, and also the local costs of refresher courses for personnel employed at the 10 existing centres.

Leprosy control (continuation)

Allocation: \$75,000
 Period of aid: 1962-1963
 Technical approval: WHO

A pilot control project carried out in 1958/59 indicated that leprosy is not severe enough in Indonesia to warrant large expendi-

tures for a national mass campaign. The project has therefore been planned to make use of existing services and facilities, in order to achieve control as economically as possible. Progress has been good. A total of about 26,000 patients were under treatment in June 1961. The aim is to bring a total of 40,600 patients under treatment by the end of 1963, expanding control operations to four new project areas in the next two years. UNICEF will provide additional transport, field equipment and drugs.

Nutrition: training, education, and food production (continuation)

Allocation: \$66,000
 Period of aid: 1962
 Technical approval: FAO, WHO

Plans have been completed with the help of an FAO consultant for a national nutrition survey to begin in November 1961; an FAO expert will help to carry out the survey. An FAO social anthropologist will make a survey of Indonesian villages during September-November 1961 as a basis for planning expanded nutrition education activities. With advice from WHO, the Government will conduct a dietary survey among pregnant and lactating women; UNICEF has provided equipment and transport for the survey and for training nutritionists. In the first phase of a national programme in applied nutrition, the Government will proceed this year to strengthen and expand nutrition projects (in training, education, and applied nutrition) in central Java where the Central Java Nutrition Board has been working for the past seven years. These projects will provide practical experience to guide the expansion of nutrition projects into other provinces and may serve as a field practice area for nutrition workers from other parts of the country. UNICEF will help with: training courses in nutrition for 240 governmental and non-governmental leaders in the community; village nutrition education through 30 demonstration and training centres to be established at municipal headquarters throughout the province; school nutrition education in 10 demonstration schools; fresh-water fish culture activities and training; and increased soybean production. A part of the increased production will be set aside for free or subsidized distribution to needy children.

Malaya, Federation of

Basic MCH: rural health (continuation)

Allocation: \$134,000
 Period of aid: 1962
 Technical approval: WHO

The Federation of Malaya has a comprehensive plan for the establishment of a network of about 100 rural health units which will be needed to provide an integrated public health service for the entire country. For the second five-year plan (1961-65) the Government has allocated funds for 37 units. The Government has already considerably expanded its training programmes, and will continue to expand them until sufficient numbers of trained personnel are available yearly to maintain the health services as planned. Thirty-five rural health units will be established by the end of 1962. UNICEF has already provided the supplies, equipment and transport for 21 units and will now provide for an additional 14.

Tuberculosis control (continuation)

Allocation: \$73,000
 Period of aid: 1962-63
 Technical approval: WHO

By mid-1961, the training programme in the TB control demonstration/training area was well on its way. The WHO Regional Tuberculosis Advisory Team will help to draw up a detailed plan of operations for the epidemiological survey, and personnel of the team will be assigned to the Federation of Malaya at mid-1962 to take over from Colombo Plan personnel who will have completed

their assignments. National counterparts for all international personnel have already been assigned. Plans for the national programme include case-finding and domiciliary chemotherapy and nation-wide BCG vaccination on a permanent basis. The Government expects to vaccinate new babies, children entering or leaving primary school, and tuberculin-negative contacts of tuberculosis cases. UNICEF will provide additional assistance to equip the training/demonstration area and for the BCG aspects of the programme.

Yaws control (continuation)

Allocation: \$10,000
Period of aid: 1962-63
Technical approval: WHO

Yaws control operations have now been successfully consolidated in the States of Kelantan and Trengganu, where the highest prevalence of yaws existed, and surveillance operations have been instituted. With the assistance of the WHO adviser in communicable diseases, the Government has extended control operations to three other states (Pahang, Kedah and Perlis) in which high incidence has been detected. Five teams are now working, and a sixth will be activated in 1962 if necessary. UNICEF will provide additional transport, field equipment and penicillin.

*Netherlands New Guinea **

Basic MCH, training and rural health (continuation)

Allocation: \$36,000
Period of aid: 1962
Technical approval: WHO

The appointment of a Government paediatrician and the advisory services of a WHO paediatrician have resulted in considerable expansion of the UNICEF-assisted MCH project. A new nurses' training programme is to be instituted, which will be graduating 50 male and female nurses and 6 nurse/midwives a year in five years. A rural health pilot project, planned with WHO assistance, is to be launched in July 1962. UNICEF will provide additional MCH centres and training equipment and supplies, drugs and diet supplements and transport for these projects.

Pakistan

Basic maternal and child health (continuation)

Allocation: \$167,000
Period of aid: 1962-63
Technical approval: WHO

The Government is expanding facilities for the training of nurses, midwives and health visitors. Enrolment in all existing training schools has greatly increased. UNICEF will provide additional training equipment and further equipment and expendable supplies for MCH centres which will be progressively integrated with rural health centres as the project develops.

Basic MCH: rural health (continuation)

Allocation: \$118,000
Period of aid: 1962-63
Technical approval: WHO

Progress is being made in implementing the rural health programme. Ten trial demonstration/training units in West Pakistan have been established, and an additional 30 units for which UNICEF aid has been voted are expected to be set up by mid-1962. In East Pakistan, progress has been slower: four of the ten trial units are

* There is a dispute about this Territory, as regards its political status, between the Government of Indonesia and the Government of the Netherlands.

to be ready by the second quarter of 1962, the remaining six units by the third quarter. UNICEF will provide equipment for 17 referral hospitals (12 in West Pakistan and 5 in East Pakistan) and supplementary equipment to improve the efficiency of nine of the hospitals in West Pakistan previously assisted. As recommended by WHO, staffing requirements are being reviewed on an institution-by-institution basis until the output of trained staff has reached a level that will permit minimum staffing criteria to be established. In 1963 WHO will provide a consultant to undertake a comprehensive survey of hospitals and laboratories in Pakistan.

Mothercraft and homecraft (continuation)

Allocation: \$84,000
Period of aid: 1961-62
Technical approval: United Nations Department of Economic and Social Affairs

The Government gives high priority to a community development programme in the principal urban areas of the country where severe social problems have been created by rapid urbanization. These projects are based largely on the self-help principle, with government support in the form of two social welfare organizers per project. Previous UNICEF assistance was for 25 urban community development projects. Supplementary aid will now be provided to those 25 projects, to a further 21 projects already in operation and for 21 new projects envisaged for 1961/62. UNICEF will provide transport for increased mobility of field workers; simple training and education equipment; materials for mothers' and youth clubs and community centres; and sanitation equipment (for clean latrines, drinking water, garbage disposal and fly control). WHO extends advice on activities in the health field. The programme has been developed in Pakistan with the advice of the United Nations Bureau of Social Affairs. During 1961 the United Nations provided three advisers.

Philippines

Basic MCH: school health education (continuation)

Allocation: \$26,000
Period of aid: 1962-63
Technical approval: WHO

This scheme is directed at improving health education in primary and secondary schools throughout the Philippines, through better training of the responsible professional staff. Work began in 1961, as planned, with a summer institute attended by 59 key persons (including tutors from teacher training schools, school supervisors and school physicians) and the award of six grants for post-graduate training in health education in the Philippines. This scheme will continue in the next two years with annual summer institutes; two regional workshops each year for school supervisors and school physicians; and five more grants for advanced training in health education. One primary school and one secondary school will be upgraded for practical demonstration. WHO is providing an expert in school health education and has given technical approval to the scheme. UNESCO has also been consulted. UNICEF will help in the remaining two years of the project, through the provision of stipends for trainees, grants for post-graduate studies, honoraria for lecturers and materials to upgrade the demonstration schools.

Social services (continuation)

Allocation: \$41,000
Period of aid: 1962-63
Technical approval: United Nations Department of Economic and Social Affairs, WHO

The aim of the project is to develop and improve social welfare services for children and families as part of the total development

of the country's social service programme. In the first year of operation (1961/62), 15 persons performing executive and supervisory functions were trained in the first executive development seminar and 5 local one-year grants were awarded. By the end of the year, 15 more executives and 40 social workers and day-care workers will have been trained through seminars and in-service training courses. For 1962/63 UNICEF will provide: stipends for 120 participants in training courses, study grants and honoraria for teaching staff and assistance for a pilot project in foster family care under which 30 children will be provided with home care instead of institutional care. Specific studies have been planned, — on how to adapt child welfare services to the provinces, the plight of juvenile offenders, the tendency of destitute parents to give up their children etc. These studies will cost \$US10,333, of which UNICEF will provide \$6,000.

Tuberculosis control (continuation)

Total assistance approved: \$172,000
 Period of aid: 1962-64
 Initial allocation approved: \$36,000
 Technical approval: WHO

The Government has developed a tuberculosis treatment programme of some proportions. Tuberculosis consultants, trained with the assistance of WHO, have been appointed in each of the eight public health regions. Over 100,000 cases have been diagnosed in the 52 tuberculosis clinics established with the existing mobile and static X-ray facilities, and the Government expects to find about 40,000 new patients a year. Tuberculosis clinics are to be expanded until there is one for every 250,000 population (about 100 clinics). Patients are treated mainly by ambulatory chemotherapy through the clinics and receive drugs through the 1,300 rural health units and village (*barrio*) sub-stations. UNICEF and the Health Department will provide equal quantities of isoniazid for free distribution to about 50,000 patients per year for the next 3 years. The Government plans to establish several pilot demonstration areas in which tuberculosis personnel can receive training and in which field techniques can be tried out and epidemiological studies conducted. One such demonstration area has been operating since 1955; plans for establishment in 1963 of a second area in Cebu have been drawn up with the assistance of the WHO regional tuberculosis adviser. The WHO Regional Tuberculosis Advisory Team will participate in the planning of the project and WHO plans to provide a tuberculosis officer and public health nurse to assist in the development of the demonstration/training area. UNICEF will provide X-ray units, supplies, laboratory equipment and drugs.

BCG vaccination: consolidation (continuation)

Allocation: \$27,500
 Period of aid: 1962
 Technical approval: WHO

The mass campaign began in 1951 and achieved its original objective of 8 million tests by the end of 1957. After various trials, BCG work was then integrated into the regular health services, with 20 teams training rural health personnel to do the BCG testing and vaccination. During 1960 nearly 70 per cent of the testing was performed by personnel of the rural health units. In 1962, BCG work and other health activities will be decentralized. Ten teams will be retained and assigned to regions to do assessment work and continue training. The target for 1962 is 1.2 million tests. A tuberculosis consultant, assigned to each of the 8 regional health offices, serves as the leader of the regional BCG assessment team, thus ensuring co-ordination of the TB and BCG work in the field. WHO is currently making an assessment of these TB control measures. UNICEF will provide field equipment and 8 replacement vehicles.

Leprosy control (continuation)

Allocation: \$30,000
 Period of aid: 1962-63
 Technical approval: WHO

When UNICEF first extended aid to this project, in 1954, there were 9 sanatoria and 4 static skin clinics caring for a total of about 7,000 patients. By the end of 1960, 10 mobile and 4 static clinics had found over 13,000 cases. The Government early in 1961 added to the field staff 40 nursing attendants with special training in leprosy control. A leprosy consultant will be assigned in 1962-63 to each of the 8 newly created regional health offices and an additional 16 nursing attendants will be recruited for follow-up work. UNICEF will provide additional drugs and equipment and transport for the nursing attendants.

Bilharziasis control (continuation)

Allocation: \$17,000
 Period of aid: 1962-63
 Technical approval: WHO

The aim of this project is to develop and operate an effective bilharziasis control programme in all endemic areas. Two regional bilharziasis teams, for which UNICEF has provided equipment, have been recruited and trained, and are now working in the field. UNICEF will equip 2 more teams to complete coverage of the four regions in which oriental bilharziasis is endemic. FAO has assigned an agricultural engineer to assist in the training of these advisory teams. The WHO regional office continues to give technical advice and guidance, and awarded a short-term fellowship in 1961 in the field of mollusciciding.

Disease control: virology centre (first UNICEF aid)

P/L.121

Allocation: \$19,000
 Period of aid: 1962-63
 Technical approval: WHO

The Government in 1960 established the Virology Centre of the Bureau of Research and Laboratories, Department of Health, with the aim of developing and strengthening facilities for the laboratory diagnosis of diseases of a viral nature in order to assist in their control. In accordance with WHO recommendations, the Centre will be established as a branch of the Bureau of Research and Laboratories, under a chief virologist, with two sections: one for serology, egg and animal work and one for tissue culture work, media and sterilization. A diagnostic and reference laboratory will provide epidemiological services and advisory services to peripheral and private laboratory units. The laboratory will produce sufficient virus antigens and sera for routine virology work for the work of the Centre and also for that of peripheral and private laboratories. Advisory services to smaller laboratories will emphasize the collection and processing of specimens. Services to regional laboratories will stress methodology in laboratory diagnosis of virus diseases. The Centre will train professional and auxiliary laboratory staff in virological work, starting with in-service training of its staff. UNICEF will provide technical equipment for tissue culture work and viral serology, laboratory and chemical supplies and a vehicle. WHO provided three fellowships for technical staff of the Virology Centre during 1959 and 1960 and the services of a short-term consultant in 1960. Additional consultant services will be provided late in 1962 and in 1963.

Thailand

Basic MCH and training (continuation)

Allocation: \$134,000
 Period of aid: 1962
 Technical approval: WHO

From April 1953 to the present, the number of health centres covered by the project has increased from 262 to 1,664. Training

of midwives has been expanded: from 50 graduates a year it will be increased to 150 in 1962, and to 220 by 1963. The training of nurses has also been considerably expanded, and training for nurse-midwives has been added. Post-graduate training in public health for doctors and nurses has been established with WHO assistance, and the Department of Health is using these facilities fully by providing stipends for up to 15 doctors and 20 or 30 nurse-midwives a year. A comprehensive rural health programme is under consideration by the Government; meanwhile the ground-work is being laid by increasing integration of mass campaign work (yaws, leprosy) with the work of health centres, and also of activities assisted by the United States Government, such as sanitation and malaria control. UNICEF will provide additional supplies and equipment for MCH centres, transport and stipends for traditional birth attendants and midwives to take refresher courses.

Basic MCH (municipal) (continuation)

Allocation: \$45,000
 Period of aid: 1962
 Technical approval: WHO

The first assistance from UNICEF to this project provided for an expansion of the MCH services of Bangkok. The National Municipal League of Thailand, whose President is also the Mayor of Bangkok, has now promoted the concept of improving municipal MCH services to 54 of the smaller municipalities of Thailand. Similar assistance will now be provided, on a smaller scale, for these municipalities. A main feature of the programme will be refresher courses for the personnel of the municipal MCH centres to be conducted in Bangkok under the sponsorship of Bangkok's City Health Officer. Through the co-operation of the Ministry of Health, technical guidance will be provided for the municipal health personnel after they have completed a 30-day orientation course. The project was planned with the assistance of the WHO regional MCH adviser.

Goitre control (first UNICEF aid)

E/ICEF/P/L.118

Allocation: \$15,000
 Period of aid: 1962-63
 Technical approval: WHO

A small pilot project will be carried out in the province of Prae, where the incidence of goitre has been found to be as high as 84.4 per cent in one village. A small iodation unit is requested to iodate about 500 tons of salt a year, to be distributed to the population of this province (300,000) and to a neighbouring district in the province of Nan, which has a high incidence of goitre, and which receives salt from Prae. The importation of salt into Prae is easily controlled because it is brought in by train and can be unloaded at only two stations. The 10 private salt distributors in this area have agreed to support the proposed iodization programme. UNICEF will provide supplies and equipment for a salt iodization plant and one truck. WHO will provide technical advice; FAO is asked to provide a short-term fellowship for study in India. If the project is successful, the Government expects to undertake an expansion programme, for which UNICEF aid may be requested at a later date.

Primary education: teachers' training (continuation)

Allocation: \$42,000
 Period of aid: 1962
 Technical approval: UNESCO

Excellent progress has already been made implementing the first phase of this project, with the objective of improving the training of rural teachers, emphasizing nutrition and health, and including

a period of field training during which students practise by teaching in selected village schools and working with village committees and parents. In 1962 the Government intends to expand the project to 6 more teachers' training colleges, to cover all the 14 approved teachers' training colleges of Thailand. The total number of students enrolled in these colleges will by that time have been increased to 6,800.

Tonga ^b

Yaws control (first UNICEF aid)

P/L.93

Allocation: \$8,000
 Period of aid: 1962-64
 Technical approval: WHO

The proposed mass campaign will take about two years, after which the work will be continued on a reduced scale. A training and demonstration area will first be established, after which the mass campaign will be carried out, aimed at the survey and treatment of the entire population. An estimated 8 to 12 per cent of the population are thought to be afflicted with yaws. UNICEF will provide penicillin, field and laboratory equipment, a station wagon, an outboard motor and 4 bicycles. WHO will provide a medical officer-serologist as senior adviser to the project for a period of from three to six months beginning April 1962, and for additional periods as necessary.

Viet-Nam, Republic of

Basic maternal and child health (continuation)

Allocation: \$27,500
 Period of aid: 1962-63
 Technical approval: WHO

Excellent maternal and child health facilities have been established in Saigon, and in Hue for the north, and a good start has been made in extending health services to rural areas. The Government plans to expand training facilities in 1962 and 1963. UNICEF will provide: equipment for two MCH centres in Saigon, two small cars to extend supervision of rural midwives training' schools and associated hospitals; supplies and equipment for the maternity ward near Hue which will train rural midwives for the province of Thua-Thien; for a rural health centre at Huong-Thuy to train public health workers; and for a 50-bed paediatric service in the provincial hospital of My-Tho, which will be the nucleus of one of the two provincial demonstration projects in integrated rural health services; equipment for 6 additional rural midwives' training schools; and stipends for training 10 additional midwife-monitrices.

EASTERN MEDITERRANEAN — \$1,869,000

Ethiopia

Basic maternal and child health (continuation)

Allocation: \$206,000
 Period of aid: 1962-63
 Technical approval: WHO

Marked progress has been made in the last year towards the establishment of the basic health services. Medical officers of health were appointed to 5 provinces, 28 service health centres were set up and 3 provincial referral hospitals have been made ready. Six additional medical officers will be assigned in the next year

^b First request for UNICEF aid to this country.

Malaria eradication (continuation)

E/ICEF/P/L.124

Allocation: \$850,000

Period of aid: 1962

Technical approval: WHO

Eradication activities will continue in "responsive areas". The southern part of Khorrasan province, the northern districts of Kerman and the south-eastern part of Isfahan province will come under the first year of attack, involving a population of 1,073,000 living in 8,851 villages. Operations in this zone in 1962 will reach a population of 10,320,000, of whom 4,985,000 live in areas under attack and 5,362,000 in areas under consolidation. Surveillance activities will be further stepped up, and the number of agents and district leaders will be increased by 340. No general residual spraying will be effected where the resistant vector is apparent. Mass distribution of drugs will be made to fever cases. Surveillance will be maintained in 10 per cent of the villages. The Malaria Institute will continue research in the southern zone and will expand its pilot project in Kazeroun and establish further watch stations. UNICEF will provide 2,866,000 pounds of DDT, sprayers, 6,800,000 tablets of anti-malaria drugs and laboratory equipment. WHO has continued to assist in the evaluation and assessment of the project, and is providing a senior malariologist, an administrative officer and a sanitary engineer. The United States International Cooperation Administration provides advisory services.

Nutrition survey and training (first UNICEF aid)

E/ICEF/P/L.135

Allocation: \$22,000

Period of aid: 1962-63

Technical approval: FAO, WHO

Joint planning by the Ministries of Health, Agriculture and Education is leading to the creation of a Food and Nutrition Institute with a high council determining policy, a technical committee and an executive unit managed by a full-time director. The Institute will undertake a nation-wide nutrition survey, propose measures to solve nutrition problems, provide nutritional training for various categories of workers, and give guidance to national agencies working towards improvement of nutrition. A survey team will be established in 1962 to survey food intake, food habits and nutritional status. A WHO nutrition adviser will assist in training the team and directing it in the initial period. An FAO nutritionist will participate in the food consumption and agricultural aspects of the survey. Training of other nutrition workers will be initiated, with first priority given to the training of 15 full-time nutritionists to be assigned to government programmes or to the staff of the Institute. Other categories to be trained include workers in health, education and agricultural services who are or will be in contact with the people and their nutrition problems, and staff engaged in institutional food planning. UNICEF will provide four vehicles and supplies and equipment for field surveys and training, and will pay partial stipends for 15 trainees per year for two years. FAO will assign a nutrition expert in food policy and planning for one year, and an expert experienced in nutrition education and training for two to three years. A WHO public health nutritionist will be provided for at least two years.

Iraq

Environmental sanitation: sanitation training (first UNICEF aid)

E/ICEF/P/L.103

Allocation: \$17,500

Period of aid: 1962

Technical approval: WHO

to take charge of the health services in the remaining provinces, and the number of referral hospitals will be brought up to 11, 2 of these assisted through bilateral aid. Fifty service health centres and 80 smaller centres doing MCH work will be in operation by the end of the year. The Government plans, initially in Begemedir Province, to strengthen district health services through new peripheral sub-centres supervised by main centres and staffed by workers trained at the Public Health College in Gondar. Training of the four main categories of health staff will continue, and a course will be started in 1962 to train provincial nurses in midwifery at the Princess Tsehai Hospital in Addis Ababa. WHO advisers participate in planning, training and supervision. UNICEF will replenish expendable items for one year and provide equipment and supplies for 6 referral hospitals, midwifery training and new centres, including items for laboratory and environmental sanitation work. Twenty-three vehicles will be supplied for supervisory functions, for field training and supervision at Gondar and for environmental sanitation work. UNICEF will provide stipends for a year for 193 trainees. The project is also supported in various aspects by assistance from the Federal Republic of Germany, Sweden and the United States of America.

Tuberculosis control (continuation)

Allocation: \$11,500

Period of aid: 1962

Technical approval: WHO

The training and demonstration centre in Addis Ababa forms the nucleus of Ethiopia's tuberculosis control work, which is gradually to be extended as an integrated function of the national basic health services. Since 1959, the centre has examined over 100,000 persons, and has trained 100 health workers, including health officers and community nurses who have spent a period at the centre before being posted to the provinces. A TB prevalence survey will start in the Addis Ababa pilot area in 1962. Training activities will be extended in 1962 to include personnel who have for some time been posted to provincial health services. Fifty health workers will spend two months of the year in in-service training at the centre. In preparation for a second centre and pilot area in Asmara, four senior staff will be given extended training in Addis Ababa. UNICEF will provide stipends for the trainees, additional training material and replenishment of expendable supplies, and will replace a vehicle for transport of personnel.

Milk conservation (continuation)

Allocation: \$73,000

Period of aid: 1962-63

Technical approval: FAO

Other participation: United States bilateral aid

The aim of this project is to develop the supply and collection of milk in areas adjacent to Addis Ababa in preparation for the establishment of a modern milk processing plant to serve the capital. A small dairy is being re-equipped to process and market the milk collected. Four collecting centres and a milk control laboratory have been set up, and national workers are being trained. The number of collecting centres will be increased to 12, and distribution points will be set up within the capital through which low-fat and low-cost milk will be made available to the public. In the next two years an estimated daily through-put of 5,000 to 8,000 litres of milk will be reached. Up to 500 litres daily will be procured for free distribution through government welfare projects, including schools, orphanages and hospitals. UNICEF will provide supplies and equipment for eight new collecting centres and four distribution centres; a small bottling line; butter and cream processing equipment; four vehicles for milk transport and extension work; a 6-month fellowship in dairy engineering; and special engineering services.

In the next several years the Government will concentrate on training activities, beginning with sanitarians for whom the need is most pressing, with the aim of training 410 auxiliaries to fill required posts at all levels. With the assistance of two WHO advisers, the training of 75 sanitarians is currently under way in temporary quarters. A new school is being erected as a permanent centre in which eventually also other categories of health staff will be trained. Candidates for the sanitarian courses (who must have completed intermediate school) will be taken in at the rate of 30 to 35 per year for two years of training, half of the time to be spent in practical field instruction. The course will be completed by two to four months of supervised field work, principally in a rural community development area. The Government will provide stipends for the students during training. The Government will employ all graduating trainees, chiefly in rural areas where work will be supervised by public health medical officers with follow-up supervision by the teaching staff of the School of Sanitarians, and by a sanitary engineer now returning to Iraq after training abroad who will be employed full time in field supervision. Selected sanitarians will later be given further training as supervisors. UNICEF will provide 3 small buses for field work; a station wagon for supervision; and teaching and training materials, including laboratory equipment. WHO senior adviser and a sanitary engineer are assigned to this project through 1962 and probably longer. WHO foresees the provision of fellowships for training staff and graduates.

Malaria eradication (continuation)

E/ICEF/P/L.98

Allocation: \$185,000

Period of aid: 1962

Technical approval: WHO

The year 1962 will be the sixth of this campaign. In 1961 approximately 1.2 million inhabitants were protected by residual spraying; active surveillance now covers this group. The balance of 3.3 million are in the consolidation phase and protected by surveillance only. Residual spraying in 1962 will cover major portions of the four northern provinces and a few foci in the central part to protect approximately 600,000 persons. Surveillance operations will cover the entire population at risk. Barrier spraying will be carried out in the south against invasion of *A. stephensi* from the neighbouring Khuzistan plain in Iran. UNICEF will provide DDT (415,000 pounds), 30 utility vehicles, outboard motors, spares for sprayer pumps and anti-malaria drugs. WHO will continue to provide a malariologist under its regular budget and two malariologists, a sanitarian, an administrative officer and some fellowships under the Malaria Eradication Special Account. Since 1961 represents the fifth and final year of the original commitment by UNICEF, WHO has evaluated the project and deems that the necessary conditions have been fulfilled.

Israel

Social services training (first UNICEF aid)

E/ICEF/P/L.101

Allocation: \$30,500

Period of aid: 1962-63

Technical approval: United Nations Department of Economic and Social Affairs

Consultation: WHO

Rapid expansion of child welfare services has resulted in their being staffed with workers and supervisors of a great variety of ethnic backgrounds, training and experience. A course for supervisors and senior child welfare workers is to be offered in 1962-63 for 30 workers of the Ministry of Social Welfare or of local welfare departments who will receive a two-year training course beginning with a twenty-day residential seminar including lectures and group discussions. Closely supervised field work will follow with weekly

meetings for discussion of problems and progress. The course will conclude with a residential seminar lasting three weeks. A course will also be given for 75 workers in children's institutions and day-care centres. A one-month intensive residential seminar will be followed by 11 months of close supervision on the job, stressing observation and analysis of methods and group care techniques. The supervision will be completed by bi-monthly group discussions. Teaching personnel will be drawn from the professional staffs of the Hebrew University, the administration of the Ministries of Social Welfare, Health and Labour and from other qualified sources. Supervisors will be carefully selected. The Government will set up a co-ordinating committee for child welfare services consisting of representatives of the Ministries of Social Welfare, of Health and of Education, of the School of Social Work of the Hebrew University, and of the voluntary and semi-public organizations directly concerned with child welfare. UNICEF will provide 2 vehicles for teaching and supervisory staff, training and demonstration material, and stipends for 30 supervisors and 75 child care workers. The Bureau of Social Affairs will provide the services of a family and child welfare adviser. WHO has been consulted with respect to the medical aspects of this project.

Jordan

Malaria eradication (continuation)

Allocation: \$23,000

Period of aid: 1962

Technical approval: WHO

The incidence of malaria in Jordan has been greatly reduced since 1959, when the eradication project was started. Owing to the outdoor resting habits of *A. sergenti*, the main vector, direct attack measures include continuous larviciding operations from March to November and in some places for the entire year. Co-ordination with neighbouring countries will be maintained. Consolidation will be extended in 1962 to cover the Jordan Valley and the northern and central parts of East Jordan. The attack phase must be maintained in a small area within East Jordan. To the south, the Karak Lowland area and the Karak Highland/Tafleh area will come under the pre-consolidation phase. These operations should ensure the protection of all the 950,000 persons of Jordan considered at risk. UNICEF will provide 10 utility vehicles, 3 microscopes and 4,400 pounds of DDT for the larviciding operations. WHO will provide a malariologist and a sanitary engineer as well as supplies and fellowships. The services of WHO's Inter-Country Malaria Evaluation Team are also available to the project.

Lebanon

Malaria eradication (continuation)

Allocation: \$5,000

Period of aid: 1962

Technical approval: WHO

The malaria eradication effort is nearing its objectives and this small allocation for operations in 1962 should conclude the Fund's participation. Only a minimal number of positive malaria cases have been detected over the past three years. The plan of action for 1962 calls for the consolidation of the active surveillance system to cover 683,000 persons in 1,647 villages below the altitude of 1,100 metres and the participation of more health centres and voluntary workers in the passive surveillance effort. Mobile investigation and surveillance teams will be strengthened. An estimated 20,000 slides will be collected monthly by the surveillance system and by four mobile teams and will be examined at the central laboratory of the Malaria Eradication Headquarters. A central entomological unit consisting of the national entomologist and two assistants will be in charge of over-all entomological control and research work and will do extensive field work. No residual sprayings are foreseen except on precautionary grounds. UNICEF will

provide two utility vehicles for the mobile investigation and surveillance teams, one small van-type vehicle for the field work of the central entomological unit and four microscopes with accessories. WHO will provide a malariologist, fellowships and minor equipment; the WHO Inter-Country Malaria Evaluation Team will assess the results of the campaign.

Libya

Tuberculosis control (first UNICEF aid)

E/ICEF/P/L.104

Allocation: \$54,000

Period of aid: 1962-63

Technical approval: WHO

The aim of the project is to establish a national pilot area and around Benghazi city in the Province of Cyrenaica to determine the most effective use of available resources and methods to reduce the high prevalence of tuberculosis. Simple methods and procedures will be implemented and an assessment made of their effect and costs so that the Government can consider gradual expansion into a broad national programme. National health personnel will be trained in all aspects of the work. The pilot area will include some 100,000 persons. An estimated 6,700 tuberculosis cases, both active and inactive, will be given ambulatory or domiciliary treatment, about 50,000 persons vaccinated with BCG vaccine, and about 33,000 contacts checked periodically. A mass BCG vaccination campaign for which UNICEF provided vaccine until March 1958 is being continued by the Government with one team. A tuberculosis control centre with a static and a mobile X-ray unit, a diagnostic laboratory and a registration office for tuberculosis cases, will be established in Benghazi as a base for case-finding by clinical, radiological and laboratory methods; ambulatory and domiciliary treatment with drugs of tuberculous cases; domiciliary supervision by home visitors; periodic follow-up and control of cases, suspects and contacts; health education, BCG vaccination and other preventive measures in co-operation with the public and local health services; prevalence surveys and assessment of the operational efficacy of control measures. UNICEF will provide an X-ray unit, films and chemicals; vaccination, laboratory and statistical equipment and supplies; health education and training equipment; drugs to treat 6,700 cases for two years, record cards and forms and 2 vehicles for supervision, transportation of trainees, mass examinations, health education and surveys. WHO will provide an advisory team composed of a tuberculosis control specialist, a public health nurse, an X-ray technician, and a laboratory technician as well as certain equipment, supplies and printed materials.

Syria

Malaria eradication (continuation)

E/ICEF/P/L.117

Allocation: \$42,000

Period of aid: 1962

Technical approval: WHO

A tangible regression of malaria has been recorded recently in Syria. From January to August 1961 only 33 positive cases were detected throughout Syria as against 128 positive cases found in 1960. Passive surveillance activities developed well during the first half of 1961 and are now supported by 1,695 voluntary collaborators, 166 health establishments and 248 government and private medical officers. In 1962, supervisory responsibility will be entrusted to three main divisional centres each headed by a medical officer, each divisional centre supervising the work of three to four district centres. District centres will be headed by sanitary inspectors who will supervise field work in both attack and consolidation areas. Of eleven districts, two will be entirely under consolidation in 1962 while the remaining nine will continue attack and consolidation measures. Of 1,588,354 persons at risk, only 298,382

will remain under the attack phase in 1962. Passive surveillance will be further strengthened. Special epidemiological surveys and other entomological work will be continued. UNICEF will provide 59,000 pounds of DDT, sprayer spares, anti-malaria drugs and transport. WHO will provide a malariologist, two sanitarians and an administrative officer as well as a number of fellowships and certain supplies.

Turkey

Basic maternal and child health (continuation)

Allocation: \$129,000

Period of aid: 1962

Technical approval: WHO

A decisive forward step was taken in 1961 with the passage of a law nationalizing health services and calling for basic reorganization of health services at the provincial level. The plan for 1962 is the same as that for 1961. This will be the second year of a three-year plan and will be marked by the opening of 8 urban MCH centres, 12 MCH sections in rural health centres and sanitary stations in 100 villages. A school for training public health nurse-midwives, and two schools for training auxiliary nurse-midwives will be reorganized. Distribution of dried milk and vitamins will be continued. UNICEF will provide basic equipment and kits for the centres, teaching equipment for the schools, 9 vehicles for supervision, 3 buses and dried milk and vitamins. UNICEF will also provide stipends for seminars for 80 doctors to be trained in paediatrics and gynaecology.

Social services (continuation)

Allocation: \$34,000

Period of aid: 1962

Technical approval: United Nations Department of Economic and Social Affairs, WHO

Successful training seminars for social service personnel were held at Ankara in 1961, the second year of the project. A total of 293 trainees have participated in these seminars in the past two years. The four-month seminar on foster home placement revealed excellent possibilities for a programme of this type in Turkey; the ten trainees who participated have since been recruited by the Social Services Directorate. Legislation now in the Parliament would provide the formal basis for the Social Services Directorate and for a school of social services offering four years of study at university level. The proposed laws call for modernization of the administrative and training structure; wider expansion of modern techniques of child care, adapted to local situations; and co-ordinated governmental control of all interested agencies, especially private agencies. The third year of the project will focus on accelerated training and on preparation of a pilot project to begin in 1963 when the first United Nations fellows return to Turkey. Seminars are foreseen in: protection of children, nurseries and kindergartens and care of physically handicapped children. A four-month course in foster home placement will again be offered at Ankara. The Government will also offer orientation training for senior social services personnel in the provinces. UNICEF will provide teaching aids, equipment and 3 vehicles for the school of social services; stipends, honoraria and translation fees. The United Nations Department of Economic and Social Affairs will provide the services of a child welfare adviser.

Leprosy control (first UNICEF aid)

E/ICEF/P/L.140

Allocation: \$41,000

Period of aid: 1962-63

Technical approval: WHO

The Government will launch in 1962 a four-year mass anti-leprosy campaign combined with an intensive health education

campaign. The present recommendation is for assistance in the first two years of the campaign (1962-1963). Additional aid may be asked at a later date for 1964-1965. A pilot zone will be created in Sivas province (675,000 inhabitants) in the endemic area of the country. Case-finding and treatment will be carried out mainly by three mobile teams of health workers and nurses. Emphasis will be on domiciliary treatment and chemoprophylaxis of contact children. Hospital treatment is foreseen for acute cases. Anti-leprosy campaigns in six other provinces in the east and south will be reorganized and leprosy control will be co-ordinated with over-all health services. Elazig leprosarium is to be transformed into a modern sanatorium. Health education will be intensified. A three-month refresher course will be given at the Institut Central de Leprologie of Ankara for seven doctors, and two 45-day courses will be offered for 39 health workers, nurses and laboratory staff. UNICEF will provide drugs, laboratory and teaching equipment, 11 cars and 16 motor-bicycles. WHO will provide a leprosy consultant for 1962 and 1963 as well as fellowships.

United Arab Republic

Basic maternal and child health (continuation)

E/ICEF/P/L.134

Allocation: \$120,000

Period of aid: 1962

Technical approval: WHO

In the last ten years, health services have been extended to most towns and rural areas, and are now available through a co-ordinated network of 1,079 centres of various categories, and 345 government hospitals. The general aim is to improve and develop MCH activities as part of these health services with effective direction and facilities for the regular supervision and guidance of field personnel. Additional MCH and rural health centres will be provided and their services improved by establishing public health laboratories, engaging more staff where feasible and providing means for effective supervision of rural health activities. A health inspector has been added to the staff in each of the 16 rural governorates to supervise health activities in rural combined units. There is a major hospital and, in some cases, a public health laboratory at the governorate level. Public health laboratories will be established in two additional governorates next year. At the district level, medical officers assisted by auxiliary staff are in charge of work in local health areas. A district has one or more hospitals whose work is co-ordinated with that of MCH centres (in urban areas) or with health centres, social centres or combined units in the rural areas. An additional 30 urban MCH centres, 5 rural health centres and 40 combined units will be established in 1962. UNICEF will provide supplies and equipment for these 75 centres, equipment for the two public health laboratories, and sixteen vehicles for supervision of rural combined units. WHO may provide consultant services.

Nutrition survey (first UNICEF aid)

E/ICEF/P/L.132

Allocation: \$25,500

Period of aid: 1962

Technical approval: FAO, WHO

The general objective of the Government's plan is to improve the levels of nutrition in Egypt through co-ordinated action programmes of various government services with direct community participation. The immediate objective is to conduct a survey in Beheira governorate of the nutritional and dietary status of representative samples of the population and of related socio-economic and health conditions. Special attention will be paid to the nutrition and health of expectant and nursing women and to infants and young children. The survey phase is expected to last one year. The data

obtained will be used in developing practical action programmes and as a base-line for assessing subsequent progress. Five field teams will be used in the survey: two teams exist, attached to the Nutrition Institute; three will be appointed and trained during the first quarter of 1962. A public health physician will be appointed to direct field operations. UNICEF will provide equipment and supplies for a central field laboratory and for five field teams, teaching equipment and transport. An FAO/WHO consultant helped to plan the survey phase of the project and FAO and WHO will continue to provide technical advice.

EUROPE — \$420,000

Greece

Handicapped children (continuation)

Allocation: \$30,000

Period of aid: 1962-63

Technical approval: United Nations Department of Economic and Social Affairs, WHO

Assistance was provided to Greece in the post-war years to establish rehabilitation services for handicapped children in the Athens area and Leros Island. Despite the fact that additional treatment facilities are needed to rehabilitate even a part of the country's 20,000 crippled children, the most urgent immediate needs are: to obtain balanced medical, vocational and social rehabilitation of handicapped children through a more effective use of existing services; and to expand staff training facilities. UNICEF will provide equipment for physical and occupational therapy and small amounts of teaching and educational materials and special supplies for the blind and deaf. The ILO provided an adviser from November 1958 to October 1959 to counsel the Government and train staff in vocational rehabilitation and in placing the disabled in employment. WHO will provide consultant services in the field of impaired hearing, defective sight and psychiatric rehabilitation as well as two fellowships annually.

Poland

Milk conservation (Lodz and Poznan dairies) (first UNICEF aid to these dairies)

E/ICEF/P/L.120

Total assistance approved: \$554,000

Period of aid: 1962-64

Allocation for 1962: \$200,000

Technical approval: FAO

Continuing its effort to increase processing facilities and improve milk quality, the Government plans the erection of 7 new large city dairies in its current five-year plan. UNICEF will assist in equipping two dairies to be built in the next three years in the industrial cities of Lodz (720,000 inhabitants) and Poznan (420,000 inhabitants). The plants are to be completed by the end of 1964, each with capacity to process 160,000 litres daily. While supplying the population with safe milk, the new dairies will also bring about an appreciable increase in the average daily consumption per inhabitant, at present only one-fifth of a litre at Lodz and one-fourth of a litre at Poznan. As retail prices are controlled by government subsidies, all groups will benefit. A total of 244,000 children in the two cities will receive the benefit of an additional quarter litre of processed milk daily as a feature of the pre-school and school feeding programme now being extended to various parts of the country. Measures will be taken to intensify milk quality control measures at all stages from production to consumption. UNICEF will provide equipment for the two new dairies, laboratory equipment for the milk quality control organization, and

two 3-month engineering fellowships. FAO will conduct a 6-week international dairy course in Poland in 1962, which would be repeated in subsequent years on a national basis and will provide two plant-management fellowships and one milk-marketing fellowship.

Spain

Milk conservation: Leon and San Sebastian dairies and Milk Industry Institute (continuation)

Allocation: \$190,000
Period of aid: 1962
Technical approval: FAO

The building to house the drying plant at Leon is ready to receive the equipment now being delivered by UNICEF. Construction is under way at San Sebastian and equipment is under contract for early shipment. Both plants are expected to start up in the spring of 1962 in order to absorb the surplus production of next year's flush season. The technical managers of the two plants went abroad on UNICEF fellowships in September 1961. A solution to certain legal and administrative measures is being actively sought with the objective of converting the existing dairy school into a national Technical Institute for the Milk Industry. Three senior staff members of the Institute are to go abroad shortly for training under UNICEF fellowships. UNICEF milk processing equipment, laboratory supplies and teaching aids for the Institute are to be shipped in 1962. At its session in January 1961, the Board approved assistance totalling \$523,000 for the two dairies and the Institute and made an initial allocation of \$333,000. The Board approved an allocation of \$19,000 to permit UNICEF to fulfil its commitments.

THE AMERICAS — \$5,106,300

Argentina

Tuberculosis control (continuation)

E/ICEF/P/L.105

Allocation: \$84,000
Period of aid: 1962-63
Technical approval: WHO

The aim of the project is to establish a national centre at Recreo to promote and co-ordinate tuberculosis control activities throughout the country. The centre will carry out a demonstration control project in an area with 332,000 inhabitants; undertake research in all aspects of tuberculosis control; and train national personnel for tuberculosis control programmes. UNICEF will provide one mobile and one static photofluoroscopic X-ray unit, laboratory equipment, drugs, vaccine and film, health education and statistical equipment, transport and stipends for 10 students. WHO will provide the services of a specialist in tuberculosis control campaigns, two teaching consultants in administration of public health and bio-statistics and fellowships for local personnel.

Bolivia

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$89,000
Period of aid: 1962-63
Technical approval: WHO

The campaign will continue as an extension of the attack phase. Execution is satisfactory; administration is sound and local financing is made available as necessary. UNICEF will provide insecticides, sprayer spares, laboratory supplies and transport. US/ICA

is assisting the campaign in Bolivia. WHO will continue to provide consultants and to supply anti-malaria drugs.

Tuberculosis control (Pilot project) (first UNICEF aid)

E/ICEF/P/L.102

Allocation: \$66,000
Period of aid: 1963-64
Technical approval: WHO

The aim of the project is to establish a national pilot area for investigation of tuberculosis prevalence and control of the disease and for training of national medical personnel in tuberculosis control methods. The pilot area has a population of 232,000. The project will be under the direction of the Tuberculosis Division of the Ministry of Health. The five main health centres serving the project area, one under the administration of the Andean Indian Mission Programme, will collaborate. Mobile teams will be responsible for search and diagnosis of cases and ambulatory treatment with drugs. UNICEF will provide a mobile photofluorographic unit, field and laboratory equipment and supplies, drugs and transport. WHO will provide advisory services and, subject to the availability of funds, will provide a tuberculosis specialist and a nurse as consultants.

Brazil

Basic maternal and child health (continuation)

E/ICEF/P/L.136

Total assistance approved: \$625,000
Period of aid: 1962-63
Initial allocation approved: \$508,000
Technical approval: WHO

The integrated health programme will be expanded in three states (Piaui, Sergipe and Rio Grande do Norte) and extended to five additional states: (Alagoas, Bahia, Ceara, Maranhao and Paraiba). The education programme, carried out through mothers' clubs, will be strengthened in all states throughout the country. A Co-ordinating Council will be created. Guidance in organization and administration of the programme and in training will be provided through the regional offices of SESP. An integrated regional service of health centres, sub-centres, hospitals and maternities will be established. Health centres will be responsible for maternal and child care, including treatment of acute children's diseases, communicable disease control, immunizations, nutrition, health education, vital statistics and in some cases dental care. Rural hospitals or maternities will be established in co-ordination with the health centres in the larger municipal centres and existing services expanded. Rural hospitals will provide paediatric and maternity care and routine and emergency surgery. Dental clinics will be established in some health centres. An extensive training programme is planned. Nine new training centres will be established in addition to 7 centres already in operation. Mothers' clubs, organized in all states and territories, are an important element in the education programme, teaching, sewing, cooking and home care, feeding and care of children, the importance of hygiene and the formation of good habits. To help revise the salary structure for the key supervisory staff, UNICEF will provide honoraria for a three-year period. Seminars will be held annually for the supervisors. UNICEF will also provide training stipends, basic equipment for 123 health centres and 94 sub-centres, laboratory and dental equipment, basic equipment for children's hospital, 24 rural hospitals and 15 maternities, equipment for 9 training centres, standard kits, sewing machines for mothers' clubs, 54 vehicles for supervision and 466 bicycles for health visitors and sanitarians. WHO has two public health doctors, a nurse, a sanitary engineer and statistician assisting in the development of rural health services.

British Honduras

Malaria eradication (continuation)

E/ICEF/P/L.107 and Add.1

Allocation: \$39,000

Period of aid: 1962-63

Technical approval: WHO

This is the fourth year of attack utilizing DDT. Execution of the campaign has been satisfactory; administration has been sound; and local financing has been made available as necessary. The hurricane which caused wide destruction in the Territory in October destroyed some of the campaign provisions; an amount of \$14,000 is included in the approved allocation for replacement of such supplies. WHO will continue to provide consultants and to supply anti-malaria drugs. UNICEF will provide insecticides, sprayers, spares, laboratory supplies and transport.

Chile

Fish flour production (continuation)

E/ICEF/P/L.113

Allocation: \$65,000

Period of aid: 1961-62

Technical approval: FAO

The Executive Board approved in September 1955 an allocation to provide equipment and supervisory engineering services for a fish flour plant at Quintero. The plant was to provide high-protein fish flour (at a daily rate of 5 grammes per person) as enrichment of bread to be offered through the national school feeding programme to 300,000 school-age beneficiaries. After the plant was installed in 1958, it became evident that the plant would need substantial modifications to produce fish flour from fresh fish. Those modifications covered by the performance guarantee of the supplier have now been carried out. Funds are needed to cover the costs of the installation of the modified equipment and electrical installations, improvement of water supply, plant modifications and protection, test runs and introductory trials. The original estimate of costs to the Government have already been exceeded by more than 40 per cent. In order to bring the project into effective operation, the Board approved funds to cover the additional costs involved.

Dominican Republic

Basic MCH and environmental sanitation (continuation)

E/ICEF/P/L.128

Total assistance approved: \$147,000

Period of aid: 1962-63

Initial allocation: \$95,000

Technical approval: WHO

The aim of the project is to cover the country with a network of health centres responsible for the organization and development of health services at the various administrative levels, including control of transmissible diseases, immunization, maternal and child health services, environmental sanitation, health education and training. The plan envisages the co-ordination and integration of existing health services including hospitals. The project will be developed under the Ministry of Public Health through five decentralized health zones which will cover the entire country. Experience gained in the organization and operation of the UNICEF-assisted Provincial Health Centre at San Cristobal is to be applied progressively in other parts of the country over the next ten years. Intensified training is planned for doctors, nurses and nursing auxiliaries, sanitary inspectors and laboratory technicians. UNICEF

will provide basic equipment for 19 health centres and 7 sub-centres; X-ray, dental, laboratory and training equipment; transport for supervision and training; and stipends. WHO will provide a consultant team consisting of a public health administrator, an epidemiologist, two public health nurses, a sanitary engineer and a serologist.

Ecuador

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$338,000

Period of aid: 1962-63

Technical approval: WHO

This is the third year of the attack phase using DDT. The campaign is going forward satisfactorily; its administration is sound and local financing is made available as necessary. UNICEF will provide insecticides, sprayers, spares, laboratory supplies and transport. WHO will continue to provide consultants and anti-malaria drugs. The US/ICA is also assisting.

Milk conservation (continuation)

Allocation: \$24,000

Period of aid: 1962

Technical approval: FAO

The UNICEF-assisted pasteurized milk plant in Quito started operations on 11 April 1961 and has reached its objective in that pasteurized milk, from this plant and from privately managed plants, has practically replaced the unsafe milk previously sold in the city. Free distribution of pasteurized milk, financed with municipal funds, is reaching 4,600 children in city schools. Plans are under way to include funds in the national budget for free milk distribution. The retail price of milk pasteurized by the plant has been kept within the reach of the low-income group. The plant, designed for a capacity of 60,000 litres, has inadequate storage and clarifying capacity. UNICEF will provide a storage tank, a separator, a clarifier, pumps and some spare parts.

El Salvador

Malaria eradication (continuation)

E/ICEF/P/L.116

Allocation: \$307,000

Period of aid: 1962

Technical approval: WHO

This campaign has met with exceptional difficulties. The reasons for the persistence of transmission have not been clarified and the prospect of eradication cannot yet be properly assessed. Although the main vector of malaria was resistant to DDT in 44 localities at the end of 1960, WHO experts believe that DDT is still effective enough to warrant its use on a large scale. Trials are under way to ascertain techniques for mass distribution of drugs and for eventual use of phosphorous compound insecticides. Supplementary financing is being sought outside WHO and UNICEF to assist in mass distribution of drugs, which appears to be necessary as a complement to spraying operations. Malaria endemicity and anopheline density in El Salvador are so high that discontinuation of DDT spraying might well increase the sources of infection and the volume of cases in neighbouring Guatemala and Honduras. UNICEF will provide insecticides, transport, sprayers, spares and laboratory supplies. WHO has a resident team of five consultants and is providing fellowships, anti-malaria drugs and other supplies. Two WHO study teams are collaborating in a series of research activities in El Salvador.

Guatemala

Basic MCH and training (continuation)

E/ICEF/P/L.122

Allocation: \$118,000

Period of aid: 1962

Technical approval: WHO

This project is to strengthen and integrate the health services, with special attention to maternal and child health, training of personnel and extension of services in rural areas under decentralized regional organization. The plans for 1962 include the organization of three regional offices with full directing and supervisory staff (medical, nursing, health education, nutrition and statistics) and a public health laboratory, the development of fourteen health centres and twenty-two sub-centres, a central sanitation workshop, and reorganization services for the control and maintenance of transport, and preparation of personnel in local training courses and through study abroad. UNICEF will provide basic equipment for health centres, kits for nurses and midwives, laboratory and dental equipment, transport, sanitation workshop equipment and stipends for 60 auxiliary nurses and 220 *empiricas*. A WHO medical adviser, a sanitary engineer, a public health nurse and a sanitarian are included in 1962 plans and WHO will provide fellowships. The US/ICA is collaborating.

Haiti

Environmental sanitation (first UNICEF aid)

E/ICEF/P/L.108

Allocation: \$67,000

Period of aid: 1962-63

Technical approval: WHO

The aim of the project is to develop environmental sanitation services in the area of Cul de Sac (population 132,000), where the pilot integrated rural health services programme (assisted by UNICEF) is being organized. Safe water will be provided, with priority for requirements of health centres and schools. Houses will be improved by the provision of concrete floors, windows, cooking facilities and latrines. Local communities will be organized to participate in the development of the project. A central workshop will be established where latrine slabs and pipe moulds will be made. UNICEF will provide well-drilling equipment, pumps and piping, workshop equipment and transport. WHO is providing a medical officer, a public health nurse and a sanitary engineer as consultants.

Malaria eradication (continuation)

Total assistance approved: \$1,385,000

Period of aid: 1962-65

Initial allocation: \$275,000

Technical approval: WHO

After a few months of operation in 1958, a malaria eradication campaign was suspended owing to local financing problems. Early in 1961 the campaign was reorganized under the administrative direction of the Service co-operatif interaméricain de la santé publique (SCISP) and local operating funds assured. During the preparatory phase now in progress, geographical reconnaissance data are being brought up to date: epidemiology of malaria, the ecology of the vector and its susceptibility to insecticides are being investigated; staff is being trained and the field organization established. The attack phase, during which some 850,000 houses will be sprayed with DDT in six-monthly cycles protecting 3,350,000 inhabitants, is to commence in January 1962. UNICEF will provide insecticides, sprayers, transport, spares and laboratory equipment. WHO provides eight consultants. The United States International Cooperation Administration provides three consultants.

Primary education (nutrition and home economics) (first UNICEF aid)

E/ICEF/P/L.114

Allocation: \$15,000

Period of proposed aid: 1962

Technical approval: FAO, UNESCO

The Government, with the collaboration of UNESCO, is establishing a normal school at Marfranc for the training of primary-school teachers to prepare them for assignments in rural areas to stimulate agricultural, cultural and economic development. The project is part of the major UNESCO programme for primary education in Latin America. Suitable accommodation can be made available at the Marfranc agricultural experiment station, which has skilled agricultural personnel, laboratory and a farm covering over 400 acres. The school will have a primary school annexed to it, as well as 7 satellite schools to be used for practice training. The school will give a three-year course for teachers between the ages of 15 and 18 and an accelerated professional course to selected students between the ages of 18 and 30. UNICEF will provide equipment for teaching school dispensary and canteens; and transport. FAO, WHO and UNESCO will provide technical guidance.

Honduras

Environmental sanitation (continuation)

Total assistance approved: \$176,000

Period of aid: 1962-63

Initial allocation: \$125,000

Technical approval: WHO

UNICEF-assisted sanitation activities have been carried out in the demonstration area of Las Crucitas. Educational work has been done by sanitarians, water and drainage systems extended, garbage disposal systems introduced and latrines and wells built. Sixteen wells and some 600 latrines will be completed by the end of 1961. Improvement of water supplies and latrines is now to be extended to four of the health districts. Eighty water supply systems will be constructed in rural localities bringing potable water to some 50,000 persons. The newly created division of environmental sanitation, in collaboration with the municipal authorities, will establish local committees responsible for operation and maintenance of the systems. Local costs will be borne equally by the Ministry of Public Health and the local municipality. It is planned to construct 8,300 latrines. The programme will be developed through the local health services under the supervision of sanitary inspectors, of whom 119 will be graduated by the end of 1963. The Ministry of Public Health will provide the cement and the local communities will provide sand and labour. UNICEF will provide well-drilling equipment and supplies, pumps and transport. WHO provides a sanitary engineer and a sanitarian. The US/ICA helps primarily with water supplies in urban areas and has given a workshop for the manufacture of latrines.

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$221,000

Period of aid: 1962-63

Technical approval: WHO

This is the fourth year of attack using DDT. Execution of the campaign is satisfactory; administration is sound and local financing is provided as necessary. UNICEF will provide insecticides, sprayers, spares and transport. WHO will continue to provide consultants and to supply anti-malaria drugs. The US/ICA is providing financial assistance for the campaign as well.

Mexico

Basic MCH, including environmental sanitation (continuation)

E/ICEF/P/L.126

Total assistance approved: \$861,000

Period of aid: 1962-63

Initial allocation: \$676,000

Technical approval: WHO

Organization of health districts responsible for co-ordinated public health work has been accelerated and will cover the entire country in the next three or four years. Services include campaigns against communicable diseases, maternal and child health, environmental sanitation, nutrition work, social-economic programmes designed to raise the cultural and family income levels, medical and social assistance and training of both professional and auxiliary personnel. Integrated health services will be organized in 1962 and 1963 in 11 additional districts in 11 states, providing rural health services with special emphasis on MCH and environmental sanitation programmes. In the next two years, 95 MCH centres will be developed, 42 with small rural maternities, all with associated mother clubs; 250 water systems are foreseen for development; about 252 localities will benefit from installation of latrines in houses and schools, construction of communal bathing and laundry units, construction of absorption wells and septic tanks, construction and extension of drainage systems, garbage collection and disposal. Workshops will be established in each area. Housing improvements will be carried out in 251 localities (constructing cement floors, adequate roofs and cooking facilities, plastering walls, providing doors, house painting). Communities will also be encouraged to participate in the development of school improvement, the construction of slaughter-houses and the improvement of public markets and sports fields. UNICEF will provide equipment for primary health centres, mothers' clubs and sanitation workshops, well-drilling equipment and accessories, transport for sanitation services and for supervisors. WHO provides a public health administrator, three health nurses, a sanitary engineer and a sanitarian.

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$749,000

Period of aid: 1962-63

Technical approval: WHO

This assistance is for extension of the attack phase in 1962/63. Execution of the campaign is satisfactory; administration is sound and local finances are made available as needed. UNICEF would provide insecticides, sprayer spares, laboratory supplies and transport. WHO will continue to provide consultant services and to supply anti-malaria drugs.

Urban project (housing improvement, environmental sanitation, and vocational guidance and training) (first UNICEF aid)

E/ICEF/P/L.127

Allocations: \$247,000

Period of aid: 1962

Technical approval: United Nations Department of Economic and Social Affairs, ILO, WHO

In order to clear up serious social and health problems in the shanty-town fringe areas of Mexico City, the Government plans to start a project of intensive housing improvement, environmental sanitation, and youth vocational guidance and training in three health districts (with a total population of 400,000 to 500,000) building upon the self-help activities which have already begun among the inhabitants. The project will include three workshops

for the production of materials for housing renovation and reconstruction and for environmental sanitation. Youth vocational guidance and training centres will be located next to the workshops, and the students will be encouraged to work with the mobile work-teams as part of their training experience. It is expected that existing health and social services in the project area will be further developed. The three districts adjoin industrial areas and have been selected because they are the main points of entry into the Federal District and have the most serious housing problems. The project will be carried out by the Directorate of Health of the Federal District working in co-operation with the Oficina del Plano Regulador in charge of physical planning for the district, the Department of Education, the Department of Water and Drainage, and the National Institute of Mexican Youth. Each health district, in addition to providing comprehensive health services, includes a section for sanitation and a section for social services and *clubes familiares* (mothers' clubs, youth clubs and adult clubs). In each district, a Special Department for Home Improvement and Vocational Training will be established with the following main sections: programme planning (staffed by architects, engineers and draftsmen); promotion (staffed by *promotores*, health educators, social workers, sanitary inspectors); house improvement and construction (consisting of a central workshop with carpentry, plumbing, masonry, electricity and blacksmith sections, and mobile work teams); and vocational guidance and training (staffed by teachers in various subjects, psychologists, sports leaders). The central housing workshops will produce materials for improving water supplies and sewage disposal. The vocational guidance and training centres will provide social and recreational facilities for young people. UNICEF will provide equipment, and transport for the house improvement and environmental sanitation work, and equipment for the vocational training centres. A mobile laboratory for field testing and evaluation of economical local building materials will be available for all three workshops.

Panama

Basic MCH and environmental sanitation (continuation)

E/ICEF/P/L.125

Total assistance approved: \$409,000

Period of aid: 1962-63

Initial allocation: \$247,000^e

Technical approval: WHO

A network of strategically located and functionally co-ordinated services will be established in the Central Health Region to provide communities with integrated preventive and curative services. Referral will be made from local to larger units for hospital care, laboratory diagnosis, personnel training, supervision and special investigations. Each zone will have an integrated centre, including a health centre and a hospital unit with staff including a medical director, doctors, dentist, nurses, nutritionist, health educator, social worker, auxiliary nurses, sanitarians and technicians. Four integrated centres will be located in densely populated rural areas. The other 14 dependent main centres will have maternity annexes and paediatric services. There will also be a network of sub-centres, with resident auxiliary staff and regular doctors' visits; locations for 25 have been selected to date. The Penonome Zone, in which the Co-operative Service in Public Health (SCISP) is assisting, will be used as a pilot area to study methods and procedures for the over-all programme. The public health structure will provide MCH care, treatment of children's diseases, nutrition education, dental care with particular attention to prevention, health education directed to the family unit, school health, control of communicable and contagious diseases including immunization and treatment and leprosy control in the four zones where leprosy

^e Includes funds for TB pilot area; see below.

exists. Environmental sanitation activities will be carried out by the regional sanitary engineering service and sanitarians of the health centres. Priority will be given to schools, to communities with serious disease problems and to communities where new employment opportunities will attract further residents. UNICEF will provide basic equipment for 23 health centres, 25 sub-centres, 12 hospitals, 8 maternity annexes and 13 paediatric services, dental equipment, training equipment and kits for nurses, well-drilling equipment and pumps, transport, stipends for trainees and salary supplements for 4 supervisors. The WHO team of consultants includes a medical adviser, sanitary engineer, public health nurse, hospital administrator and veterinarian.

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$137,000
Period of aid: 1962-63
Technical approval: WHO

This is the first year of the campaign following its reorganization. Its execution has been satisfactory. Administration is sound and local financing is provided as needed. UNICEF will provide insecticides and transport. WHO will continue to provide consultant services and to supply anti-malaria drugs.

Tuberculosis control

E/ICEF/P/L.125

Allocation: \$24,000
Period of aid: 1962-63
Technical approval: WHO

A training centre will be established in the central region. In the Province of Veraguas a national pilot area will be established for an integrated tuberculosis control programme with investigation of tuberculosis prevalence, control of the disease and training of personnel in tuberculosis control methods. Mobile teams will be responsible for the detection and diagnosis of cases and ambulatory treatment while health centres will collaborate in treatments and BCG vaccination. UNICEF will provide mobile and static X-ray equipment, laboratory equipment, vaccines, field and administration equipment and transport.

Paraguay

Environmental sanitation (continuation)

Allocation: \$182,000
Period of aid: 1962
Technical approval: WHO

New emphasis will be given in 1962 to environmental sanitation in the schools in which UNICEF is aiding nutrition education. The target is to provide another 560 wells in 1962: 100 in the primary schools and 460 in rural communities and health centres. A well-drilling consultant will be engaged early in 1962 to work on location with the drilling crews and give further training in techniques applicable to the local conditions. UNICEF will provide \$4,500 to cover salary and travel costs. A new sanitary shop will be created so that each region will be able to produce its own latrine slabs and other materials used for the protection of wells. UNICEF will provide drilling rig and accessories, pumps, pipes and fittings, workshop tools and transport. WHO is providing a consultant team consisting of a medical officer, a sanitary engineer, an administrative methods officer, an epidemiologist, a statistician and a public health nurse; also (subject to the availability of funds) certain fellowships. The Interamerican Cooperative Public Health Services (SCISP) is providing the services of a sanitary engineer and some financial aid.

Peru

Basic MCH: training (first UNICEF aid)

E/ICEF/P/L.123

Total assistance approved: \$634,000
Period of aid: 1962-65
Initial allocation: \$183,000
Technical approval: WHO

The aim of this project is to promote the training of professional and auxiliary personnel to staff the health services creating a training centre which may eventually be transformed into a School of Public Health. During the first four years, it is planned to train 128 doctors in public health refresher courses, 48 administrators for hospital-health centres, 160 supervisory nurses, 80 public health nurses, 630 nursing auxiliaries, 420 sanitary inspectors and 32 health educators. UNICEF will provide teaching and training materials, transport for students and for supervision, and stipends. WHO/PAHO will continue the services of two nurse-educators and provide fellowships.

Environmental sanitation (Junin) (continuation)

Total assistance approved: \$202,000
Period of aid: 1962-64
Initial allocation: \$110,000
Technical approval: WHO

A sanitation survey, carried out early this year, is the basis for a five-year plan to provide rural communities with safe water and adequate excreta disposal systems as part of the integrated health services project in the department of Junin. The project will be carried out in the valley of the Mantaro River, where 70 per cent of the population of the department is concentrated and in which a community development project has been developed with the collaboration of the United States International Cooperation Administration. Safe water services from natural sources will be installed in 18 large communities. The water will be treated through reservoirs and hypochlorinators and distributed through public hydrants. Drilled and dug wells will be installed in 15 health centres, 140 schools and 60 smaller communities of the department where drinking water from natural sources is not available. Three sanitary workshops will produce latrine slabs for some 1,000 latrines for schools and 4,000 latrines for rural houses, concrete tubing for simple drainage systems and materials for house improvement. UNICEF will provide drilling equipment, piping, hypochlorinators, pumps, workshop equipment and transport. WHO provides a medical officer, a sanitary engineer and nurses.

Surinam

Malaria eradication (continuation)

E/ICEF/P/L.107

Allocation: \$18,000
Period of aid: 1962-63
Technical approval: WHO

Execution of the campaign is satisfactory; administration is sound and local financing is provided as needed. UNICEF will provide insecticides, sprayers, spares, laboratory supplies and transport. WHO will continue to provide consultants and to supply anti-malaria drugs.

Uruguay

Environmental sanitation (continuation)

Allocation: \$96,000
Period of aid: 1962-63
Technical approval: WHO

Through this project water supplies, excreta and garbage disposal systems, food control etc. are being improved as part of the

Integrated Health Services Programme being developed in five departments of the interior with a total population of 315,000. It is expected that the output in wells will be increased in 1962-63 to some 60 per year. In communities of between 400 and 1,000 inhabitants the wells will have simple distribution systems to public hydrants, maintained under supervision of the departmental engineer of Obras Sanitarias del Estado. In larger communities the distribution system of mains will be extended to include the semi-urban and rural fringe areas. UNICEF will provide drilling equipment, pumps, fittings and transport. WHO provides technical assistance through a zone office sanitary engineer and will appoint an engineer and a sanitarian to the project in 1962.

Trinidad and Tobago (the West Indies)

Nutrition education and related activities (first UNICEF aid)

E/ICEF/P/L.147

Allocation: \$75,000

Period of aid: 1962-64

Technical approval: FAO, WHO

The objective of the project is to improve the level of nutrition of the rural population through training courses for local personnel, school gardens, raising of small animals, fish culture and nutrition education in schools and health centres. After the initial three years, the Government will continue and extend the project within its budgetary limits. The project will be co-ordinated by a nutrition committee comprising the Director of Medical Services as chairman, the Director of Education and the Agricultural Officer. An urban centre in each of 8 operating areas will serve as the nucleus of health and agricultural aspects of the project. Demonstration gardens and small animal raising will be organized in 45 rural primary schools, which will also have lunch schemes and cooking demonstrations. Primary, intermediate and secondary schools will include nutrition education in their curricula. Agricultural extension services and the home economics section of the Community Development Department will assist in school garden and cooking demonstrations as well as in family gardening and food preparation in the home. Mothers' groups will be formed to hold discussions and receive instruction in nutrition. The Department of Medical Services will emphasize nutrition education in its contacts with the public. UNICEF will provide equipment and supplies for 45 schools for gardens, small animal raising, school lunches and nutrition education; for 6 fish-culture ponds; for training and for food analysis; also 4 vehicles for supervision and training stipends for 270 teachers, nurses, health inspectors, home economists, agricultural extension workers and community development personnel. FAO and WHO will provide technical assistance and fellowships.

The Americas Region

Seminars on nutrition (first UNICEF aid)

E/ICEF/P/L.110

Allocation: \$6,300

Period of aid: 1962

Technical approval: FAO, WHO

As a result of four international symposia on nutritional problems of South America, held in 1958 and 1959, the Inter-American Children's Institute will organize several national seminars to study the nutritional problems of each area and make proposals for their solution. As a first step, three seminars will be scheduled — two in Argentina and one in Bolivia — to be attended by technicians of the respective Ministries of Agriculture, Education and Public Health. Participants will include nutritionists, doctors, nurses, agronomists, home educators and social workers. An international team including technical advisers of the Inter-American Children's

Institute, the Unitarian Service Committee, FAO, WHO, and the Inter-American Institute of Agricultural Sciences will participate in an advisory capacity. Representatives of the Organization of American States and UNICEF will also attend the seminars. UNICEF funds will be used to cover travel costs and pay stipends for 68 trainees. The Inter-American Children's Institute will provide a nutritionist and secretarial services for the organization of the seminars. The Unitarian Service Committee will provide the services of a specialist in paediatrics. It is expected that FAO and WHO/PAHO will provide the technical guidance of their regional nutrition advisers. The Organization of American States and the Inter-American Institute of Agricultural Sciences will designate international technicians to participate in the seminars. The governments of the provinces of Mendoza and Santa Fe, Argentina, and the Government of Bolivia will provide local facilities and secretarial services.

INTERREGIONAL — \$3,903,557.52

International Children's Centre, Paris (continuation)

E/ICEF/P/L.94

Allocation: \$350,000

Period of aid: 1962

Technical approval: WHO

The Executive Board at its June 1961 session agreed in principle to continue assistance to the International Children's Centre for the five-year period 1962-66. The proposed programme and budget of the Centre for 1962 are submitted in the annex to E/ICEF/P/L.94. The budget for 1962 as described in the annex totals 3,570,000 new francs, including 140,000 NF covered by miscellaneous subsidies and receipts. The balance of 3,430,000 NF will be shared on a fifty-fifty basis by the French Government and UNICEF. The increase over the 1961 allocation is in accord with the Board's understanding that UNICEF's share would be increased by stages up to a ceiling of \$400,000 per annum. The Executive Board, during its June 1961 discussions, expressed the hope that the programme of the Centre should be broadened to meet more fully the needs of developing countries. Although the programme for 1962 was prepared prior to the Board's discussion, it does include some development in that direction, and the plan for 1963 may be expected to reflect this trend more fully. Two major courses are to be held at Dakar in 1962: one for schoolteachers on health problems of the child, and the other for social workers to study nutrition and home economics. A course in public health methods applied to problems of childhood will be offered at Santiago de Chile in co-operation with WHO and the American Institute for the Child of Montevideo. Paediatrics courses for physicians will be held in France and Poland; a course on the growth of the normal child in London; three courses in Paris: an MCH course for personnel in social services and administrative positions; a course on the development and behaviour of the child for schoolteachers; and a course for physicians in social aspects of obstetrics. A short course in tuberculosis for British Commonwealth doctors and four seminars are also planned.

All-India Institute of Hygiene and Public Health

Fellowships (Certificate in Public Health Nursing) (continuation)

Allocation: \$45,500

Period of aid: 1962-64

Technical approval: WHO

Under the plan of operations for the UNICEF/WHO-assisted development of the All-India Institute of Hygiene and Public Health, Calcutta, as a regional training centre for MCH personnel, the Government of India undertook to provide a total of 250 tuition-free years of study for non-Indian students. In 1954 the Board

first approved funds for fellowships to enable non-Indian personnel to take up these studies. Since then 65 fellowships have been awarded to non-Indian students from 18 countries of South-East Asia, the Western Pacific, the Eastern Mediterranean and African regions. All the fellows have successfully passed their final examinations and efforts have been made to follow their progress after return to their home countries through a series of reports which they are required to submit periodically to WHO. On the whole, the fellowships have had satisfactory results. UNICEF will provide 20 additional fellowships, 10 each for the academic years 1962/63 and 1963/64.

Companion drugs for treatment of tuberculosis

E/ICEF/P/L.153

Allocation: \$331,000
 Period of aid: 1962-63

Hitherto, for treating tuberculosis, UNICEF has provided only a single drug — isoniazid (INH). This practice was based on advice from WHO. Recently WHO amended this advice to the extent of recommending that UNICEF also provide companion drugs for national pilot projects in tuberculosis control. Since earlier UNICEF support for such projects did not include funds for companion drugs, it becomes necessary to supplement allocations already made or before the Board (in December 1961) in respect of national pilot projects. The Board approved, therefore, a global allocation of \$331,000 to provide such companion drugs for national pilot projects. Expenditures for such drugs will be charged subsequently to the respective country projects. It is expected that in 1962 PAS (para-amino-salicylic acid) will be supplied for most cases.

Freight on cost-free milk to be shipped in 1962

E/ICEF/P/L.111

Allocation: \$1,875,000

As shown in the annex to E/ICEF/P/L.111, approximately 110 million pounds of dried milk will be sufficient to maintain the overall level of milk distribution in 1962. Taking into account accumulated savings and the decline in the freight rate on 1961 shipments as compared with the rate at the time of the original allocation (E/ICEF/R.950), freight costs for shipment of 110 million pounds for 1962 may be computed as follows:

	<i>US dollars</i>
(a) Freight on 110,000,000 pounds at 2¼ cents	2,475,000
(b) Amount available from previous allocations	600,000
	<hr/>
Total recommended allocation	1,875,000

Included in the amount of 110 million pounds is an estimate of 1,581,000 pounds of dried whole milk to be used in infant feeding. This estimate is contingent upon surpluses which would be made available to UNICEF from government sources or from private milk fund drives. At the close of 1962, expenditures for freight on milk shipped during the year will be recorded as assistance rendered to the respective countries. Should 1962 releases of surplus milk exceed present expectations, it will be necessary to submit a supplementary request to the Board at its June 1962 session.

Vitamin A and D capsules for shipment in 1962

E/ICEF/P/L.112

Allocation: \$707,000

Funds are provided for 357 million vitamin A and D capsules to be shipped (mainly) during 1962, for distribution throughout 1963. The amount approved is calculated to cover a shortfall of 70 million capsules required for shipment during the last part

of 1961 beyond the allocation approved by the Board in January 1961 (E/ICEF/R.951). At the close of 1962, expenditures for capsules provided during the year will be recorded as assistance rendered to the respective countries.

Financing international personnel for projects assisted jointly by FAO and UNICEF in 1962

E/ICEF/P/L.137

Allocation: \$584,000

In its discussions in June 1961 of financial relations with FAO, the Board gave general support to the proposals of the Director-General of FAO and the Executive Director of UNICEF for interim measures to avoid curtailment of the development and implementation of programmes associated with child nutrition. Funds required in 1962 to cover costs of expert personnel and fellowships for joint FAO-UNICEF projects total \$1,307,000. Of this amount \$723,000 will be forthcoming from EPTA, leaving a balance of \$584,000 to be provided by UNICEF. The EPTA provision for 1962 is more than double its 1960 contribution. The year 1962, when EPTA will be planning for a new biennium, 1963/64, offers the next opportunity for governments to request greater provision under EPTA for these joint FAO/UNICEF projects. UNICEF allocations for nutrition programmes (excluding personnel costs) increased substantially from 1958 to 1959 (from \$2.2 million to \$7.4 million) and have since remained at approximately \$7 million a year. Within this over-all total, assistance to projects of nutrition education and related activities has progressively increased from \$342,000 in 1958 to \$1,802,000 (estimated) for 1961. The growth of UNICEF assistance in this sector of programme activities is responsible for the increase in the net requirements for personnel. As expenditures are made in respect of expert personnel or fellowships they will be recorded as UNICEF assistance to the project and country concerned.

Allocation to cover deficits

E/ICEF/P/L.145

Allocation: \$11,057.52

EMERGENCY AID — \$323,000

ASIA

Republic of Viet-Nam

Emergency feeding

E/ICEF/P/L.162

Allocation: \$58,000

Approved by mail poll, 7 December 1961

UNICEF will provide 400 tons of rice for emergency feeding of an estimated 20,000 children. The rice will be made available from the contribution of the Government of Thailand to UNICEF. A detailed plan of operations will be concluded between UNICEF and the Government laying down the measures to be adopted for distribution of the rice. A ration of eight ounces of rice per child per day will be made available to about 20,000 children in the affected areas, for a period of ninety days. The National Movement for Emergency Relief, set up with the approval and support of the Government, will co-ordinate assistance received from other countries and agencies and ensure that there shall be no duplication of activities. Assistance from other sources is in the form of medicines and supplies and funds for local operations. The United States International Cooperation Administration, the Government of the United Kingdom, CARE, Catholic Relief Services, and the American Red Cross Society, among others, have contributed supplies or funds for the relief operations.

Emergency feeding (continuation)

Allocation: \$199,000

Period of aid: mid 1962 - mid 1963

UNICEF will continue its assistance for another year, providing 50,000 rations of rice, fat, sugar and soap. Quarterly rations are issued regularly to 45,600 needy children; 4,400 quarterly rations are issued to field teams of the International Christian Committee, which runs 24 feeding centres in the border districts of Hebron, Jerusalem and Nablus and to 20 charitable institutions catering for border villages' children in schools and orphanages. These teams and institutions use their own supplies also and serve daily hot meals for children. UNICEF also supplies dried milk, which is served with the hot meals and through special milk centres run by the United Nations Relief and Works Agency for Palestine Refugees (UNRWA) and the Lutheran World Federation. UNRWA seconds to UNICEF one of its staff members on a full-time basis for the supervision of the programme; \$11,400 is included in the allocation to reimburse UNRWA for his salary and allowances and for transport. District officers of the Ministry of Social Affairs undertake the direct supervision of distribution operations. The United States Government donated 16,000,000 pounds of wheat flour for distribution in 1961 and is expected to provide a similar quantity for 1962. The Government supplements these items with locally produced pulses.

Emergency aid

E/ICEF/P/L.159

Allocation: \$66,000

Following the hurricane of 31 October, UNICEF will help in the rehabilitation of public health and sanitation services. Food, blankets and drugs are being provided by other governmental and private agencies. Relief measures have been planned on a co-ordinated basis, taking into account the assistance proffered from all sources. UNICEF will provide equipment to rehabilitate 2 health centres and 5 sub-centres; 2 ambulances for emergency service, sewage disposal units to drain overflowing septic tanks and sewers, water pumping and purification units, equipment for water filtration and chlorination, water storage tanks and transport to cope with immunization and other emergency measures. The Government of the United Kingdom, in collaboration with the Red Cross, has co-ordinated all offers of aid. The assistance offered includes food, medical supplies and blankets from the American Red Cross; antibiotics, clothing, blankets, dry milk, dry beans, flour and water purification tablets from the Catholic Relief Service; blankets, clothing and food from the Church World Service; and food, medicines and clothing from CARE. British and American military units are participating in the relief work. WHO participated in the planning for this emergency programme and has provided a sanitary engineer to take part in the assessment of needs and to assist during the emergency period.

ANNEX III

Allocations approved by the Executive Board in December 1961

(In US dollars)

	Action taken by Board			
	Allocations to cover			Allocations returned ^b
	Long-range aid	Emergencies	Redistribution of global allocations ^a	
I. AFRICA	2,042,500	—	176,250	108,536
II. ASIA	2,512,500	58,000	1,553,957	55,350
III. EASTERN MEDITERRANEAN	1,869,000	199,000	196,597	30,134
IV. EUROPE	420,000	—	—	5,453
V. THE AMERICAS	5,194,358	66,000	109,696	—
VI. ASSISTANCE BENEFITING MORE THAN ONE REGION	3,892,500 ^c	—	(2,036,500)	—
TOTAL (I-VI)	15,930,858	323,000	—	199,473
VII. OTHER ASSISTANCE:				
Freight (insurance reserve)		33,786		
Operational services		1,489,900		
VIII. ADMINISTRATION		1,022,050		
TOTAL (VII-VIII)		2,545,736		
GRAND TOTAL		18,799,594	—	199,473
I. AFRICA				
Basutoland	—	—	13,100	—
Cameroun	53,500	—	1,000	—
Chad	89,000	—	5,100	—
Congo (Leopoldville)	65,000	—	500	—
Dahomey	24,000	—	800	—
French Equatorial Africa ^d	—	—	—	8,563
French West Africa ^d	—	—	—	94,361
Gabon	—	—	3,800	—
Gambia	22,000	—	—	1,253
Ghana	93,000	—	1,300	501
Guinea	50,000	—	—	—
Ivory Coast	232,000	—	—	—
Kenya	448,000	—	29,600	1,800
Liberia	32,000	—	—	—
Madagascar	—	—	10,330	—
Mali	90,000	—	3,162	—
Mauritania	89,000	—	—	—
Mauritius	—	—	16,500	—
Niger	42,000	—	—	—
Nigeria	132,000	—	—	—
Northern Rhodesia	—	—	—	1,780
Nyasaland	—	—	1,500	—
Ruanda-Urundi	95,000	—	—	—
St. Helena	—	—	4,758	—
Senegal	59,000	—	3,400	—
Seychelles	—	—	7,700	—
Sierra Leone	33,000	—	3,300	—
Swaziland	—	—	7,700	—
Tanganyika	50,000	—	31,500	—
Togo	141,000	—	—	—
Tunisia	163,000	—	—	—

ANNEX III (continued)

	Action taken by Board			
	Allocations to cover			Allocations returned ^b
	Long-range aid	Emergencies	Redistribution of global allocations ^a	
I. AFRICA (continued)				
Uganda	40,000	—	23,900	278
Upper Volta	—	—	6,700	—
Zanzibar	—	—	600	—
AREA TOTAL	2,042,500	—	176,250	108,536
II. ASIA				
Afghanistan	24,000	—	4,200	—
Burma	57,500	—	111,479	993
Cambodia	23,000	—	1,600	—
Ceylon	113,000	—	2,360	9,118
China (Taiwan)	113,000	—	104,942	—
Hong Kong	53,000	—	400	—
India	869,000	—	425,917	44,021
Indonesia	170,000	—	493,180	—
Japan	—	—	15,300	—
Korea	—	—	—	1,026
Malaya, Federation of	217,000	—	14,800	—
Netherlands New Guinea	36,000	—	9,600	—
North Borneo	—	—	825	—
Pakistan	369,000	—	62,573	—
Philippines	196,500	—	233,652	—
Republic of Viet-Nam	27,500	58,000	31,029	—
Sarawak	—	—	—	192
Thailand	236,000	—	42,100	—
Tonga	8,000	—	—	—
AREA TOTAL	2,512,500	58,000	1,553,957	55,350
III. EASTERN MEDITERRANEAN				
Aden	—	—	5,000	—
Ethiopia	290,500	—	13,307	—
Iran	872,000	—	19,100	783
Iraq	202,500	—	120,194	—
Iraq	30,500	—	—	—
Israel	23,000	199,000	5,500	—
Jordan	5,000	—	—	—
Lebanon	54,000	—	—	—
Libya	—	—	214	—
Somalia	—	—	3,044	2,649
Sudan	42,000	—	—	25,998
Syria	204,000	—	30,238	—
Turkey	145,500	—	—	704
United Arab Republic	—	—	—	—
AREA TOTAL	1,869,000	199,000	196,597	30,134
IV. EUROPE				
Greece	30,000	—	—	—
Poland	200,000	—	—	—
Spain	190,000	—	—	3,634
Yugoslavia	—	—	—	1,819
AREA TOTAL	420,000	—	—	5,453
V. THE AMERICAS				
Argentina	84,000	—	—	—
Bolivia	155,000	—	—	—
Brazil	508,000	—	1,335	—
British Honduras	39,000	66,000	—	—
Chile	65,000	—	—	—

ANNEX III (continued)

	Action taken by Board			
	Allocations to cover			
	Long-range aid	Emergencies	Redistribution of global allocations ^a	Allocations returned ^b
V. THE AMERICAS (continued)				
Dominican Republic	95,000	—	—	—
Ecuador	362,000	—	—	—
El Salvador	307,000	—	727	—
Guatemala	118,000	—	56,190	—
Haiti	357,000	—	—	—
Honduras	346,000	—	271	—
Mexico	1,680,058	—	—	—
Nicaragua	—	—	473	—
Panama	408,000	—	8,600	—
Paraguay	182,000	—	—	—
Peru	293,000	—	3,400	—
Surinam	18,000	—	12,200	—
Uruguay	96,000	—	—	—
The West Indies:				
Antigua	—	—	16,600	—
Dominica	—	—	1,200	—
St. Kitts	—	—	3,500	—
St. Lucia	—	—	800	—
St. Vincent	—	—	4,400	—
Trinidad and Tobago	75,000	—	—	—
Regional nutrition seminar	6,300	—	—	—
AREA TOTAL	5,194,358	66,000	109,696	—
VI. ASSISTANCE BENEFITING MORE THAN ONE REGION				
International Children's Centre ..	350,000	—	—	—
All-India Institute of Hygiene and Public Health	45,500	—	—	—
Global allocations:				
Companion drugs for treatment of tuberculosis	331,000	—	—	—
Freight on milk	1,875,000	—	(1,666,500)	—
Vitamin capsules	707,000	—	(370,000)	—
Reimbursement to FAO for project personnel and fellowships	584,000	—	—	—
INTERREGIONAL TOTAL	3,892,500	—	(2,036,500)	—

^a For milk and vitamin capsules as per documents E/ICEF/P/L.133, E/ICEF/P/L.160 and E/ICEF/P/L.161.

^b Consists of returns of unspent balances from previously approved allocations (\$199,473) (E/ICEF/P/L.145).

^c Includes global allocations of \$3,497,000 to be charged to respective country allocations upon implementation (E/ICEF/P/L.111, E/ICEF/P/L.112, E/ICEF/P/L.137 and E/ICEF/P/L.153).

^d Return of unused allocations made prior to 1959.

ANNEX IV

Allocations^a approved for long-range programmes in December 1961, by type of programme
(In US dollars)

	Disease control										Nutrition					Grand total (16)												
	Family and child welfare services (1) b		Urban projects (3)		Malaria eradication and control (4)		Leprosy control (6)		Yaws/VD control (7)		Other (8) d		Sub-total (9)		Child feeding (10)		Milk conservation (11)		Nutrition education and related activities (12)		Other (13) e		Sub-total (14)		Education (15)			
	(1) b	(2) c	(3)	(4)	(5)	(6)	(7)	(8) d	(9)	(10)	(11)	(12)	(13) e	(14)	(15)		(16)											
I. AFRICA																												
Cameroun	40,000	—	—	—	—	—	—	13,500	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	53,500	
Chad	89,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	89,000	
Congo (Leopoldville)	65,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	65,000	
Dahomey	—	—	—	—	—	15,000	—	—	—	—	—	—	—	15,000	—	—	—	—	—	9,000	—	—	—	—	—	—	24,000	
Gambia	—	—	—	—	—	22,000	—	—	—	—	—	—	—	22,000	—	—	—	—	—	—	—	—	—	—	—	—	22,000	
Ghana	—	—	—	—	69,000	—	—	24,000	—	—	—	—	—	93,000	—	—	—	—	—	—	—	—	—	—	—	—	93,000	
Guinea	50,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	50,000	
Ivory Coast	—	93,000	—	—	—	33,000	—	—	—	—	—	—	—	33,000	—	—	—	—	—	106,000	—	—	—	—	—	—	232,000	
Kenya	272,700	18,800	—	—	7,900	6,600	—	—	9,000	—	—	—	—	14,500	—	—	—	—	23,000	—	—	—	—	—	—	—	448,000	
Liberia	—	—	—	—	—	90,000	—	—	—	—	—	—	—	90,000	—	—	—	—	—	—	—	—	—	—	—	—	32,000	
Mali	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	90,000	
Mauritania	89,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	89,000	
Niger	15,000	—	—	—	—	27,000	—	—	—	—	—	—	—	27,000	—	—	—	—	—	—	—	—	—	—	—	—	42,000	
Nigeria	39,000	26,000	—	—	—	—	—	67,000	—	—	—	—	—	67,000	—	—	—	—	—	—	—	—	—	—	—	—	132,000	
Ruanda-Urundi	95,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	95,000	
Senegal	—	—	—	—	—	59,000	—	—	—	—	—	—	—	59,000	—	—	—	—	—	—	—	—	—	—	—	—	59,000	
Sierra Leone	33,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	33,000	
Tanganyika	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	50,000	
Togo	87,000	—	—	—	—	—	—	54,000	—	—	—	—	—	54,000	—	—	—	—	—	—	—	—	—	—	—	—	141,000	
Tunisia	104,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	59,000	—	—	—	—	—	—	163,000	
Uganda	—	—	—	—	—	40,000	—	—	—	—	—	—	—	40,000	—	—	—	—	—	—	—	—	—	—	—	—	40,000	
AREA TOTAL	978,700	137,800	—	—	76,900	315,600	—	167,500	—	—	—	—	560,000	—	—	—	169,000	—	197,000	—	—	—	—	366,000	—	—	2,042,500	
II. ASIA																												
Afghanistan	24,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	24,000
Burma	44,500	13,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	57,500
Cambodia	15,000	—	—	—	—	—	8,000	—	—	—	—	—	—	8,000	—	—	—	—	—	—	—	—	—	—	—	—	—	23,000
Ceylon	110,000	—	—	—	3,000	—	—	—	—	—	—	—	—	3,000	—	—	—	—	—	—	—	—	—	—	—	—	—	113,000
China (Taiwan)	63,000	50,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	113,000
Hong Kong	—	53,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	53,000
India	150,000	—	—	—	70,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	869,000
Indonesia	29,000	—	—	—	—	75,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	170,000
Malaya, Federation of	134,000	—	—	—	73,000	—	—	10,000	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	217,000

ANNEX IV (continued)

	Disease control					Nutrition					Grand total (16)				
	Health services (1) ^b	Family and child welfare services (2) ^c	Urban projects (3)	Malaria eradication and control (4)	TB/BCG (5)	Leprosy control (6)	Yaws/VD control (7)	Other (8) ^d	Sub-total (9)	Child feeding (10)		Milk conservation (11)	Nutrition education and related activities (12)	Other (13) ^e	Sub-total (14)
II. ASIA															
<i>(continued)</i>															
Netherlands New Guinea	36,000	—	—	—	—	—	—	—	—	—	—	—	—	—	36,000
Pakistan	285,000	84,000	—	—	—	—	—	—	—	—	—	—	—	—	369,000
Philippines	26,000	41,000	—	—	63,500	30,000	36,000	129,500	—	—	—	—	—	—	196,500
Thailand	179,000	—	—	—	—	—	—	—	—	—	—	—	15,000	42,000	236,000
Tonga	—	—	—	—	—	8,000	—	8,000	—	—	—	—	—	—	8,000
Viet-Nam, Republic of	27,500	—	—	—	—	—	—	—	—	—	—	—	—	—	27,500
AREA TOTAL	1,123,000	241,000	—	—	209,500	105,000	85,000	425,500	—	100,000	566,000	15,000	681,000	42,000	2,512,500
III. EASTERN MEDITERRANEAN															
Ethiopia	206,000	—	—	—	11,500	—	—	11,500	—	73,000	—	—	—	—	290,500
Iran	—	—	—	850,000	—	—	—	850,000	—	—	22,000	—	—	—	872,000
Iraq	17,500	—	—	185,000	—	—	—	185,000	—	—	—	—	—	—	202,500
Israel	—	30,500	—	—	—	—	—	—	—	—	—	—	—	—	30,500
Jordan	—	—	—	23,000	—	—	—	23,000	—	—	—	—	—	—	23,000
Lebanon	—	—	—	5,000	—	—	—	5,000	—	—	—	—	—	—	5,000
Libya	—	—	—	54,000	—	—	—	54,000	—	—	—	—	—	—	54,000
Syria	—	—	—	42,000	—	—	—	42,000	—	—	—	—	—	—	42,000
Turkey	129,000	34,000	—	—	—	41,000	—	41,000	—	—	—	—	—	—	204,000
United Arab Republic	120,000	—	—	—	—	—	—	—	—	—	25,500	—	—	—	145,500
AREA TOTAL	472,500	64,500	—	1,105,000	65,500	41,000	—	1,211,500	—	73,000	47,500	—	120,500	—	1,869,000
IV. EUROPE															
Greece	30,000	—	—	—	—	—	—	—	—	—	—	—	—	—	39,000
Poland	—	—	—	—	—	—	—	—	—	200,000	—	—	—	—	200,000
Spain	—	—	—	—	—	—	—	—	—	190,000	—	—	—	—	190,000
AREA TOTAL	30,000	—	—	—	—	—	—	—	—	390,000	—	—	—	—	420,000
V. THE AMERICAS															
Argentina	—	—	—	84,000	—	—	—	84,000	—	—	—	—	—	—	84,000
Bolivia	—	—	—	89,000	66,000	—	—	155,000	—	—	—	—	—	—	155,000
Brazil	508,000	—	—	—	—	—	—	—	—	—	—	—	—	—	508,000
British Honduras	—	—	—	39,000	—	—	—	39,000	—	—	—	—	—	—	39,000
Chile	—	—	—	—	—	—	—	—	—	—	—	—	65,000	—	65,000
Dominican Republic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

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