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ABBREVIATIONS

The following abbreviations are used in the *Official Records of the World Health Organization*:

- ACC — Administrative Committee on Co-ordination
- CCTA — Commission for Technical Co-operation in Africa South of the Sahara
- CIOMS — Council for International Organizations of Medical Sciences
- ECAFE — Economic Commission for Asia and the Far East
- ECE — Economic Commission for Europe
- ECLA — Economic Commission for Latin America
- FAO — Food and Agriculture Organization
- ICAO — International Civil Aviation Organization
- ICITO — Interim Commission of the International Trade Organization
- ILO — International Labour Organisation (Office)
- ITU — International Telecommunication Union
- OIHP — Office International d’Hygiène Publique
- PASB — Pan American Sanitary Bureau
- PASO — Pan American Sanitary Organization
- TAB — Technical Assistance Board
- TAC — Technical Assistance Committee
- UNESCO — United Nations Educational, Scientific and Cultural Organization
- UNICEF — United Nations Children’s Fund
- UNKRA — United Nations Korean Reconstruction Agency
- UNRWA — United Nations Relief and Works Agency for Palestine Refugees in the Near East
- UNTAA — United Nations Technical Assistance Administration
- WFUNA — World Federation of United Nations Associations
- WMO — World Meteorological Organization
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INTRODUCTION

A detailed description of the major activities of the World Health Organization during 1957, as part of the general development of its work since its inception, is given in The First Ten Years of the World Health Organization, to be published at the same time as this report. I shall therefore limit myself in this introduction to outlining briefly the principal aspects of the programme carried out in 1957.

As in previous years, promotion of research, either through direct stimulation or through co-ordination of activities, remained in the forefront of WHO’s efforts against the communicable diseases. The two basic tenets underlying these efforts are the necessity of epidemiological research to expand our knowledge of any communicable disease and the need to adjust control or eradication methods to local conditions. Hence a number of projects combine laboratory research with field activities.

The report on 1957 contains illustrations of this. In the case of treponematosis and venereal disease, advisory teams assisted governments to measure the incidence of these diseases through clinical and serological surveys of random samples of population. Such surveys of the incidence of syphilis should ensure greater efficiency in the campaigns against this disease being planned for urban populations. In connexion with these campaigns the problem of sensitization to penicillin is also being studied continuously.

As far as tuberculosis is concerned, the main purpose of the field trials made was to ensure safety for the community through case detection, to be followed by chemotherapy, either ambulatory or domiciliary, and chemoprophylaxis. In fact, several pilot projects were in operation to determine the type of drugs, or combination of drugs, most suitable for use in the community, and to define the methods by which they can be successfully administered over long periods, outside an institution.

The effective prevention and control of bilharziasis also depends on the success of several research projects initiated by governments for the thorough study of the snail—the intermediate host.

In the case of both trachoma and leprosy, a number of field trials made during the year have yielded new and important information on the local epidemiology and are thus helping to establish simple methods of treatment to be applied in mass campaigns.

The fact that vaccine against poliomyelitis had been widely used in a number of countries during the preceding two years made it useful for WHO to convene in 1957 an expert committee to review the progress made and to define the problems which had arisen and remained to be solved. The committee reached important conclusions on the effectiveness and safety of the inactivated virus vaccines used. In addition, it laid down certain conditions and criteria to be applied to trials to be undertaken with a vaccine, based on attenuated live polio viruses.

Both the research and the epidemiological intelligence aspects of WHO’s influenza programme were put to a severe test during the pandemic of influenza which occurred during the year. The two
main purposes of the Organization's system, established ten years ago, are to study influenza viruses and to give early warning of epidemics due to unusual viruses and likely to spread widely. It was therefore unfortunate that the 1957 pandemic began in an area not covered by the WHO network and that it was several weeks before the news of it reached the Organization. The importance of a truly world-wide epidemiological intelligence network was thus again emphasized. However, once the WHO network was alerted events moved swiftly, and within three weeks it was possible to announce that the epidemic was due to a virus which differed from any previously isolated, and that existing vaccines were unlikely to give protection.

The rapidity with which the epidemic spread caused considerable anxiety to health authorities all over the world. WHO was, however, able to ensure a free flow of information on the progress of the epidemic and on its clinical features which, fortunately, were uniformly benign. The early warning and the continuous diffusion of progress reports enabled many countries to prepare for the anticipated strain on their health services. Furthermore, because of the rapid exchange of technical information, some countries were able to produce appreciable quantities of vaccine before the epidemic reached them. While generally there was no attempt at mass production of vaccine, because of the benign character of the disease, large quantities were available in the United States of America within six months of the first isolation of the virus.

Towards the end of the year, when practically the whole world had already experienced a first wave of influenza, there was some concern about the possibility of a second wave. Events were followed very closely through the WHO network and it was found that during the last month of the year a second wave had occurred only where the first had taken place outside the period of normal prevalence of influenza and that where it did occur there was no evidence of an increase of the severity of the disease.

As was to be expected, an increasing effort was made in 1957 to achieve world-wide malaria eradication, which the Eighth World Health Assembly in 1955 had set as the aim of the Organization. In this field, too, research has played an important role and an advisory team has been working on anopheles resistance to insecticides in various parts of Africa where the resistance of Anopheles gambiae to dieldrin is no longer limited to Nigeria, but has also been found in Upper Volta (French West Africa) and in the forest areas of Liberia.

The more general use of WHO standardized tests of mosquito susceptibility to insecticides led, during the year, to the detection of new foci of resistance. For example, A. sundaicus showed resistance to DDT in the Arakan area of Burma, A. subpictus to DDT in Delhi State, India, the same species to dieldrin in Java, and A. stephensi to DDT in the Persian Gulf areas of Iran and Iraq. These testings also confirmed the high resistance not only to DDT but also to dieldrin of A. sacharovi in certain parts of Greece.

A new subject of research stimulated and sponsored by WHO is that of the action that some antimalarials seem to have on the development of the mosquito-stage of the malaria parasites, preventing them from reaching the infective stage.

The number of countries and territories either actively implementing or planning programmes of malaria eradication had by the end of the year reached seventy-six, and the Organization is determined to intensify the provision of technical advice to all countries which need it. To this end a new division for malaria eradication was set up at headquarters and additional technical staff have been assigned to the regions. The co-ordination of antimalaria programmes has been ensured by regional and inter-regional conferences and technical meetings held in all the regions, while the training of personnel for international service in malaria eradication began during the last quarter of the year with the inception of two courses, one in the Americas and one in Europe. These are planned to last about five months, including at least three months on practical field work in existing projects.
Towards the end of the year the Malaria Eradication Special Account, which had received disappointingly few contributions, was substantially increased by the generosity of the United States of America. The great value of this addition to the Account is that it will permit some programmes to be initiated without delay. More contributions will however be necessary in the next few years if WHO is to carry out the responsibilities in regard to malaria eradication entrusted to it by the Eighth World Health Assembly.

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Lack of trained personnel—professional, sub-professional and auxiliary—continued to retard further improvement in health throughout the world. For example, a number of environmental sanitation projects undertaken in various countries, with or without help from WHO, will succeed only if adequate personnel, particularly specialists able to exercise the necessary planning and administrative functions, can be found. In view of this deficiency it is encouraging to know that during the year the first post-graduate class of sanitary engineers received degrees from the University of Naples. In the field of maternal and child health, also, a need for trained personnel has been evident and accordingly greater emphasis has been placed on the training of professional personnel for supervisory posts—physicians with advanced training in paediatrics and preventive medicine, public-health nurses and midwife tutors—and on the strengthening of paediatric education in medical schools, in which the curricula for training have been the subject of a special study.

*

A pleasant event to record is the permanent establishment of the Regional Office for Europe in Copenhagen in a building so generously put at its disposal by the Government of Denmark.

It is also pleasing to report that Ghana, which, as the Gold Coast, was an Associate Member, became a Member of WHO in 1957 and that during the course of the year Albania, Bulgaria, Poland, Romania and the Union of Soviet Socialist Republics resumed active participation in the work of the Organization. This resumption made it possible to implement the larger of the two alternative programmes approved by the Ninth World Health Assembly for the year 1957 and also led to a natural expansion of the activities in Europe. Let us hope that those Members still remaining inactive will in 1958 see their way to accepting the terms of the resolution of the Ninth World Health Assembly so that we can then approach that universality which is so essential to the full success of the activities of the World Health Organization.

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Director-General
PART I

GENERAL REVIEW
1. MALARIA ERADICATION

The progress of malaria eradication in a number of countries, and its completion in some of them, has in certain respects emphasized the international aspects of the problem. This was recognized by the Tenth World Health Assembly, which in May 1957 asked the Director-General to obtain and circulate up-to-date information which would assist the countries concerned to protect themselves against the importation of fresh sources of infection.

Since the historic resolution on malaria eradication of the Eighth World Health Assembly, in May 1955, more and more countries and territories have accepted eradication as the goal of their antimalaria activities. At the end of the year 76 countries and territories were either carrying out or planning a programme of malaria eradication. In the Region of the Americas, the progress of such programmes is impressive and is largely due to the high priority given to eradication by all governments and to the fact that each nation, as a Member of the Pan American Sanitary Organization, has pledged itself to eradicate malaria. In the other regions, some governments give high priority to malaria eradication programmes, but some, though eradication is the avowed goal of their antimalaria work, have not yet at their disposal the necessary administrative machinery or adequately qualified technical staff, so that it seems unlikely that they will reach their objective in the near future.

More technical advice has been provided by the Organization. The technical services of the Organization at Headquarters were strengthened in the middle of the year by a new Division of Malaria Eradication, in the Department of Advisory Services. A regional malaria adviser was appointed for the African Region and another for the European Region, and a sanitary engineer was appointed for inter-regional work. Three advisory teams for malaria eradication have been working in Burma, Ceylon, Iraq, Philippines and Taiwan.

A meeting of all the regional malaria advisers was held, to prepare a plan for malaria eradication, which should be followed in all areas where eradication is technically feasible. The planned activities to be financed from the Malaria Eradication Special Account, which appear in the programme and budget for 1959,1 are a consequence of this meeting and of subsequent discussions with the countries concerned.

In its role as co-ordinator of antimalaria programmes, the Organization has sponsored several technical meetings: the malaria conference for countries of eastern and south-eastern Europe; the fourth and fifth Borneo inter-territorial conferences; the second meeting of the Antimalaria Co-ordination Board for Viet Nam, Laos, Cambodia, Thailand, Burma and Malaya; the Malaria Symposium for the South-East Asia and Western Pacific Regions; and technical meetings of chiefs of malaria services in the Americas, in the Eastern Mediterranean and African Regions.

Malaria training courses were held, under the Organization’s sponsorship, in Rome, for malaria officers from Turkey; in Lwiro, Belgian Congo, and in Amani, Tanganyika, for medical officers in the African Region. The need for internationally recruited personnel, trained in the procedures of malaria eradication campaigns as well as in malariology, has made it necessary for the Organization to prepare suitable personnel. Towards the end of the year, the first two courses for training personnel for international service in malaria eradication were started. They are planned to last about five months, and to include at least three month’s field work in current eradication programmes.

The Organization’s work in sponsoring and co-ordinating research on problems related to malaria eradication was greater in 1957 than before. The special Anopheles gambiae Advisory and Research Team worked in the Belgian Congo, Dahomey, Liberia, Uganda, and moved in the third quarter of the year to Accra in Ghana, where it has established its central laboratory. The wide distribution by the Organization of standard outfits for testing the susceptibility of mosquitoes to insecticides led, in 1957, to the description of several new foci of resistance in anophelines.

A simplified and improved test outfit has been distributed to various workers, particularly in Africa, where the mapping of the presence of the dieldrin-resistant factor in the A. gambiae population would be of great importance for the planning of antimalaria programmes.

Since 1955 WHO has sponsored laboratory research on the induction of resistance in anophelines by exposure to insecticides of successive generations, as larvae, as adults or both. In 1957 the Istituto Superiore di Sanità, Rome, reported a twenty-fold increase of LC50 in A. atroparvus after eighteen

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1 See Annex 4 to Off. Rec. Wild Hlth Org. 81.
generations of exposure. The Ross Institute, London, found that the DDT resistance in *A. sundaicus*, the eggs of which had been sent to London by WHO entomologists in Java, was mono-factorial and recessive. Research is continuing on the rapid sorption of insecticide from the surface of mud walls. A new subject of research, which the Organization sponsored in 1957, is the action that some anti-malarial appear to have on the development of the mosquito-stages of the malaria parasites, which prevents them from reaching the final infective (sporozoite) stage.

At the end of the year the Malaria Eradication Special Account, which was established by the Eighth World Health Assembly in 1955, and which had so far received somewhat limited support, was very materially augmented by a large contribution from the United States Government, through the International Co-operation Administration. The new contribution to the Special Account will be of very great value in starting some programmes and in helping others which are approaching eradication; but larger support will still be necessary in the next few years if the Organization is to fulfil the responsibilities entrusted to it by the resolution of May 1955 on malaria eradication, since the funds now in the Account are sufficient to finance only the work planned for 1958.

### 2. COMMUNICABLE DISEASES

The major developments in the work on communicable diseases in 1957 are summarized in the sections that follow.

One of the chief questions considered was how campaigns against specific diseases could be combined into a general scheme of communicable disease control and made part of the regular rural health services.

Co-ordination of research covering both laboratory work and field studies was extended to a wider range of epidemiological problems. Epidemiological studies and local surveys have been recognized as an essential part of the preparation for projects against practically all communicable disease. These surveys ensure realistic planning of control work, and in some cases have led to simpler and more effective methods of control. Studies on the preparation of vaccines have been continued.

#### Venereal Diseases and Treponematosis

Periodical re-surveys have been made as part of campaigns against the epidemic treponematoses. Recent surveys continue to show that the prevalence of active yaws in populations where a mass campaign is in operation is greatly reduced and that the transmission of yaws had been largely stopped. In many countries the areas of high prevalence of active yaws have now been covered by the campaigns and the work is extending into areas where the prevalence is much lower. The technical policies that have been effective in the areas of high prevalence will need some adaptation to the changed conditions. Preliminary plans have been made for the staffing and the functions of treponematosis advisory teams, which will assist governments to measure the extent of yaws or other treponematoses by clinical and serological surveys of random samples of the population. Such information will guide the planning of the necessary activities.

Success in the control of the endemic treponematoses in the rural areas of many countries makes it practicable to turn to the control of venereal syphilis in the cities of those countries. For this, accurate data on its prevalence will be wanted. WHO has suggested that a start should be made in Africa; and in 1957 it recommended to governments in that region that they should collect data on the frequency of sero-reactors in random testing of pregnant women for syphilis. If other data are available, such as serological studies of population groups, they would help to define the problems before any campaign is decided on or planned.

During the year WHO continued to assist yaws campaigns in Laos, Liberia, Nigeria, Sierra Leone, Thailand, and the Caribbean area, and the campaign against endemic syphilis in Bechuanaland. In Haiti the mass campaign has been completed and a surveillance system has been put into operation. The Indonesian authorities are continuing yaws control work, which has been incorporated into the country's public-health services. Assistance was also given in the venereal-disease control campaigns in Ethiopia, Haiti, Iran, Morocco, Spain and Taiwan. Plans are being made to undertake a venereal disease control programme in Laos. Details of the work will be found in the project list.

A meeting to assist in the co-ordination of yaws campaigns in central African territories was held in Brazzaville in August 1957.

Grave allergic reactions after the administration of penicillin have been reported, in low but increasing prevalence, in the more developed countries; but so far the frequency of such reactions in the rural populations in which campaigns against endemic trepone-
matoses have been carried out has been low. Sensitization to penicillin is being closely watched and publications on this subject are in preparation.

Under its programme of co-ordination of research, WHO has continued its co-operation with the International Treponematoses Laboratory Center at Baltimore and with the WHO serological reference laboratories at Copenhagen (Denmark) and Chamblee (USA).

WHO took part in the Eleventh Congress of Dermatology in Stockholm in July and August, especially in relation to the epidemiology of the treponematoses, the long-term results of penicillin therapy, and laboratory questions.

The papers presented at the Second International Conference on Yaws Control held at Enugu, Nigeria, in 1955 were published in a special number of the WHO Bulletin and two monographs on treponematoses were issued during the year—Biology of the Treponematoses (No. 35) and An International Nomenclature of Yaws Lesions (No. 36).

Tuberculosis

Epidemiological surveys to determine, by standardized methods, the prevalence of tuberculosis infection and infectious pulmonary tuberculosis were in 1957 accepted by many countries as essential in any programme for the control or elimination of tuberculosis.

The two African tuberculosis survey teams, staffed by WHO and equipped by UNICEF, worked in five countries and territories during the year. Striking differences in the prevalence of infectious cases between East and West Africa are being found and will have important repercussions on the planning and execution of control programmes. Several other regions have made plans to start regional survey teams in 1958. These teams will train national survey teams that will operate as permanent epidemiological units in the national programmes of tuberculosis control.

A technical guide, giving detailed instructions for the planning and execution of tuberculosis surveys, was prepared and issued to survey teams.

The simultaneous collection, during the surveys, of data on tuberculin skin sensitivity, on the presence of tubercle bacilli in sputum specimens (by direct microscopy and by culture methods), and on chest x-ray pathology, provides an opportunity for evaluating each of these epidemiological and diagnostic methods with a view to their simplification and standardization.

The value of the standard 5 TU Mantoux test for determining age-specific infection ratios is seriously impaired by any high prevalence of non-specific allergy to tuberculin. Field and laboratory research has given some promise of overcoming this difficulty. The apparent instability of dilute tuberculin has been closely studied, and adsorption on the glass walls of the bottles has been shown to be the chief cause. Substances have been found that prevent this adsorption for months, and so increase the reliability of the tuberculin test.

The relative values of direct microscopy and culture methods in epidemiology have been studied. As the present culture methods are too expensive and complicated to be used as a routine procedure in many countries with a serious tuberculosis problem, efforts have been made to improve the usefulness of direct microscopy by standardizing the collection of sputum and the preparation, staining and reading of the smears. The five bacteriological laboratories co-operating in the biological assay of mycobacteria from different parts of the world have worked on sputum specimens collected under controlled conditions by the survey teams.

By 1957 there was almost unanimous acceptance of the community rather than the individual approach to tuberculosis control. This change of view calls for methods of control that are suitable, technically and economically, for application to a community.

In most of the countries where tuberculosis is an important health problem BCG vaccination is already established as an effective control measure and is being used with the organization and techniques recommended by WHO. Assessment has clearly shown that the community resistance can be raised, as gauged by BCG allergy levels, but also that repeated community vaccinations are necessary and that the potency of the vaccine must be assessed from production to injection. During 1957 five laboratories co-operated in a study co-ordinated by WHO to develop laboratory methods that will give reliable indices of the potency of the vaccines.

The keeping qualities of a freeze-dried glutamate vaccine produced in Japan were subjected to laboratory tests co-ordinated by WHO and to WHO controlled field studies. The results are promising but further trials are required.

Several national assessment teams started work in 1957, on lines similar to those followed by the Organization’s BCG assessment teams.

A study group, convened by WHO in September, agreed that chemotherapy and chemoprophylaxis are important for the community control of tuberculosis but that field research is needed to establish more clearly the part that each can play.

Tests are being made in several pilot projects to determine the drugs or combination of drugs most suitable for use in a community and the methods by which they can be administered over long periods.
outside an institution. In Mauritius a tuberculosis control project on community lines incorporating the survey and control methods outlined here was continued during the year. The UNICEF/WHO Joint Committee on Health Policy in May 1957 recommended that support should be given to projects with a more extended use of chemotherapy.

Zoonoses and Veterinary Public Health

The Joint FAO/WHO Expert Committee on Brucellosis met in Lima in October to review the progress made since 1952 in research on brucellosis co-ordinated by the two organizations. The Committee recommended revisions in the therapy of human brucellosis, further research on diagnostic procedures and pathogenesis of Brucella melitensis infection in sheep and goats, and controlled field trials of vaccines (for use in sheep and goats) which had been developed over the last four years, as part of the research programme, at the FAO/WHO Brucellosis Centres and other laboratories. A FAO/WHO Brucellosis Centre was designated at the Institute of Animal Health, Tokyo.

WHO continued to co-ordinate research on rabies on the lines recommended by the Expert Committee which met in 1956. Reports on the work done by members of the Expert Advisory Panel on Rabies were prepared for publication in the Bulletin. Grants were made to the laboratories in France, Israel, Nigeria, Spain and the United States of America for research work on antirabies serum and vaccines. Standard strains of rabies virus and serum were again sent, on request, to several countries as part of the continued work for standardizing procedures. A rabies training course for Central and South American countries, similar to those held in India in 1952 and in Kenya in 1955, was held in Caracas.

The preparation of reference antisera for eighteen major types of Leptospira was completed in several of the WHO/FAO Leptospirosis Reference Laboratories. When all the reference laboratories have completed the tests, these sera with homologous strains will be available to national laboratories working on leptospirosis.

For a study of the part played by domestic animals in the epidemiology of human influenza, specimens were collected from swine and horses in twenty-five countries before and after the human epidemic. These specimens will be examined at WHO Influenza Centres.

Studies were started to assess the significance of the apparently specific antibody to human poliomyelitis viruses that have been found in cattle and swine sera, and of numerous viral agents, analogous to the "orphan" viruses in human beings, that are being isolated from domestic animals. Studies of diagnostic procedures for toxoplasmosis were continued.

Collaboration with FAO on milk and meat hygiene was continued. A monograph on meat hygiene was published.

A seminar on veterinary public health for European countries was held in Warsaw in November.

Collaboration was continued with the Office International des Epizooties, the Permanent Committee for International Veterinary Congresses and the International Hydatidological Association.

The FAO/WHO/UNICEF Inter-Agency Working Group on Milk and Milk Products continued its co-ordinating activities with regard to the extension of national milk conservation schemes, and satisfactory arrangements were reached for co-operation with bilateral agencies on the distribution and use of surplus quantities of dried skim milk.

Virus Diseases and Vaccine Studies

The influenza pandemic of 1957 subjected the WHO influenza programme to its most serious test since its inception in 1947. In general the programme appears to have met adequately the needs for which it was designed.

In just under three weeks after WHO received the first news that a significant epidemic was occurring it was able to inform health authorities and vaccine-producing laboratories that the responsible virus was unrelated to all previously isolated strains and that existing vaccines were unlikely to give protection. The warning was in time for many countries to prepare their health services for the impending epidemic, and in a number of countries significant quantities of vaccine were produced in time for use before the epidemic struck. Larger quantities of vaccine could probably have been produced in some countries but some authorities, in view of the mildness of the disease, did not consider that a great effort to increase production was warranted. Fortunately, the disease has remained mild up to the time of writing. A close watch for any sign of increasing virulence has been maintained.

Much work throughout the year was devoted to collecting and circulating epidemiological and technical information connected with the pandemic. The data collected and the results of co-ordinated research will be considered by the Expert Committee on Respiratory Virus Diseases in 1958.

1 Albertsen, V. E. et al. (1957) Meat hygiene, Geneva (World Health Organization: Monograph Series No. 33)
An Expert Committee on Poliomyelitis met in July to review the results of poliomyelitis vaccination in various countries. Current technical procedures for production and testing were studied and problems needing further investigation were indicated. A particularly important recommendation was that live attenuated poliovirus vaccines should be tested in more extensive and carefully designed trials. The Committee also considered for the first time the many problems raised by the numerous recently discovered viruses, some of which are responsible for aseptic meningitis clinically identical with non-paralytic poliomyelitis. The Committee indeed recommended that this last term should be abandoned and replaced by the term "aseptic meningitis syndrome", since without laboratory tests it is impossible to establish the etiological agent and many cases of so-called non-paralytic poliomyelitis are not due to poliovirus. Annexes to the Committee's report give guidance on the latest laboratory techniques.

A paper on the results of serological surveys for poliomyelitis in more than forty countries was given at the Fourth International Poliomyelitis Conference. Many of these surveys had been carried out under the WHO poliomyelitis programme. The first steps were taken for a programme of co-ordinated research on arthropod-borne virus diseases, particularly the group B encephalitis viruses, which include yellow fever and the Russian-Spring-Summer-like viruses. At the time of the Pacific Science Congress in Bangkok an informal meeting was held to discuss this programme.

Details of the method of preparing a highly stable dried smallpox vaccine were distributed during the year and assistance was given to a number of countries that wished to start production. The final stages of the controlled trials of this vaccine were completed by the end of the year. These were designed to determine whether the protection given by a partially deteriorated vaccine was likely to be as good as that given by a fully potent vaccine.

As part of the study of typhoid vaccines, arrangements were made for the preparation of large batches of stable dried typhoid vaccines for use in further field trials and later for consideration as reference standards.

Other Communicable Diseases

After the African Conference on Bilharziasis, held in Brazzaville late in 1956, two countries in the African Region—Ghana and the Federation of Rhodesia and Nyasaland—have started pilot control projects. Economical and effective control of bilharziasis and the prevention of its spread must rest on a good understanding of the ecology of the snail intermediate host, and ecological studies for this purpose are an important part of the projects assisted by the Organization in various parts of the world. Field workers in Africa have co-operated in providing the large collections of different species of snails which have been sent to the three WHO snail identification centres. Appreciable advances, of medical and veterinary importance for human bilharziasis and trematode diseases, have been made in knowledge of the intermediate host.

Pilot trials of simple and cheap treatment schedules, suitable for use in mass campaigns for the control of communicable eye diseases, have been continued in Taiwan and have been started in India, Indonesia and Spain. The "intermittent treatment" (three to five consecutive days' treatment every month, repeated for six months each year) has been successfully used in the joint control of epidemic conjunctivitis and trachoma in some countries. Its value in countries where associated conjunctivitis is less important or absent is being studied. Co-ordinated research on the virology of trachoma has continued. In Morocco and Tunisia, satisfactory progress has been made towards integrating the internationally assisted control campaigns with the national public-health services.

More projects against leprosy have been undertaken, most of them in cooperation with UNICEF. Progress has been made in co-ordinating research on the pathology and epidemiology of leprosy, and on the possible value of BCG vaccination in its prevention. Information was collated on the relative merits of different treatment schedules, on percentages of clinical and bacteriological relapses observed among treated patients, and on the influence of mass treatment in reducing new cases of infection. More attention is being given to physical and social rehabilitation of patients who have satisfactorily completed the necessary treatment period so that they may be able as far as possible to return to community life.

Two training courses in the techniques of onchocerciasis control, combined with malaria training courses, have been started in Africa. Research was co-ordinated on lesions of the posterior segment of the eye due to onchocerciasis, and the available information on the biology of vectors of Wuchereria infections was reviewed.

WHO's assistance to India for the programme of field research on sylvatic plague in Uttar Pradesh came to an end during the year. Assistance for a similar project in Indonesia was continued. The data assembled will be considered by an expert committee on plague in 1958.

3. PUBLIC-HEALTH SERVICES

In the varied work described in the following sections, emphasis on the long-range aspects of planning has continued to increase, both in new programmes and in those that have continued from previous years.

Public-Health Administration

The year has been marked by further development in the planning and organization of decentralized integrated health services in various parts of the world, for example, in Afghanistan, where a five-year plan for the development of public-health administration and health services is part of a national development programme, in Iraq, where a system of health services for the provinces is being organized, and in several countries in the Americas, where health services for rural areas are being established or expanded. Details of this work will be found in the project list.

Good progress has been made with the United Nations and with specialized agencies in co-ordinating international assistance for programmes of social development. WHO took part in a survey organized by the United Nations on community development in Africa and, as already indicated, it has continued its assistance to projects which are part of community development programmes. The ILO Convention and Recommendation concerning the Protection and Integration of Indigenous and Other Tribal and Semi-tribal Populations in Independent Countries, which were adopted by the International Labour Conference in June 1957, contain provisions approved by the Tenth World Health Assembly which associate WHO with the application of the Convention; certain practical arrangements to that end were made by WHO in agreement with ILO.

WHO contributed to the Report on the World Social Situation, which was discussed by the Economic and Social Council at its twenty-fourth session in July 1957.

Nursing

A monograph has been prepared on "Principles of Administration applied to Nursing Service", to serve as a guide for countries that wish to strengthen the administrative side of their nursing services.

A thorough understanding of the needs, resources, education and cultural factors of each country is required for the effective planning of assistance. To help nursing leaders to gain this understanding, the Organization is preparing a "Guide for Planning Basic Nursing Education Programmes". A consultant prepared a draft which was discussed by an international group of nurses. A revised draft has been submitted to members of the Expert Advisory Panel on Nursing and others, for suggestions.

A bibliography of text and reference books for basic and post-basic programmes in nursing education has been revised and widely distributed, and, as a supplement to it, a bibliography on auxiliary nursing has been prepared.

Assistance has been continued to basic schools of nursing and midwifery and to the establishment of programmes of post-basic nursing education. Details will be found in the project list.

Social and Occupational Health

At the Tenth World Health Assembly the subject for the technical discussions was "The Role of the Hospital in the Public-Health Programme". Emphasis was given to the essential role of the ambulatory health services in a comprehensive health care programme, and to the importance of enlisting the full co-operation of the general practitioner in preventive and curative health service and in providing health education in the homes of patients.

The study on costs and means of financing medical care services was continued; definitions of the terms used in the study were drawn up and a questionnaire was prepared for consideration by an inter-agency working party, in which the United Nations Bureau of Social Affairs and the ILO Division of Social Security have been invited to participate.

A meeting of the Joint ILO/WHO Committee on Occupational Health was held in March; its report deals with the training of physicians in occupational health and the organization of occupational health institutes. With help from WHO, a department of occupational health was established during the year at the High Institute of Public Health at Alexandria.

(Egypt) and is developing as planned. A regional seminar on the nurse in industry was organized by WHO in London.

A seminar on rehabilitation was organized in Indonesia by the Government in collaboration with the United Nations, ILO, WHO, the International Society for the Welfare of Cripples and the World Veterans Federation. WHO also co-operated with ILO and the World Veterans Federation in a seminar on vocational rehabilitation of the tuberculous in Paris.

Chronic Degenerative Diseases

A Study Group on the Classification of Atherosclerotic Lesions was convened by WHO, in collaboration with the National Heart Institute of the United States Public Health Service, in Washington, D.C. The purpose of this meeting was to enable pathologists from different countries to consider uniform methods for classifying and grading atherosclerotic lesions which would further the world study of atherosclerosis. The group clarified the definition of atherosclerosis and other pathological terms and made a series of recommendations as to uniform and objective methods for making and recording observations on atherosclerotic lesions. The geographical pathology of the disease was also discussed and the importance was stressed of co-ordinating such studies internationally.

Health Education of the Public

An Expert Committee on the Training of Health Personnel in Health Education of the Public met in Geneva at the end of October. It discussed the principal situations in which different types of health workers would find opportunities for health education, the attitudes, knowledge and skills that such workers need for their educational work with the public, and some guiding principles of health education for use in the training of health workers.

In March, the first African regional seminar on health education was organized at Dakar in French West Africa in collaboration with the French Government. A second European conference on health education was held in Wiesbaden, Germany, in June.

Technical discussions on health education were held at the tenth session of the Regional Committee for South-East Asia.

WHO and the South Pacific Commission organized an eight-week training course in health education in Noumea, New Caledonia. The course, which was attended by forty-one trainees from islands in the Pacific, is part of a larger programme of assistance in health education for this area.

During 1957 the Organization, in co-operation with UNESCO, completed a “Study Guide on Teacher Preparation for Health Education”, which is designed to assist health and education authorities in considering current programmes and future plans for the training of teachers in health education.

Maternal and Child Health

Field activities during the year included assistance to the Government of Pakistan for the establishment of a new children’s hospital in Karachi. A paediatrician and a paediatric nurse were appointed for the project. Visiting professors of paediatrics provided by WHO were assigned to the medical schools at the Universities of Kabul and Madras.

Short-term consultants were sent to a number of countries to give advice on various aspects of maternal and child health. For example, consultants on rehabilitation went to Austria, Korea and Japan; on paediatrics to Poland, Turkey and Taiwan; on school health to Egypt; and on administration of maternal and child health services to Tunisia. A consultant on maternal and child health was temporarily assigned to the Institute of Hygiene at the University of the Philippines.

The Eastern Mediterranean regional seminar on maternal and child health, postponed from 1956, was held in Cairo in November 1957.

Plans were made for a study, during the next few years, of how far the current definition of prematurity is appropriate in different countries. In any country the average normal weight at birth is relevant to a practical definition of prematurity, and the first step in the study has therefore been preparations to collect information on both weights and other pertinent data. Work was continued, especially in the Region of the Americas, on the problems of anaemia in pregnancy and of diarrhoeal diseases of infants and young children. A review of the joint work of WHO and UNICEF on maternal and child health in the past five years was discussed by the UNICEF/WHO Joint Committee on Health Policy, at its tenth session in May 1957.

Mental Health

Three study groups met during the year to consider mental health problems of current importance. A Study Group on Schizophrenia, attended by specialists in different scientific disciplines, was convened in September in order to review present knowledge of the causes, forms and treatment of schizophrenia. Because
of its frequency this is perhaps the most important of mental health problems. A Study Group on the Mental Health Aspects of Atomic Energy met in October to consider mental health problems likely to arise in connexion with the increasing use of atomic energy and the possible means of averting or alleviating untoward mental health effects. The need to obtain a balanced and critical appraisal of international experience on the rapidly expanding use in psychiatry of certain drugs currently known as “tranquilizers”, “psychosomimetics”, etc., led the Organization to convene a Study Group on Ataraxic and Hallucinogenic Drugs in Psychiatry, which met in November.

Several studies were started during the year. As a first step to a study of the epidemiology of mental disorder, attention was concentrated on an analysis of common avoidable errors of method in investigating and reporting. Preliminary investigations were made into the mental health effects of technical change. A third study was on the techniques of occupational therapy and the rehabilitation of mental patients; this dealt with the design of psychiatric hospitals and the services they can provide.

Nutrition

Work on the prevention of protein malnutrition has been continued. The Protein Advisory Group (described in the Annual Report for 1956) met twice. Considerable advances have been made in the joint FAO/WHO/UNICEF programme on protein-rich foods. An account of the progress made in developing from locally produced vegetable foods a protein-rich food suitable for the weanling child was given during the year at the FAO Regional Conference on Nutrition for Latin America, held in Guatemala City. This work, part of the FAO/WHO/UNICEF programme, was assisted by a WHO grant. Some fifteen research units have received grants from a sum made available by the Rockefeller Foundation for research in connexion with the programme.

The Joint FAO/WHO Expert Committee on Nutrition met in Rome in October. Its agenda shows how the scope of the nutrition work of the two organizations has widened. In the past, work was concentrated mainly on protein malnutrition, but attention is now being directed towards problems like nutritional anaemias, avitaminosis A and beriberi. Some preliminary surveys have been carried out in countries where these diseases are common.

A training course for medical and other personnel concerned with nutritional problems in various territories in Africa was organized in Uganda.

Dental Health

An Expert Committee on Water Fluoridation was convened in August 1957. It expressed the view that the effectiveness, safety and practicability of water fluoridation as a means of preventing dental caries was now established.

A study of periodontal disease was made as a joint project of WHO, the Indian Council of Medical Research, and the United States Public Health Service. A seminar held in Bombay was attended by selected dental research workers of India, a WHO dental consultant, and a member of the United States Public Health Service. Its purpose was to determine standard methods of reporting and to work out details for the study, and for the examination of sample groups in order to ascertain the prevalence of periodontal disease.

Health Work among Palestine Refugees

WHO continued to assist the United Nations Relief and Work Agency (UNRWA) in the health work among the 950 000 Palestine Arab refugees in Lebanon, Syria, Jordan and Gaza, of whom about forty per cent. live in fifty-eight camps, the rest in towns and villages. The health programme, which costs about $5 000 000, includes preventive and curative medical services, sanitation and shelter maintenance, and supplementary feeding.

Special attention has been paid during the year to the prevention and cure of gastro-enteritis of infants. The maternal and child health programme was continued and there is a good attendance at clinics of mothers and infants. A nutrition survey was made and a milk and supplementary feeding programme again provided an essential dietary supplement for the vulnerable groups.

Communicable diseases control is especially important and continuous preventive inoculation campaigns were needed. Special attention was given to tuberculosis, for which the new chemotherapeutic agents were increasingly used. During the year tuberculosis control accounted for over ten per cent. of the budget for health care.

The Agency contributes fully to work for the eradication of malaria: 1957 was the fourth year of the large Jordan-Yarmuk malaria eradication programme, which is entirely financed by the Agency.

The maintenance of a pure water supply, satisfactory disposal of excreta and refuse, and the control of flies and other insects were again essential parts of the Agency’s health work.
4. ENVIRONMENTAL SANITATION

One of the main weaknesses in many national sanitation programmes is now the shortage of staff for supervisory work and for responsible positions in health administration. Recently WHO has therefore tended to give greater emphasis to training for such posts. In 1957, it increased its assistance to educational institutions and projects for courses in sanitary engineering.

The health hazards associated with the pollution of the atmosphere are claiming much attention in many countries. An Expert Committee on Air Pollution was convened in November to review the present knowledge about the effects upon human health of air pollution and to identify the questions that need further study. For the same purpose, a regional conference on air pollution was held in Italy, which was attended by officials from most European countries.

A study of food sanitation problems has been undertaken by WHO in co-operation with some countries of the European and Eastern Mediterranean Regions. Its purpose is to determine standards, procedures and programmes that may be employed by health agencies in practical food control. Similar studies are to be made in other regions.

Work has begun on a programme for co-ordinated research on standards of drinking-water quality and on methods of water examination.

The amount of information collected and distributed by WHO, in its capacity of coordinating agency for research on insect resistance, has increased considerably. A monograph on insecticide resistance in arthropods was prepared for publication in English and French. Information on work in Japan was made more widely available by the publication, with help from WHO, of an English translation of the results of recent research in that country.

Seven new research projects in resistance have been started with grants in aid from WHO funds and the Organization is keeping in touch with the work being done throughout the world. Standard methods for determining insecticide-resistance levels in larval and adult mosquitos and body lice have been established and work is proceeding on tests for bedbugs, ticks, fleas, flies, Simulium and sandflies. A new survey of the development of resistance of lice to insecticides has been started. Some very promising new insecticides are being tested.

The directors of eleven laboratories attended a technical conference on resistance in July; and an Expert Committee on Insect Resistance and Vector Control was held in November 1957. Much work has been done on the chemistry of insecticides with special reference to their sorption and to the tropical storage of water-dispersible powders.

Work on the toxic hazards of pesticides to man has been confined to the collection and dissemination of information. Field trials of new spraying equipment have been arranged and action has been taken to improve the general efficacy of equipment. Recommended methods of vector control were included in the report of the Expert Committee on Insect Resistance and Vector Control and it is planned to review these regularly in the future. A special effort has been made to bring into operation improved methods of disinsecting aircraft in view of the importance of preventing the transport by air traffic of resistant insects from one country to another.

Collaboration was maintained with the United Nations and specialized agencies on several questions of common interest.

5. EDUCATION AND TRAINING

The new problems facing public-health workers as a result of the increasing use of atomic energy in medicine and industry led WHO to study the training which should help medical and public-health workers to meet the new demands made on them. Reference is made in the following section to the two expert committee meetings convened for this purpose.

General studies at Headquarters, in the regions, and in several countries have contributed to the long-term programme of strengthening the teaching of preventive medicine. A study group explored the problem of how the teaching of physiology could be reoriented to help develop in the medical student a proper understanding of the preventive aspects of medicine, and with the same objective similar studies are being prepared in other basic medical sciences. A Study Group on the Teaching of Social and Preventive Medicine was held in the Western Pacific,
on the lines of previous regional meetings in Europe and Latin America. The report of the 1956 Conference on Public-Health Training of General Practitioners was published.¹ In several countries, particularly in the Americas and in South-East Asia, national discussions on this subject, or on medical education in general, have followed the regional conferences.

The first year's results of an experiment for providing professors of preventive medicine from South-East Asia with advanced training at the School of Public Health at Harvard University were generally encouraging.

Fellowships for studies abroad in preparation for specific posts in the home country were again an important part of the educational work of WHO, and covered all its fields of interest. From 1 December 1956 to 30 November 1957, 1086 fellowships were awarded to persons from 112 countries and territories to study in 84 other countries and territories. Details of these fellowships will be found in the project list in Part IV.

These figures for fellowships do not include the assistance given for attendance at educational meetings (seminars, etc.) organized by WHO, primarily for the exchange of information. Mention of these meetings also will be found in the project list.

Grants were also made to institutions for the organization of national courses, and some maintenance and travel costs for students were granted.

A study of paediatric education, similar to that already made in Europe, was completed in Latin America with the co-operation of the International Paediatric Association and the American Academy of Paediatrics.

A group of consultants made recommendations for a special programme (in which UNICEF may co-operate) for the preparation of teachers in paediatrics and to assist the development of departments of child health in medical schools. Pilot projects have been worked out for a school in India and one in Uganda. WHO continued to assist several other medical and public-health schools by providing foreign professors and granting fellowships to the staff for study abroad. The number of WHO teaching personnel assigned to educational institutions in 1957 was:

- Medical and public-health schools 27
- Nursing and midwifery schools 75
- Other schools 11

The second edition of the World Directory of Medical Schools was published during the year. It includes a brief description of the medical education systems in all countries.

The meeting of an Expert Committee on the Training of Health Personnel in Health Education of the Public and a European regional conference on the same subject are mentioned in the section on health education (page 9).

6. ATOMIC ENERGY AND HEALTH

Two expert committees were convened in 1957 to consider the types of special training required by doctors and other health workers as a result of the growing use of atomic energy and radiation. The purpose of the first of these committees was to provide a guide for post-graduate training of public-health workers in the public-health aspects of nuclear energy. The second was on the introduction of radiation medicine into the undergraduate curriculum and on the type of teaching which should be given to undergraduate medical students.

A study group on the mental health aspects of peaceful uses of atomic energy is mentioned in the section on mental health (page 10).

An international training course on radiation protection at the Centre d'Etudes pour les Applications de l'Energie nucléaire, at Mol, in Belgium, was arranged by WHO in association with the United States Atomic Energy Commission and the Government of Belgium. Most of the participants came from Europe and there were also a few from Eastern Mediterranean countries. This was an advanced course which was designed particularly for personnel from countries in which nuclear energy programmes were in an early stage of development. Fellowships were also awarded during the year in different aspects of radiation protection and the medical uses of radioisotopes.

Work has been started on the formation of an Expert Advisory Panel on Radiation. Its members will assist WHO in the consideration of special problems related to the health aspects of atomic energy and x-radiation. The report of the Study Group on the Effect of Radiation on Human Heredity (which met in 1956) was published in 1957 with the papers submitted by members of the group.

Co-operation has continued with the United Nations Scientific Committee on-the Effects of Atomic Radiation which, at its meeting in March 1957, considered the report of the Study Group on the Effect of Ra-
radiation on Human Heredity. The rapporteur of the Study Group took part in the discussions. WHO co-operated with UNESCO and FAO in preparing background data to assist the Scientific Committee in assessing the probable effects of disposing of radioactive waste in the oceans. WHO also co-operated with FAO in preparing a paper for the Scientific Committee on calcium components of human diet in various countries.

At the conference on the use of radioisotopes in scientific research, called by UNESCO in September 1957, WHO arranged for evening lectures on radiation protection, the disposal of radioactive wastes, and the clinical use of radioisotopes, as those subjects were not included in the agenda of the Conference.

WHO was represented at the General Conference of the International Atomic Energy Agency, in Vienna, in order to co-operate with this new agency from the start.

Co-operation with other United Nations bodies continued through the Sub-Committee on Atomic Energy of the Administrative Committee on Co-ordination. Useful contacts were made through attendance at meetings of the Commission for Technical Co-operation in Africa South of the Sahara and the International Organization for Standardization.

7. EPIDEMIOLOGY AND HEALTH STATISTICS

Health Statistics

A revised edition of the Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death was issued during the year in English, French and Spanish. In accordance with WHO Regulations No. 1 relating to health statistics, the revised Manual is to be applied as from 1 January 1958 in the compilation of morbidity and mortality statistics.

The volume of Annual Epidemiological and Vital Statistics, 1954, (which was published during the year) gives data from more countries than formerly. It contains, in addition to the tables on aggregates of cardiovascular diseases, new tables on aggregates of infective and parasitic diseases. Two new tables have been added to the data concerning specific mortality rates—one relating to hyperplasia of the prostate and the other to complications of pregnancy, childbirth and the puerperium. For the first time statistics of health personnel, hospital establishments and of vaccinations have been included.

In the monthly issues of the Epidemiological and Vital Statistics Report, in addition to routine information on vital statistics and communicable diseases, special collections of data were published on mortality from chronic degenerative diseases, nephritis and nephrosis, anaemias, hyperplasia of the prostate, acute infectious encephalitis, maternal mortality, accidents to pedestrians, cancer of the breast and female genital organs, and perinatal mortality and its causes.

Further statistical studies were made showing the suitability of the proportional mortality ratio (percentage of total deaths represented by deaths at ages 50 and over) as an indicator for the component “health, including demographic conditions” in the measurement of levels of living. This work is a continuation of the investigations being carried out on health indicators at the request of the United Nations. Other studies included the computation of tables for use by water analysts for the determination of the potability of drinking-water, a guide to statistical methodology applicable to malaria work, a discussion of the value of various methods for the refinement of the conventional infant-mortality rate, and the establishment of indices of endemicity. The last two have been published in the WHO Bulletin.

A group of epidemiologists who met in April carried out a critical survey of WHO’s epidemiological and statistical work and made recommendations relating to epidemiological studies in various fields and suitable methods for them.

The Sub-Committee on Cancer Statistics met in December and made a series of technical recommendations on methods for ascertaining cancer morbidity, particularly through cancer registers, and for statistical studies likely to increase knowledge of the disease.

International Quarantine and Epidemiological Intelligence

The first of October 1957 marked the completion of five years’ existence of the International Sanitary Regulations. About 170 States and territories are bound by the Regulations, and most of their provisions have in fact been observed by the few States that are not formally bound.

As requested by the Eighth World Health Assembly, an annotated edition of the Regulations was published in English and in French and a Spanish translation was prepared. This volume, which is intended primarily to facilitate the use of the Regulations by national and local quarantine authorities, contains not only the text in force on 1 July 1957 but also the interpretations given by the Committee on Inter-

1 Bull. Wld Hlth Org. 1957, 16, 763; 1083
national Quarantine and approved by the World Health Assembly. Annexes contain a list of States and territories, showing their position under the Regulations; the text of all reservations; the original text of articles remaining in force for countries which have not accepted subsequent amendments; the latest recommendations for disinsectization of aircraft, and other reference material.

Yellow fever in monkeys spread northwards through the forests of Central America to Guatemala and British Honduras, but did not result in any human case in the cities, ports or airports, where \( Aëdes aegypti \) eradication has long been practised systematically.

As regards smallpox, 1957 was an unusual year, because eighteen countries reported the importation of the disease by international traffic in the twelve months ending on 30 June 1957.

In addition to the usual information on the prevalence of pestilential diseases, the WHO epidemiological broadcast bulletins and the Weekly Epidemiological Record have included the most recent information on the spread and severity of the pandemic of Asian influenza.

8. DRUGS AND OTHER THERAPEUTIC SUBSTANCES

The Expert Committee on Biological Standardization, which met in September, approved the establishment of the International Standards and defined the International Units for pertussis vaccine, phenoxy-methylpenicillin, tetracycline, and erythromycin. The Committee also authorized the establishment in the near future of international standards for the following substances: vitamin B\(_{12}\), pyrogen, syphilitic human serum, antistreptolysin O, anti-Rh\(_{b}\) (anti-D) bloodtyping serum, and poliomyelitis sera of types 1, 2 and 3.

A Study Group on Recommended Requirements for Biological Substances met in October and suggested a detailed procedure which WHO might follow in framing and issuing international recommendations as to the requirements, general or specific, to be observed in the manufacture and control of important biological products.

The draft text of a Supplement to Volumes I and II of the International Pharmacopoeia was circulated in 1956\(^1\) to Member States for comments and suggestions: comments on the draft were received also from members of the expert advisory panel and from other specialists and organizations. The Expert Committee on the International Pharmacopoeia met in October 1957 to consider these suggestions, and afterwards work on the preparation of the final text was undertaken. This Supplement includes ninety-three monographs on new pharmaceutical preparations and fourteen appendices.

WHO has continued its selection of recommended international non-proprietary names for pharmacetical preparations. The general principle for devising these names is kept as simple as possible. It is primarily based on the good will and interest of Member States, manufacturers and other bodies concerned. The names already suggested by WHO have been well received in various countries. The fifth list of proposed names dealt with addiction-producing substances, in order to facilitate their international control. The Sub-Committee on Non-Proprietary Names, which met in June, established a further list of proposed non-proprietary names for pharmaceutical preparations.

In accordance with an agreement between WHO and the Swedish Apotekarsocietet, a Centre for Authentic Chemical Substances was set up in the Apotekens Kontrollaboratorium in Stockholm for the collection, storage and distribution of a number of chemical reference preparations. These preparations are mainly substances for which international biological standards have been provided in the past, but which can now be characterized entirely by physico-chemical methods; other chemicals required as reference standards in medicine and pharmacy have been included upon the advice of the WHO Expert Committees on the International Pharmacopoeia and on Biological Standardization.

In compliance with certain international conventions on the control of narcotic drugs, and in accordance with the recommendation of the Expert Committee on Addiction-producing Drugs, decisions with regard to the addiction-producing properties of seven drugs—dextromethadone, dextromoramide (as well as racemoramide and levomoramide), etodixidine, morpheridine, propoxyphene, trimeperidine, and a normetha-
done preparation—were transmitted to the Secretary-General of the United Nations.

Further recommendations of the Expert Committee on Addiction-producing Drugs refer to tranquilizing drugs, the evaluation of addiction-producing properties by means of experiments on animals, the establishment of an addiction information centre, and the existing list of preparations exempted from international narcotics control.

The series of studies on synthetic substances with morphine-like effect, undertaken in accordance with resolution 505 C (XVI) of the Economic and Social Council, was completed by the fourth study, on "Clinical experience: potency, side-effects, addiction liability". This was presented at the twelfth session of the United Nations Commission on Narcotic Drugs, together with the report of the WHO Study Group on Treatment and Care of Drug Addicts. The study has been published in the WHO Bulletin. ¹

The collection of information for recommended laboratory methods was continued. Three further papers, on cholera, staphylococcus and streptococcus, were completed for publication.

A Study Group on Histological Definitions of Cancer Types met in Oslo in June. In discussing priority in the selection of types of cancer for reference activity, the Group agreed that tumours should be classified according to (a) anatomical site of origin, and (b) histological characteristics. The Group recommended the initiation of reference work on tumours of the oro-pharynx, lung, soft tissue and breast. It was later decided to give first priority to tumours of the lung and of the soft tissue.

The Joint FAO/WHO Expert Committee on Food Additives, which met in June, made recommendations on uniform methods for evaluating the safety of food additives. The collection of information on specific additives continued.

Work has been started on the collection of data as to the physical, chemical, and biological specifications of antimicrobials, antioxidants and emulsifiers and on collating current legislation governing the use of those substances in food.

9. PUBLICATIONS AND REFERENCE SERVICES

In addition to the periodicals and the Official Records series, the following were published during the year:

Effect of Radiation on Human Heredity (published also in French);

International Sanitary Regulations — annotated edition (published also in French);

Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death (1955 Revision), Volume 1 (published also in French and Spanish) and Volume 2;

World Directory of Medical Schools (2nd edition);

the Spanish edition of the Pharmacopoea Internationalis (Volume II);


The year was noteworthy for the unusually large number of reports of expert committees, study groups and advisory groups published in the Technical Report Series.

Sales of publications continued to develop satisfactorily.

10. PUBLIC INFORMATION

An increase in production of film material for television, and preparation for WHO's tenth anniversary celebration in 1958, have been the principal developments in information work during the year.

The pandemic of Asian influenza was the health event of predominating public interest and WHO's work was widely and favourably reported. Among WHO activities to which the press gave particular attention were the publication of the report of a WHO study group on the Effect of Radiation on Human Heredity, and the meeting of the Expert Committee on Poliomyelitis.

¹ Bull. Wld Hlth Org. 1957, 17, 569
Since January 1957, the WHO Newsletter—under its new title World Health—has appeared every two months instead of monthly as hitherto, and its length has been doubled. These changes have practical advantages for production and distribution and have been favourably received. Distribution increased during the year from 43,000 to 50,000 for the English edition and from 13,000 to 16,000 for the French.

Assistance has been given to several authors who are writing books on different aspects of international health for publication by commercial firms in 1958. An illustrated brochure Ten Steps Forward has been prepared and published by WHO for distribution in 1958, and a special tenth anniversary edition of the folder WHO, What it is, What it does, How it works was produced in eight languages.

About one hundred recordings were made on health subjects for broadcasting by the United Nations Radio and national networks. World Health Day material issued from Headquarters was used in fifty-nine broadcast transmissions in thirty-one different countries and in twelve languages, not including broadcasts using material from regional offices.

Five television networks in four countries produced programmes which included WHO activities and interviews with persons connected with the Organization. During the Tenth World Health Assembly, a short television newsreel was produced to which were added interviews with delegates for use on television programmes in their own countries.

A new ten-minute film was completed on malaria eradication strategy and its application in Iraq. Work continued on the fifty-minute documentary film which will be ready for general distribution in 1958 in connexion with the Organization’s tenth anniversary.

Arrangements have been made with national organizations in Sweden and Switzerland for the production of Swedish and German language versions of the WHO film on alcoholism To Your Health. In France the French version of the film is being given general cinema distribution and is being shown in educational institutions. During the first half of 1957, 220 16-mm prints and 80 35-mm prints were sold and the proceeds credited to miscellaneous income.

Work has progressed on an exhibit depicting WHO’s aims and activities which is being produced, without cost to the Organization, for the United Nations Pavilion at the 1958 Brussels Exhibition.

Much of the success of World Health Day (7 April) in 1957, on the theme “Food and health”, may be attributed to the participation of the Food and Agriculture Organization in preparing and distributing material and stimulating interest in the occasion. The theme chosen for World Health Day in 1958 is “Ten years of health progress”.

11. CONSTITUTIONAL, FINANCIAL AND ADMINISTRATIVE DEVELOPMENTS

CONSTITUTIONAL

Membership of the Organization

Ghana became a Member of the Organization by accepting the Constitution on 8 April 1957. A list of the Members and Associate Members of the Organization appears in Annex 1.

Privileges and Immunities

There were no further accessions in 1957 to the Convention on the Privileges and Immunities of the Specialized Agencies. Annex VII to this Convention was revised by the Tenth World Health Assembly in order to extend the privileges and immunities referred to in Section 21 of the standard clauses to any Deputy Director-General of the Organization.

THE FINANCIAL POSITION

The general financial position of the Organization again showed an improvement compared with previous years. Following the resumption, as from 1957, of active participation in the work of the Organization of several Members, the total amount which became available to the Organization for obligation in 1957 was $12,532,760, as compared with $10,203,084 for 1956.

Under Technical Assistance funds, the earmarkings to WHO for 1957 totalled $6,195,404 compared with
$5 804 266 for 1956. The developments in connexion with the Expanded Programme of Technical Assistance are described in Section 19 (page 38).

The Budget for 1957

The total amount of the approved 1957 budget, including supplemental appropriations of the Ninth and Tenth World Health Assemblies, was $13 590 420, of which an amount of $1 057 660 related to the Undistributed Reserve, equalling the assessments of China and of the Members which did not actively participate in the work of the Organization in 1957. The distribution of the approved 1957 budget among the various Appropriation Sections is shown in Annex 7.

Contributions and the Working Capital Fund

The payment of contributions for 1957 has compared favourably with experience in previous years. Collection of arrears of contributions made it possible to return to the Working Capital Fund the 1956 budgetary cash deficit of $174 012.

The actual obligations incurred during 1957 and the status of collections of contributions and of advances to the Working Capital Fund as at the end of 1957 will be shown in the Financial Report 1 (a supplement to this volume) which will be submitted, with the Report of the External Auditor, to the Eleventh World Health Assembly.

Scale of Assessment

The Tenth World Health Assembly approved the scale of assessment for 1958 in accordance with the principles set forth in resolution WHA8.5. In resolution WHA10.9 it fixed the assessment of the new Member, Ghana, for 1957, and also tentatively for 1958, subject to review by the Eleventh World Health Assembly.

ADMINISTRATION

Structure and Staff

Annexes 8, 9, and 10 give the details of the composition of the Secretariat as at 30 November 1957. During the year, the total number of staff of the Organization remained at the level of about 1470.

As a result of changed circumstances, or in order to improve operating efficiency, a few changes were made during the year in the structure of the Secretariat.

The development of the malaria eradication programme made it necessary to establish a Division of Malaria Eradication (responsible to the Assistant Director-General, Department of Advisory Services) to advise on malaria eradication policies and techniques, and to direct the Organization's work in this field.

After a review of the work in the Offices of the Director-General, the Division of External Relations and Technical Assistance was disestablished in 1957. Its functions relating to the Expanded Programme of Technical Assistance were transferred to the Department of Advisory Services; those concerned with the Organization's external relations became the responsibility of a new Office of External Relations reporting to the Office of the Director-General. The duties of the Liaison Office with the United Nations in New York remain unchanged, but its Director now reports directly to the Office of the Director-General.

To improve the overall planning and the follow-up of the operating programme, a new Office of Programme Co-ordination was created and the former Office of Reports and Analysis was changed into an Office of Programme Evaluation. Both offices are directly responsible to the Assistant Director-General, Department of Advisory Services.

The administrative supervision of the Epidemiological Intelligence Station, Singapore, was transferred, as from 1 January 1957, from the Department of Central Technical Services to the Regional Office for the Western Pacific.

Following the recommendations of the United Nations Salary Review Committee and the Administrative Committee on Co-ordination, the Executive Board, at its nineteenth and twentieth sessions, approved a number of changes in the conditions of service of the staff of the Organization. The amended Staff Rules became effective as at 1 January 1957 for the staff at Headquarters and the regional offices. The revised Rules apply to staff assigned to field projects from 1 January 1958.

Common Services with the United Nations and other Specialized Agencies

In the interests of economy and to avoid duplication, arrangements were agreed upon between WHO and the European Office of the United Nations to the effect that as from 1 January 1958 WHO would itself perform the functions concerned with printing and sale of publications, previously provided as a common service by the United Nations.

During 1957 negotiations also took place between the United Nations and WHO with a view to transferring the United Nations Joint Medical Service in Geneva to WHO from 1 January 1958.

Procurement of Supplies

The value of medical and other supplies and equipment purchased between 1 October 1956 and 30 Sep-
Reimbursable purchases made on behalf of governments included some substantial quantities of vaccines against poliomyelitis, smallpox and Asian influenza.

**Accommodation for Regional Offices: Conclusion of Agreements**

An agreement for the occupancy of new premises to house the Regional Office for the Western Pacific in Manila was concluded with the Government of the Philippines in the latter part of 1957.

The Lease Agreement between the Organization and the Government of Egypt regarding the Alexandria premises occupied by the Regional Office for the Eastern Mediterranean and which was due to expire in 1958, was renewed for a further period of nine years.

**Place of Eleventh World Health Assembly**

The Tenth World Health Assembly accepted the invitation of the United States of America to hold its eleventh session, the Organization’s Tenth Anniversary Commemorative Session, and the twenty-second session of the Executive Board, in that country. Following negotiations between the Government of the United States and the Organization, it was decided that these meetings would be held in Minneapolis (Minnesota).
PART II

THE REGIONS
12. AFRICAN REGION

The year 1957 has seen a greater increase in the work in the African Region than any other year since its establishment. WHO’s assistance has been concentrated chiefly on communicable disease control and on surveys and courses in nutrition, although attention has also been given to environmental sanitation, nursing and maternal and child health. A seminar on health education of the public—the first in the Region—provided an opportunity for discussing ways of improving work on this subject and of gaining public support for health policies. High priority was given to training, by the organization of courses and the award of fellowships.

In communicable disease control, WHO has concentrated on organizing and co-ordinating surveys and campaigns, and on providing training. Operations against yaws were extended and another meeting was held to co-ordinate the work being done in the several campaigns in the Region. The two tuberculosis survey teams continued and extended their work in East and West Africa, and other surveys were undertaken in preparation for tuberculosis control projects which will include domiciliary chemotherapy. Campaigns against leprosy, based on regular treatment with sulfones, first launched in Nigeria, have been taken up in several other territories (often with help also from UNICEF), and by the end of the year very large numbers of leprosy patients were under treatment. There were important developments in the investigation of the technical difficulties of interrupting transmission of malaria in many parts of Africa, and two technical meetings (one in 1956 and the other in 1957) provided much useful information on this question. The continued work of a survey team has provided more knowledge of the conditions in which Anopheles gambiae can escape the action of insecticides. Two courses on malaria control, one in English and the other in French, have provided also instruction on onchocerciasis.

Collaboration continued with UNICEF, FAO, the Commission for Technical Co-operation in Africa South of the Sahara (CCTA), the United States International Co-operation Administration and other international bodies working in Africa.

The Regional Committee

The seventh session of the Regional Committee was held at Brazzaville, in French Equatorial Africa, from 16 to 21 September 1957 and was attended by representatives of seven Member States—Belgium, France, Ghana, Liberia, Portugal, Union of South Africa and the United Kingdom of Great Britain and Northern Ireland—and of the three Associate Members in the Region—Federation of Nigeria, Federation of Rhodesia and Nyasaland, and Sierra Leone. There were also present representatives of UNICEF, CCTA, the International Committee of Military Medicine and Pharmacy, the International Council of Nurses, the International Union for Health Education of the Public, and the League of Red Cross Societies. The Director-General was represented by the Assistant Director-General, Department of Advisory Services.

The Committee approved the Regional Director’s report, and noted several resolutions taken by the World Health Assembly, in particular the resolution in regard to the special session in 1958 to celebrate the tenth anniversary of WHO.

The Committee approved also the revised regional programme for 1958 and the draft programme and budget estimates for 1959, in both cases with some amendments and adjustments. It agreed unanimously that the present method of appointing regional directors was satisfactory.

The Committee discussed the Assembly procedures for examining the programme, budget and ancillary administrative, financial and personnel matters, and expressed the opinion that the Regional Committee was the appropriate body to discuss and establish the regional programme and priorities.

The Committee noted with satisfaction the decision of the United Nations Technical Assistance Committee to increase to twelve per cent. the proportion of resources that might be devoted to regional and inter-regional projects and expressed the opinion that limitation of the funds available for such projects was detrimental to international assistance in health work.

The Committee decided to hold its eighth session at Monrovia, Liberia, in September 1958, and accepted the invitation of the Government of Kenya to hold the ninth session in Nairobi in September 1959.

The technical discussions at the seventh session of the Regional Committee were on the role of rural health centres in the control of endemic diseases in the African Region. “Community development and the health component” was chosen as the subject for technical discussions during the 1958 session.
Administrative and Organizational Developments in the Regional Office

The considerable increase in the regional office's work in 1957 has already been mentioned. The regional office staff of all categories totals four more than in 1956; the number of project staff has increased by eighteen. The administrative staff remains substantially unchanged. The filling of positions now foreseen should relieve the pressure on the present professional staff and permit of a greater development of the work in the Region. Greater efforts are being made to recruit general service staff from within the Region. The constant shortage of stenographic staff is particularly troublesome.

Five international meetings have been held in the conference hall since the move to the Cité du D'joué, one of these being the seventh session of the Regional Committee, the first held at the seat of the Regional Office. The arrangements for those meetings have proved so satisfactory that future meetings will be held there as far as possible.

Projects in Operation in the Region during the Year

During the twelve months ending 30 November 1957 fifty-two projects received assistance from WHO, as compared with thirty-six in the previous twelve months. Twenty-five were financed from the regular budget, twenty-seven from Technical Assistance and twenty-four were also assisted by UNICEF.

The largest group of projects was in communicable disease control (thirty-seven as compared with twenty-one in the previous year). There were five projects in nutrition (and one of the communicable disease projects also included nutrition work), two each in public-health administration, environmental sanitation, nursing and assistance to educational institutions.

One hundred and four fellowships were awarded during the year (as compared with 105 in 1956)—seventy-four from regular and thirty from Technical Assistance funds.

Details of the projects in operation in the Region during the period under review will be found in the list beginning on page 43.

13. REGION OF THE AMERICAS

An increase in the regular budget and the contributions to the Special Malaria Fund of the Pan American Sanitary Organization have resulted in a considerable expansion of the PASO/WHO assistance to health work in the Americas during 1957. Assistance was again given for three main, and related, purposes: the strengthening of national public-health services, the co-ordination of national campaigns against certain communicable diseases into regional eradication programmes, and the promotion of education and training. The number and scope of projects have increased and the Regional Office has been asked to help in new fields of public health.

Further decentralization and strengthening of the zone offices ensured closer collaboration with the national authorities.

The programme for the eradication of malaria from the Western Hemisphere, made possible by the provision of special funds and a concentration of administrative experience, has first priority in the current work of the Region. Apart from its primary objective, this programme, by its large-scale demonstration of the benefits which may accrue from international collaboration in campaigns against communicable disease, should stimulate co-operative action in other fields also.

Assistance was again given with programmes of integrated health services which are ultimately to form part of the permanent public-health services. Progress was made in campaigns for the eradication of smallpox, yaws, and the urban vector of yellow fever, and studies on the epidemiology of jungle yellow fever were continued. Assistance was again given to governments for the improvement of environmental sanitation.

In education and training, advice was given on planning, staffing and reorganizing university courses, including those on preventive medicine and for the training of nurses. Seminars and fellowships were again an important part of the education work of the Region. A number of travel grants were awarded to enable senior officials to increase their knowledge of the techniques and procedures used in other countries. Particular attention was again paid to the training of statistical workers.

The Regional Committee

The X Meeting of the Directing Council of the Pan American Sanitary Organization (PASO), which was also the ninth session of the Regional Committee
of WHO, was held in Washington, D.C., from 16 to 27 September 1957. The session was attended by representatives of all Member States in the Region, and by representatives of France, the Netherlands, and the United Kingdom of Great Britain and Northern Ireland, on behalf of certain territories in the Region. Colombia, a Member of PASO, was also represented. Canada was represented by an official observer. Representatives also attended from the Organization of American States, the United Nations, the Technical Assistance Board, UNICEF, ILO, FAO, and sixteen non-governmental organizations in official relations with WHO. The Director-General attended the session.

Representatives of every country in the Region took part in the discussion on the annual report of the Director of the Pan American Sanitary Bureau, Regional Director of WHO, in which were reviewed the health problems of the Region and the work done in 1957 on communicable diseases, public-health administration, education, and publications. The antimalaria work, in which very good progress has been made, was discussed and the Regional Director of UNICEF described the part played by UNICEF in the eradication programme. The Council recommended that Member governments should make malaria a notifiable disease in all areas, that reports should be sent regularly to PASB for the information of all health authorities, and that more attention should be given to the detection of new cases. The Council approved the general plan for the malaria eradication campaign.

The Council thanked the Government of Argentina for its collaboration in the establishment of the Pan American Zoonoses Center in Azul in 1956.

The Director was asked to continue his study of the fellowships programme, so that a detailed report might be presented to the 1958 meeting. The project for the gradual development of international work on food and drug control was approved.

The Council adopted the programme of the Pan American Sanitary Organization for 1958. As the Regional Committee, the Council approved the transmission of a proposed programme and a budget for the Region of the Americas to the Director-General for his consideration when preparing the WHO budget estimates for 1959.

As regards the method of appointing regional directors of WHO, the Council, as the Regional Committee, considered that the present procedure was satisfactory and that it would not be advisable to make any change. It also agreed that the present procedure for examining the annual programme and budget of WHO in the Health Assembly was satisfactory, and that there would be no advantage in changing it.

The Council considered that the system of direct allocations to the specialized agencies participating in the Expanded Programme of Technical Assistance should be re-established. As regards the allocation of funds under the present procedure, the Council stressed the need for TAB to inform each government of the target figures assigned to it, and of the agency sub-totals for the participating organizations. The Council considered that governments should be exempted from the requirement to contribute to the local subsistence costs of internationally recruited personnel engaged in Technical Assistance projects.

The subject of the technical discussion was, “Bases and methods for the evaluation of health programmes”. The subject selected for the technical discussion in 1958 was, “The prevention of accidents in childhood”.

Mexico and Venezuela were elected for a term of three years to the Executive Committee of PASO in place of Colombia and Paraguay, whose periods of office had come to an end. The 31st Meeting of the Executive Committee of PASO, Working Party of the WHO Regional Committee, was held in Washington from 12 to 21 June 1957; the 32nd and 33rd Meetings were held immediately before and after the X Meeting of the Directing Council.

The XV Pan American Sanitary Conference, which will be the tenth session of the WHO Regional Committee, will be held in San Juan, Puerto Rico, in 1958.

Administrative and Organizational Developments in the Regional Office

There was a considerable increase in administrative work in 1957; most of it resulted from the special voluntary contributions of $1 899 400 to the PASO Special Malaria Fund which were received during the year, although there was also some increase in regular funds. A detailed estimate of the financial needs and resources for the region-wide malaria eradication campaign was drawn up in collaboration with the technical staff; the administrative staff took part in meetings held for the training and orientation of national and international personnel and for the exchange of information; and a group of four consultants in administrative methods was provided to assist Member governments in the administrative aspects of the programmes.

The only change during the year in the organization of the Regional Office was the amalgamation of the various services concerned with publications and information, to ensure the best use of the resources of the Office.

All policy and procedural decisions of the Regional Office were brought up to date and combined in a
new PASB/WHO manual issued during the year. The manual, which follows the general pattern of the WHO Administrative Manual, has facilitated the delegating of accounting, personnel and other administrative services to the zone offices.

Projects in Operation in the Region during the Year

In the twelve months ending 30 November 1957, sixty-four projects received assistance financed from the WHO regular budget or from Technical Assistance, as compared with seventy-two for the preceding twelve months. There was a great increase in the number of fellowships awarded—261 as against 159 in the preceding period.

In general the distribution of projects under the chief heads—control and eradication of communicable diseases, strengthening of national health administrations and training of health workers—was about the same as in the previous period, although there was some increase in the work on malaria eradication, which accounted for nine of the twenty-one projects for work on communicable diseases. There were eighteen projects in public-health administration (mostly integrated health services for rural areas), three in health statistics, eight in nursing, one in education of the public, two in nutrition, seven in environmental sanitation, including Aedes aegypti eradication, one in alcoholism, and three for assistance to educational institutions.

Twenty-four were financed from the regular budget, and forty from Technical Assistance funds. Thirty-one were also assisted by UNICEF.

Details of the projects will be found in the list which begins on page 55.

14. SOUTH-EAST ASIA REGION

The trend of the programme in South-East Asia in 1957 has been towards integrated public-health services: it has continued the gradual move from individual or isolated demonstration projects towards the integration of projects into co-ordinated public-health services.

For example, services for maternal and child health and for communicable disease control, and work for the improvement of environmental sanitation, nutrition and health education, are steadily being merged into general programmes of community development and rural health services, in which WHO, together with UNICEF, is giving increasing assistance. Indeed, integration into the general public-health services is the eventual objective of all mass campaigns, for whatever particular purpose they may have been started.

In consequence of this trend a greater proportion of the work of the Region has been devoted to advising and assisting central and state governments and to the improvement of supervision and administration.

The policy of building up and developing nationwide public-health services stresses the importance of training national staff for the work; and, besides fellowships, assistance to departments of preventive and social medicine in the medical schools and the training of public-health nurses and auxiliary staff receive suitable emphasis.

The Regional Committee

The tenth session of the Regional Committee for South-East Asia was held at Rangoon, Burma, from 16 to 20 September 1957. Nine Members of the Region were represented. There were also present representatives from the United Nations Technical Assistance Board and UNICEF, from FAO, the International Committee of Military Medicine and Pharmacy and from five non-governmental organizations. The Director-General attended the session.

In the discussion on the ninth annual report of the Regional Director, note was taken of the progress made in some countries in integrating curative and preventive services—a trend to which WHO's promotion of the teaching of social and preventive medicine had contributed. Because for some time to come much of the work of the health services will necessarily be done by partially trained workers, the Regional Committee recommended that WHO should assist in prescribing and providing adequate standards of training for them. The Committee considered that two subjects to which particular attention should be given were the marginal malnutrition common in the Region and the control of filariasis, which is proving difficult.

The Committee recommended that WHO should obtain help from other agencies for countries that need to produce drugs for mass campaigns, and it suggested that the technical circulars issued from time
to time by the Regional Office should be more widely distributed.

A sub-committee was appointed to scrutinize the programme and budget estimates for 1959. The Regional Committee examined the proposals in the light of the sub-committee’s comments, approved the regular programme and budget with some amendments, and endorsed the Technical Assistance programme presented. The procedure for developing inter-country programmes was specially studied.

Technical discussions were held on “How can health education of the public be more effectively developed in South-East Asia?”. The subject chosen for the technical discussions in 1958 was “Health aspects of community development programmes”.

Three special questions were discussed on the proposal of Member governments: the training of x-ray technicians; assistance to dental health programmes; and the importance of inter-country and inter-regional meetings on malaria control.

It was suggested that the Regional Office should study the difficulties encountered in training indigenous midwives and evaluate the different methods of training.

The Regional Committee recommended to the Executive Board that the contract of the present Regional Director, Dr C. Mani, should be extended for a period of five years from 1 March 1958. It noted with satisfaction that the Government of India had undertaken to carry out the necessary additions and alterations to Kapurthala House in New Delhi, in order to make it suitable as permanent accommodation for the Regional Office. On other administrative matters, the Committee considered that the present method of appointing regional directors was satisfactory; and that there should be no change in the existing procedures for the examination of the Director-General’s programme and budget by the World Health Assembly. On the Expanded Programme of Technical Assistance, it asked the Regional Director to inform the Director-General of its opinion that the present system of allocating funds under the Expanded Programme of Technical Assistance should not be changed, and supported the view that governments should not be required to pay the local subsistence costs of international personnel engaged in Technical Assistance projects.

Administrative and Organizational Developments in the Regional Office

The work of the Regional Office has continued to increase, because of the increasing number of field projects and of project staff. Changes in the organization of the Regional Office included the creation of a new post of regional adviser in medical education. One professional and two general service posts have been added to the established posts in the Office.

Good relations have continued with the United Nations and with other organizations, both bilateral and international, concerned with health work in South-East Asia.

Close contact has been maintained with the resident Technical Assistance representatives to co-ordinate the preparation and submission of country requests for health projects financed from Technical Assistance funds.

Much of WHO’s programme in South-East Asia is carried out jointly with UNICEF, and the good working relationships of the two organizations have continued. The close partnership with UNICEF has been extended to projects in rural health and community development. In addition to the joint projects (listed in Part IV), the regional office has again given technical advice for projects for which UNICEF has provided supplies.

Co-operation has continued with the specialized agencies. Work was done with FAO particularly on nutrition and on milk and milk products and on World Health Day, for which the subject in 1957 “Food and health” was of special significance to the Region. With ILO, preparations were made for a seminar on occupational health. WHO is also interested in the UNESCO centre set up in Calcutta to study the effects of industrialization on rural and urban populations.

Good relations have continued with the United States International Co-operation Administration (ICA) and with the Colombo Plan authorities.

The United States International Co-operation Administration has provided for most countries in the Region fellowships and other substantial assistance for public-health work, particularly for malaria control and rural health programmes. Experts provided by the Colombo Plan continued to help in some WHO-assisted projects. With both organizations, consultations at regional and country levels have been held to minimize overlapping.

Closer contacts are being established with national agencies of international non-governmental organizations in official relationship with WHO.

Collaboration has continued with the Rockefeller Foundation, mostly on medical education, and with the Ford Foundation, particularly in connexion with its project in Singur, India, on health education of the public.

WHO representatives have taken part in a number of meetings organized by the agencies mentioned above, or by national governments in the Region.

Projects in Operation in the Region during the Year

In South-East Asia 127 projects received assistance during the twelve months ending 30 November 1957.
against 124 in the previous twelve months. Forty-seven of the projects were financed from regular funds, seventy-eight from Technical Assistance and two from both regular and Technical Assistance. Forty of the projects were also assisted by UNICEF. The assistance has been given chiefly in the control of communicable diseases, the development of rural health services and in the training of all kinds of health workers, particularly nurses. There were thirty-one projects in communicable disease control, twenty-two in nursing, seven in maternal and child health, and nine combining the two subjects, seventeen in public-health administration (including rural health), nine in environmental sanitation, five in health education and twelve in education and training. The balance of subjects was very similar to that in 1956.

The twelve projects in education and training included assistance to nine institutions and two refresher courses for medical officers. WHO teams engaged on other projects also gave, as part of their work, many training courses in different subjects, as well as training counterpart teams. There were six inter-country projects.

During the year WHO awarded 90 fellowships to candidates from South-East Asia, as compared with 79 in the previous year.

Details of the projects in operation during the period under review are given in the list beginning on page 72.

15. EUROPEAN REGION

Europe has been the Region principally affected by the welcome return to active membership during 1957 of five countries—Albania, Bulgaria, Poland, Romania and the Union of Soviet Socialist Republics—that had been for some years dissociated from the work of the Organization. Their return has resulted in a considerable expansion in the work of the Region because it has made it possible to put the supplementary programme into effect. By June 1957 the allocation to the Region for field work under the regular budget had been nearly doubled.

Another noteworthy event was the transference in June of the Regional Office to its new premises in Copenhagen.

The fundamental part of the WHO programme in Europe is still concerned with assistance to education and training: seminars, conferences and courses and advisory groups have been organized on a wide variety of subjects. Long-term studies continued on problems common to countries in the Region and some new studies were initiated in 1957.

The Regional Committee

The seventh session of the Regional Committee, which took place from 10 to 13 September, was held, by courtesy of the Danish Government, in the former Senate Chamber of the Christiansborg Palace, Copenhagen. The session was attended by representatives of twenty-five Member States, including four of the five which had recently resumed active participation in the Organization. The United Nations, the Technical Assistance Board, UNICEF, the Council of Europe, the International Committee of Military Medicine and Pharmacy, and sixteen non-governmental organizations in official relationship with WHO were represented. An observer attended from the International Children’s Centre. The Director-General was represented by the Deputy Director-General.

The Committee reviewed the annual report of the Regional Director, the modified programme for 1958 and the proposed programme for 1959; it endorsed the programme for both years, subject to certain amendments to provide for more work on the chronic diseases, especially cardiovascular diseases, on virology—particularly as regards neurotropic viruses—and on cancer.

Nine members of the Committee considered that no change should be made in the current procedure for nominating regional directors; three supported a new procedure.

In accordance with resolutions WHA10.27 and EB19.R54, the Committee discussed the procedures for discussing in the Health Assembly the Director-General’s proposed programme and budget estimates. It considered that it was a function of the regional committees to advise on the detailed allocation of priorities to programmes in the region in accordance with the overall policy established by the Health Assembly.

The Committee studied recent and proposed changes in the Expanded Programme of Technical Assistance, reaffirmed the importance of inter-country projects in the European Region, and noted with satisfaction the decision of the Technical Assistance Committee which would make it possible to increase to twelve per cent. the allocations to regional projects; it considered that the present procedures for planning
country projects were satisfactory and that no change was required. The Committee also supported the opinion of the Executive Board that local subsistence costs should be financed in the same way as under the regular programme of WHO.

The Rules of Procedure of the Regional Committee were modified to permit the use of Russian during the debates of the Committee, and the translation into Russian of resolutions, recommendations, and other important decisions.

The theme of the technical discussion was, "The integration of preventive, social and curative medicine in health services ". During the discussion it was emphasized that careful training of all health workers from the undergraduate stage was important in order to ensure a correct approach to health problems, and it was agreed that health administrations must cooperate in all work for improving man's environment and must themselves take a leading part in such work.

The Committee selected as the subject for its technical discussion in 1958, "Collaboration between scientific, administrative and educational bodies in improving health services ".

The Committee confirmed its acceptance of the invitation from the Government of the Principality of Monaco to hold its eighth session in Monaco in September 1958. The Committee also accepted with thanks the invitation of the Government of Romania to hold its ninth session in Bucharest in September 1959.

Administrative and Organizational Developments in the Regional Office

The Regional Office suffered a loss through the death on 21 April 1957 of its Deputy Regional Director, Dr Gérard Montus, to whose memory tributes were paid both at the World Health Assembly and the session of the Regional Committee. He had been Deputy Regional Director since 1952 but a long illness had prevented him from taking part in the work of the Office since the latter part of 1956.

Dr van de Calseyde assumed his duties as Regional Director on 1 February. Dr Cottrill was transferred from the Regional Office for the Eastern Mediterranean and later succeeded Dr Montus as Deputy Regional Director. The administrative and translation services of the Office were strengthened, in preparation for the move to Copenhagen, where the services previously provided by Headquarters would no longer be available.

In June the Regional Office moved to Copenhagen. The official inauguration of the Office took place on 15 June and was attended by the Prime Minister, several senior government officials, and the Director-General. The assistance given by the government departments concerned did much to facilitate the transfer of the Office to its new premises.

Twenty-two internationally recruited staff were transferred from Geneva to Copenhagen and seven more were recruited or transferred from other regions. Twenty local staff members were recruited. The administrative and financial services of the Tuberculosis Research Office (TRO) were amalgamated with those of the Regional Office, which permitted a reduction of three international and five local posts in TRO during 1957.

To meet the increase in field work it was found necessary to add to the number of regional health officers; three new posts have been approved—for officers in public-health administration and in social health and medical care, and for a nurse.

The salary scale for local staff in the Regional Office and TRO was revised and a new scale came into force on 1 August.

Projects in Operation in the Region during the Year

In the twelve months ending 30 November 1957 the total number of inter-country projects was forty, as against thirty-six in the previous twelve months. The emphasis was again on training courses, of which eleven on a wide range of subjects were organized by the Regional Office; and, in addition, fellowships were provided for attendance at other courses, particularly those held at the International Children's Centre in Paris. There were two advisory groups, four seminars, three conferences, and one symposium.

The fellowships programme, which is an important part of the work in the European Region, increased considerably; the number of fellowships awarded during the year was 420, as compared with 307 in the previous year. About a third of these were for attendance at training courses, and the rest for individual studies.

A new programme for the care of premature infants was started in Austria, and one for the training of public-health personnel began in Morocco. A project for gamma globulin production in Poland was revived. All these programmes will be assisted by UNICEF. In Spain, where a Technical Assistance project for the control of communicable diseases has been in operation since 1952, special attention was given in 1957 to the control of brucellosis.

Excluding projects for which fellowships constituted the only WHO assistance in 1957, but including the seminars, training courses, etc. referred to above, there were sixty-nine projects in operation in the Region during the year. These included twenty on com-
Municable diseases; five on public-health administration; thirty-three on health services; and four on environmental sanitation. Forty-two were financed from the regular budget and twenty-seven from Technical Assistance funds. Nineteen were also assisted by UNICEF.

Details of the projects in operation during the year are given in the list beginning on page 106.

16. EASTERN MEDITERRANEAN REGION

Much attention was given during 1957 to questions of communicable disease control. A special malaria eradication unit was established in the Regional Office and eradication programmes were operating in four countries of the Region; in three others the change to eradication was being planned. Work for malaria eradication was increasingly co-ordinated throughout the Region and particularly across frontiers of neighbouring countries. The co-ordination of bilharziasis control by countries with rivers or streams in common was also encouraged. Work against the communicable eye diseases was continued and extended.

None the less, the shortage in the Region of medical staff and other health workers of all categories remains a handicap to effective long-term health planning and special prominence must continue to be given to education and training. Assistance has therefore been given to training programmes for all classes of health staff, to institutions for the training of auxiliary personnel and to post-graduate institutions. It is proposed to make in 1958 a survey of basic medical education in the Region.

Fellowships were again an important part of the Organization’s work in the Region.

The Regional Committee

Sub-Committee A of the Regional Committee for the Eastern Mediterranean met in Alexandria from 23 to 27 September, Sub-Committee B being scheduled to meet in Geneva on 15 October. The latter did not take place, no government having maintained its decision to participate.

The session was attended by the representatives of sixteen countries. Representatives were also present from the United Nations, the Technical Assistance Board, UNICEF, UNRWA, UNESCO, from the League of Arab States and the International Committee of Military Medicine and Pharmacy, and from eight non-governmental organizations. Observers attended from the United States International Co-operation Administration and from other agencies. The Deputy Director-General attended the session.

At the meetings of Sub-Committee A, Arabic was for the first time used as a working language of the Regional Committee, in addition to French and English. The Rules of Procedure were amended accordingly.

At the opening session the Sub-Committee paid tribute to Dr A. T. Shousha, who had retired, and welcomed Dr A. H. Taba, who had succeeded him as Regional Director on 1 September 1957.

The Sub-Committee reviewed the report of the Regional Director and emphasized the importance of education and training, the practical value of training in vital and health statistics, and the need to give full support for programmes to eradicate malaria and control other communicable diseases.

The subdivision on programme discussed the proposed programme and budget estimates for 1959, the financial position of the programme for the remainder of 1957, and the 1958 regular budget as revised and approved by the Tenth World Health Assembly. After thorough discussion by the subdivision, the programme and budget proposals were accepted by the Sub-Committee.

The subdivision on programme considered also a number of papers on technical questions such as smallpox control, malaria eradication, bilharziasis control, drug addiction, trachoma, leprosy, poliomyelitis, mycosis of the scalp, and some of the problems of long-term planning in the Region. Its decisions and recommendations on those questions were approved by the Sub-Committee.

The representative of UNRWA introduced the report of that Agency and outlined its policy.

The Sub-Committee discussed three questions of organization and procedure which had been referred to the Regional Committee by the Health Assembly and Executive Board. It considered that, within the general policy laid down by the Assembly, the Regional Committee was the body qualified to advise on priorities to be allocated to regional programmes, and that the Assembly procedures for examining the programme and budget needed no change.

It believed that the programme procedures under the Expanded Programme of Technical Assistance
should be left unchanged for the time being and that the establishment of agency sub-totals had been of considerable assistance to health ministries in planning projects in the health field for inclusion in governments' programme requests.

The Sub-Committee was not in favour of any change in the method of appointment of regional directors.

After technical discussions on "Environmental sanitation in rural areas" the Sub-Committee recommended that Members should organize strong national sanitation services with technical leadership and co-ordination from the central national public-health authority, and it requested the Regional Director to encourage the strengthening and extension of environmental sanitation services and facilities, particularly in rural areas.

Administrative and Organizational Developments in the Regional Office

The Regional Office, which had been temporarily transferred to Geneva in November 1956, returned to Alexandria in February 1957. Project staff who had been temporarily withdrawn from some areas returned during February and March. It was necessary to recruit new clerical and secretarial staff, to replace staff no longer available. There were also many vacancies among the internationally recruited staff both in the Regional Office and in the field; several of those posts were still unfilled at the end of the year. This shortage of key personnel has greatly handicapped the Regional Office and has caused some delays in certain projects and field programmes.

The organizational pattern of the Regional Office has remained substantially unchanged.

Projects in Operation in the Region during the Year

The number of projects in operation in the Region in the twelve months ending 30 November 1957 was eighty-eight, as against 108 in the previous twelve months. Thirty-eight were financed from regular funds, and fifty from Technical Assistance funds; thirty-one were also assisted by UNICEF.

The principal subjects of the 1957 projects were communicable disease services with thirty-one projects; public-health administration with fourteen; nursing, ten; maternal and child health, eleven; and environmental sanitation, six. The greatest change was the reduction in the number of projects in tuberculosis, in which there were fifteen projects in 1956 and seven in 1957.

The four inter-country projects included one regional seminar.

In the twelve months ending 30 November 1957, 155 fellowships were awarded, as compared with 134 in the previous twelve months.

Details of the projects in operation during the year are given in the list beginning on page 126.

17. WESTERN PACIFIC REGION

The comprehensive and long-term planning of country health programmes, which is a fundamental objective of WHO's work in the Region, can only be developed gradually. Some advance was made in the course of the year. The Government of Cambodia, for example, decided, in spite of the difficulties, to set up a rural health training and demonstration centre as a nucleus from which the various programmes assisted by WHO might be integrated into a comprehensive scheme. Good progress was made in the Philippines and there were promising developments in Viet Nam.

A new departure was the public-health conference and study tour, held immediately after the meeting of the Regional Committee, when representatives from twelve countries in the Region visited medical schools, laboratories and health centres and, at a series of meetings, discussed comprehensive health planning and community development.

Assistance was given to governments during the year in strengthening their facilities for training, in the promotion of better standards in medical schools and by fellowships, regional conferences, seminars and training courses. The teaching of preventive and social medicine was discussed at a study group, held in Manila, of representatives from eleven medical schools, who recommended strongly that all medical schools should have a separate and independent department in those subjects.

Programmes for the control of yaws and malaria were steadily expanded. The yaws projects in the South Pacific area were extended to some neighbouring territories. The Fifth Borneo Inter-territorial Malaria Conference, held in November, was the first of these conferences to be attended by representatives of the Government of Indonesia. The second meeting of the Antimalaria Co-ordination Board (representing
Burma, Cambodia, the Federation of Malaya, Laos, Thailand and Viet Nam) was held in Bangkok in December.

The Regional Committee

The eighth session of the Regional Committee for the Western Pacific was held in Hong Kong, from 5 to 10 September 1957. The meeting was attended by representatives from all Member States in the Region, and of the Governments of France, the Netherlands, Portugal, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, responsible for territories in the Region. Representatives from the United Nations Children's Fund, the United Nations Technical Assistance Board, the South Pacific Commission and from eleven non-governmental organizations in official relations with WHO were present. The Federation of Malaya and the United States International Co-operation Administration sent observers.

The Committee reviewed the progress made in health work in the Region and noted the closer cooperation with Member countries that had followed the appointment of area representatives. It considered that in the regional programmes more attention should be given to rehabilitation and the need for further research was emphasized. The Committee selected "Malaria control and eradication" as its topic for 1958.

The programme and budget proposals for the Western Pacific Region in 1959 were reviewed in detail by a sub-committee: the Committee endorsed them and authorized the Regional Director to follow the priorities already approved, if the proposed effective working budget should be revised. The Committee recommended that two inter-country projects, proposed to be financed from Technical Assistance funds in 1959, should be approved by the Technical Assistance Board and the Technical Assistance Committee.

The Committee considered the resolution of the World Health Assembly on Assembly procedures for examining the programme and budget estimates: the majority of the members thought that the present system for the establishment of priorities had proved satisfactory and should be continued. The Committee endorsed the view of the World Health Assembly that the ten per cent. limitation for regional and inter-country projects placed by the Technical Assistance Committee on the planning figure for projects was detrimental to assistance to governments in health work, when such assistance could best take the form of a programme serving a group of countries. The procedures for planning country programmes under the Expanded Programme of Technical Assistance were reviewed: it was considered that they had so far proved to be satisfactory and should be continued for a further trial period. The Committee accepted the view of the Executive Board and the World Health Assembly that governments should be relieved from contributions to the local subsistence expenses of international staff financed under the Technical Assistance Programme.

The method of appointing regional directors was discussed at some length, with particular reference to the New Zealand proposal. Some representatives thought that the proposal would be a return to centralization and that the present procedure should be retained. Others considered that the Executive Board should take more part in the selection of the regional directors and should not be presented with a single nomination only. The Committee was unable to reach agreement on this matter and it was therefore agreed that the minutes of the discussion should be transmitted to the Executive Board.

During the session of the Regional Committee, technical discussions were held on the subject of leprosy control and included a visit to a leprosy community of more than five hundred people on the island of Hay Ling Chan, some miles west of Hong Kong. A majority of those who took part in the discussions were in favour of making segregation selective; a minority held that compulsory segregation gave satisfactory results and should be retained. It was agreed that education was vital in leprosy control, not only for patients, public and children, but also for health workers, educators and legislators. There were different views on the priority that should be given to rehabilitation and the need for further research was emphasized. The Committee selected "Malaria control and eradication" as its topic for 1958.

The ninth session of the Committee will be held in Manila and the tenth in China.

1. Off. Rec. Wid Hlth Org. 76, 143
Administrative and Organizational Developments in the Regional Office

On 1 January 1957, the Epidemiological Intelligence Station in Singapore became administratively part of the Regional Office, but under the technical supervision of Headquarters. The medical officer in charge of the Station became the area representative for Brunei, the Federation of Malaya, North Borneo, Sarawak, and Singapore.

In countries where a large number of WHO staff are employed, country liaison officers were designated to act as co-ordinators between the international staff and the government, and to improve liaison between the government and the area representative and between the Regional Office and the government.

Local employment conditions were surveyed and a revised salary scale for local staff members was adopted.

Projects in Operation in the Region during the Year

There were forty-seven projects in operation in the Region during the twelve months ending 30 November 1957: seven inter-country and forty country projects, as compared with forty-nine in the preceding twelve months. Eighteen of the projects were financed from regular funds, twenty-seven under the Technical Assistance Programme and two under the Malaria Eradication Special Account; thirteen were assisted also by UNICEF.

The distribution by subjects of the projects assisted in 1957 was about the same as in 1956. Six of the projects were for assistance to educational institutions, seven for malaria, six for nursing, five for environmental sanitation, three for maternal and child health, three for control of venereal diseases and treponematoses; there were single projects in tuberculosis control, bilharziasis control, leprosy control, trachoma control and health education of the public.

Fifty-six fellowships were awarded during the year, as compared with eighty-five during the previous year.

Details of the projects in operation during the year are given in the list beginning on page 148.
PART III

CO-OPERATION WITH OTHER ORGANIZATIONS
Development and Co-ordination of Programmes

The conditions for effective concerted action in the social and economic fields through broad programmes under the leadership of the United Nations were re-examined in 1957 by the World Health Organization and the other specialized agencies concerned. It was generally recognized that such concerted programmes called for regular consultation between the directing organs of the agencies and not only between the secretariats as hitherto. The Tenth World Health Assembly authorized the Executive Board to review proposals for any broad programme of the kind in the light of the principles governing WHO's current programme of work and of the relation to world health conditions. The Director-General is to communicate to the Economic and Social Council the views of the Board on the priorities to be accorded, on the basis of those two considerations, to WHO's participation in these concerted programmes. At its twenty-fourth session (resolution 665 (XXIV)), the Council recognized the need for regular consultations between the governing bodies of the competent organizations and requested its Administrative Committee on Co-ordination (ACC) to report in the summer of 1958 on specific fields of activity and procedures for concerted action.

At the same session (in July 1957) the Council considered evidence of further concentration of programmes of the United Nations and the specialized agencies, and the Director-General gave information on the way in which WHO's work was developing. The Council's request for appraisals of the scope, trend and cost of the programmes of the specialized agencies, as well as of those of the United Nations, was discussed by the ACC and will be considered by the directing organs of WHO in 1958.

During the year WHO took an active part in the work of the ACC and its subordinate bodies. The results of these consultations are discussed below.

World Social Situation and Concerted Action in the Social Field

The broad programmes under the leadership of the United Nations in which WHO continued to participate are: development of water resources, community development, industrialization and productivity—

including urbanization—and maintenance of family levels of living.

At its twentieth session, the Executive Board noted the report on a co-ordinated policy in regard to family levels of living by a group of experts convened by the United Nations and ILO and authorized WHO's participation in work under this broad programme. WHO has invited the participation of the United Nations and ILO in its study on the cost and financing of medical care services (see the section on Social and Occupational Health).

WHO contributed to the second Report on the World Social Situation (which contains a section on urbanization) and took part in the Council's debate on it at its twenty-fourth session. Late in the year, a consultant made a survey of public-health problems of urbanization in three representative cities, to obtain information that would enable WHO to determine how it could best contribute to a programme on urbanization.

On the development of water resources, WHO prepared a study of the administrative aspects of water pollution control, and attended meetings of the United Nations Panel of Experts on Integrated River Basin Development and of the ACC working group on the concerted programme. Through its regional offices, WHO continued work with the Economic Commission for Europe on stream pollution in Europe; it also kept in touch with the Economic Commission for Asia and the Far East.

Community Development

WHO's continued technical assistance to Afghanistan and some other countries for projects which form part of national community development programmes is mentioned in the section on Public-Health Administration.

WHO was represented at the working group of ACC on community development and at regional meetings on this subject in Bangkok and Beirut, organized by the United Nations as a means of coordinating internationally assisted projects in those regions.

WHO continued to co-operate in UNESCO's programme of fundamental education. Two WHO staff members were assigned to the Arab States Funda-

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1 Off. Rec. Wld Hith Org. 80, Annex 6
mental Education Centre; contact with the Regional Centre of Fundamental Education for Latin America in Mexico was maintained through the Regional Office for the Americas (Pan American Sanitary Bureau); and WHO also co-operated in national training projects in Cambodia and Thailand. WHO works towards the development of integrated services in several of its own programmes. In Latin America in particular, a number of UNICEF/WHO projects combine services in maternal and child health with, for example, those for environmental sanitation, control of communicable diseases, or development of rural health units. The integrated health services thus provided can, if the governments so desire, serve as a starting point for community development programmes.

The integration of health services is an important feature of three health demonstration areas set up with WHO assistance, in which other United Nations organizations are co-operating. WHO's health education programmes, by gaining public support for health work, can be considered as a contribution to the objectives of community development.

Other Joint Work

In 1957 the United Nations Statistical Office and WHO jointly worked out more flexible arrangements for co-operation in assistance to governments, and WHO provided advice to the United Nations on health aspects of social statistics. Reference is made in the section on Drugs and other Therapeutic Substances (pages 14-15) to the studies on synthetic drugs with morphine-like effect, requested by the Economic and Social Council, and to other work on the control of narcotic drugs carried out by the Organization on behalf of the United Nations.

In view of the closely related work of the Permanent Central Opium Board and the Drug Supervisory Body, the Council decided that these two organs should have a common membership. It invited (resolution 667 H (XXIV)) WHO to consider appointing to the Drug Supervisory Body persons who are members of the Permanent Central Opium Board. Three candidates for common membership were nominated by the Organization, two of whom were chosen by the Council and subsequently appointed to both bodies.

The provisional recommendations on medical requirements for the licensing of motor vehicle drivers were revised in collaboration with the United Nations.

UNICEF

The project list (in Part IV) gives some indication of the scope of UNICEF's assistance to national projects in maternal and child health, nutrition and communicable disease control, including programmes for malaria eradication. Joint work with UNICEF is also mentioned in the earlier part of this report under those headings. In 1957 this work followed the precedents established in previous years and the working relations with UNICEF remained fully satisfactory.

WHO was represented at the Advisory Committee of the International Children's Centre in Paris, and assisted in formulating the Centre's health programme. It also continued to provide fellowships for training courses organized by the ICC.

Co-operation with Specialized Agencies

ILO

WHO has worked with ILO on occupational health, on the hygiene of seafarers and on the Convention relating to the Protection and Integration of Indigenous and other Tribal and Semi-tribal Populations in Independent Countries, which was adopted by the International Labour Conference in June 1957. Reference is made to this work in the sections on Social and Occupational Health and Public-Health Administration (page 8).

FAO

The work with FAO on nutrition included the meeting of a Joint FAO/WHO Expert Committee on Nutrition, and progress in the joint FAO/WHO/UNICEF programme on protein malnutrition, and also regional conferences and courses. Reference is made to these in the section on Nutrition, page 10, and in the project list.

FAO and WHO have also continued their co-operation on veterinary public health and on zoonoses—particularly on brucellosis (a joint FAO/WHO Expert Committee met during the year) and leptospirosis. Examples of this and other joint work on related subjects appear in the section on Zoonoses, on page 6.

The FAO/WHO/UNICEF Inter-Agency Working Group on Milk and Milk Products continued its co-ordinating activities and reached satisfactory arrangements for co-operation with bilateral agencies on the distribution and use of surplus quantities of dried skim milk.

The Joint FAO/WHO Expert Committee on Food Additives met in 1957 and made recommendations with regard to suitable uniform techniques for testing the safety of food additives.

UNESCO

UNESCO took part in WHO's work on training in health education of the public (see page 9).
WHO's association with UNESCO in the work of its Advisory Committee on Arid Zone Research and in assistance to the Council for International Organizations of Medical Science (CIOMS) continued as in 1956, and liaison was maintained with UNESCO regarding research on the humid tropics.

WHO contributed to the work of the International Conference on Radio-isotopes in Scientific Research which was convened by UNESCO in September 1957 (see also page 13).

**ICAO**

As a result of consultations with ICAO, WHO undertook to establish at Headquarters a co-ordinating centre for aviation medicine. Co-operation in matters relating to the sanitation of airports and the International Sanitary Regulations continued.

**UPU**

Amended regulations to facilitate postal transmission of perishable biological materials were prepared in consultation with the Universal Postal Union and were adopted in August by the Universal Postal Congress. WHO also co-operated with ILO and UPU in a study of possible occupational diseases of postal workers, in which the conclusion was reached that no disease could be specifically attributed to that occupation.

*Relations with the International Atomic Energy Agency*

The Executive Board at its nineteenth session authorized the Director-General to initiate discussions with the Preparatory Commission of the International Atomic Energy Agency " with a view to concluding an agreement between the two organizations on the basis of the agreements entered into between WHO and the specialized agencies ". The Director-General accordingly communicated to the Executive Secretary of the Preparatory Commission of the Agency, in January 1957, a draft preliminary agreement for his consideration and comments.

The question of the relationship of the International Atomic Energy Agency with the specialized agencies was considered both by the Board of Governors and the first general conference of the Agency which met simultaneously in October 1957 in Vienna. The specialized agencies had been invited to send representatives to attend the Conference. They were also invited to attend that part of the meeting of the Board of Governors at which the question of relationship between the Agency and the specialized agencies was discussed. The representatives of the other specialized agencies at the Vienna Conference agreed that the representative of the World Health Organization should make a statement on behalf of all of them.

The General Conference authorized the Board of Governors to negotiate agreements on relations between the Agency and the specialized agencies in accordance with the principles drawn up by its Preparatory Commission.

The Board of Governors of the Agency held another session in December 1957 and again considered plans for the initiation of negotiations between the Agency and the specialized agencies. It requested the Director-General of the Agency to initiate, as soon as practicable, consultations with specialized agencies whose work is related to that of the Agency.

The Director-General of the Agency, who was appointed by the Conference of the Agency in October 1957, made preliminary contact with the Director-General of the World Health Organization in the second half of December 1957 in order to arrange discussion of a relationship agreement between the Agency and WHO.

**OTHER INTERGOVERNMENTAL ORGANIZATIONS**

Liaison with the International Bureau for the Protection of Industrial Property was maintained in 1957, especially with respect to international non-proprietary names for pharmaceutical preparations, a subject on which WHO has also kept in touch with the International Organization for Standardization. Liaison has also been maintained with the International Committee of Military Medicine and Pharmacy.

Reference is made in the sections on the regions to regional intergovernmental organizations with which WHO maintains relations through its regional offices. They include the Colombo Plan, the Commission for Technical Co-operation in Africa South of the Sahara, the Council of Europe, the League of Arab States, and the South Pacific Commission.

**NON-GOVERNMENTAL ORGANIZATIONS**

The total number of non-governmental organizations in official relations with WHO at the end of the year was forty-three, including the following three admitted by the Executive Board at its nineteenth session in January 1957:

- International Confederation of Midwives
- International Diabetes Federation
- World Federation of Societies of Anaesthesiologists

As in previous years, all these organizations were invited to send representatives to the World Health Assembly, and to sessions of the Executive Board and

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1 For complete list, see Annex 6.
of the regional committees; their representation at regional committee meetings was greater in 1957 than in previous years.

Frequent contact has been maintained during 1957 with almost all these organizations and there has been close collaboration with a good proportion of them, which have made valuable contributions in their special subjects to WHO's programme of work or to allied health matters. Some examples are mentioned in the earlier sections of this report.

19. EXPANDED PROGRAMME FOR ECONOMIC DEVELOPMENT

Membership of the Technical Assistance Committee

The General Assembly at its eleventh session adopted resolution 1036 (XI) providing for an increase of the membership of the Technical Assistance Committee from eighteen to twenty-four. The additional six places were to be filled by Members of the United Nations or specialized agencies with an important interest in the Expanded Programme of Technical Assistance —either as contributors or recipients—and which were not represented on the Economic and Social Council (and therefore were not already members of the Committee). The Council subsequently elected Czechoslovakia, India, Sudan, Sweden, Switzerland and Venezuela to the Committee. When Sudan became a member of the Economic and Social Council, Morocco was elected to TAC in its place, with effect from 1 January 1958.

The 1957 Programme

The projects implemented in 1957 under the Expanded Programme of Technical Assistance are listed in Part IV.

The financial resources of the Programme were sufficient to permit the earmarking of $5,340,000 for WHO at the beginning of the year—an amount equivalent to the estimated cost of WHO's share of the Category I Programme approved by TAC, except for part of the projects that were to be financed from currencies requiring special management. This facilitated the implementation of WHO's 1957 Technical Assistance Programme. Additional amounts for projects authorized for financing as contingencies, allocations for projects to be financed from currencies requiring special management and for supplies and equipment ordered but not delivered in 1956, and some adjustments, raised the total sum earmarked for WHO in 1957 to $5,856,404, to which may be added $339,000 paid by WHO towards local costs and recovered under the local costs scheme.

The 1958 Programme

At its July 1957 session TAC had to face the serious problem that less money was likely to be available for the Expanded Programme in 1958. Planning for that year had been based on the assumption that resources would be about the same as for 1957 if, in the planning and presentation of the programme, account were taken of TAC's decision in 1956 that all contributions to the programme should be assimilated. However, it became apparent early in 1957 that the resources for the 1958 Programme were likely to be less than for 1957.

In view of the situation, the Technical Assistance Board decided provisionally to postpone consideration of requests for assistance from any European countries which had not received aid under the Expanded Programme in 1957. At its session in July 1957 TAC accepted TAB's recommendation on this subject as a temporary measure. The WHO representative opposed the decision in TAB, and in TAC again explained the reasons, pointing out that aid from the Expanded Programme acted as a catalyst in a country's economic and social development and that therefore no country which considered itself eligible for such assistance should be refused.

In the last months of 1957 TAB restricted authorizations for contingencies and limited expenditure from savings for the implementation of Category II projects, in order to reduce to about $1 million the difference between the resources then expected and the amount needed to finance the programmes approved for 1958. It was recognized that it would again be necessary for TAB to earmark for the participating organizations funds less than the estimated cost of their Category I programmes.

The programme for 1958 which was recommended by TAB and approved by TAC gave some additional assistance to Ghana, Morocco, Sudan and Tunisia.

1 See Off. Rec. Wild Hth Org. 75, 102.
countries which had recently acquired independence, and therefore could be considered as having a special claim to assistance. This, however, could only be done by decreasing the assistance to some other countries which considered that their economic development was at a critical stage and were reluctant to accept any reduction in aid from the Expanded Programme.

The General Assembly at its twelfth session in December 1957 adopted a resolution appealing to the participating governments to examine the possibility of increasing their contributions to the Expanded Programme.

The estimated cost of the Category I Programme approved by TAC, and for which allocations to the participating organizations were confirmed by the General Assembly in December 1957, was $32 861 000, of which WHO's share was $6 169 000, including an estimated amount of $707 000 from local costs assessments. WHO's share of the approved Category I Programme is slightly higher than for 1957; the percentage for WHO's activities under this programme has risen from 17.94 in 1957 to 18.72 for 1958.

1 WHO's Category I programme includes $4 226 906 for country projects, $511 300 for regional (inter-country) projects; $522 000 for operational services; and $202 000 for administrative costs.
PART IV

PROJECT LIST
PROJECTS IN OPERATION IN 1957

This part of the Report contains a list of the projects which were in operation during the whole or part of the period from 1 December 1956 to 30 November 1957—country projects, inter-country projects and inter-regional projects. Continuing projects for which technical advice from Headquarters or regional offices was the only assistance during the year are not shown.

In country projects the "Aim of the project" states the purpose for which it was undertaken by the government or governments concerned and is not related to the form or extent of WHO's assistance.

An attempt has been made, as in previous Annual Reports, to summarize the immediate results of projects for which WHO assistance ended in the period under review, but this has not been possible for all projects, particularly those which ended late in the year.

The projects are grouped by region in the following order: Africa, the Americas, South-East Asia, Europe, Eastern Mediterranean and Western Pacific. Projects that concern more than one country appear first and are lettered "AFRO", "AMRO", "SEARO", "EURO", "EMRO", or "WPRO". Projects undertaken in individual countries follow, in alphabetical order by countries, and inter-regional projects are given at the end of the list.

The sub-heading "Fellowships" is used for fellowships considered as projects in themselves; other fellowships are shown under the title of the project of which they form part. The fellowships reported are those awarded during the year.

In the first column (under "Project No., Source of Funds, Co-operating Agencies") "R" means the regular budget, "TA" means Technical Assistance funds, and "UNICEF" the United Nations Children's Fund. Names of other co-operating agencies, whether or not they have contributed funds, are given in parenthesis.
### AFRICA

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<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
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<tr>
<td></td>
<td></td>
<td>This project was described in the Annual Report for 1956. Funds were made available in 1957 for the preparation and publication of the final report of the Conference.</td>
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<tr>
<td>AFRO 12</td>
<td>R</td>
<td>Meeting of Malarologists, Brazzaville (19 - 22 Nov. 1957)</td>
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<td>Provision was made for twenty-one technical heads of malaria control operations in the West African areas to attend a meeting for co-ordination of work.</td>
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<td>AFRO 16</td>
<td>R</td>
<td>International Seminar on Health Education of the Public, Dakar (25 - 30 March 1957)</td>
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<td>Aim of the project. To consider methods of improving health education.</td>
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<td>Assistance provided by WHO. Grants to sixty participants; specialists from Europe and the United States of America.</td>
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<tr>
<td>AFRO 20</td>
<td>TA (FAO)</td>
<td>Nutrition Course and Seminar, Kampala (21 Oct. - 28 Nov. 1957)</td>
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<td></td>
<td>Aim of the project. To train workers in nutrition.</td>
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<td></td>
<td></td>
<td>Assistance provided by WHO. (a) Twenty-nine lecturers; (b) fellowships to attend the nutrition course for twenty persons, from Basutoland, Federation of Rhodesia and Nyasaland, Ghana, Liberia, Mauritius, Nigeria, Seychelles, Tanganyika, Uganda, Union of South Africa and Zanzibar; (c) provision for seventeen of these and eleven others to attend the seminar.</td>
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<td>AFRO 21</td>
<td>R</td>
<td>Malaria Course, Lwiro (26 Sept. - 30 Nov. 1957)</td>
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<td>Aim of the project. To provide instruction, in French, on malaria and onchocerciasis.</td>
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<td></td>
<td>Assistance provided by WHO. (a) Ten lecturers; (b) fellowships for eleven participants from Belgian Congo, French Cameroons, French Equatorial Africa, French West Africa, Madagascar, and Portuguese territories in Africa.</td>
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<td>Aim of the project. To provide instruction, in English, on malaria and onchocerciasis.</td>
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<td>Assistance provided by WHO. (a) Seven lecturers; (b) fellowships for nine participants from Ghana, Kenya, Nigeria, Union of South Africa, Zanzibar, and Iran.</td>
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<td>AFRO 26</td>
<td>R</td>
<td>Fellowships</td>
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<td>Prematurity. Two fellowships, one of three months and the other of one month, awarded to candidates from the Belgian Congo to study in France.</td>
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<td>AFRO 28</td>
<td>R</td>
<td>Yaws Co-ordination Meeting, Brazzaville (20 - 21 Aug. 1957)</td>
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<td>Provision was made for six technical heads of yaws control programmes in West Africa—from Belgian Congo, French Cameroons, French Equatorial Africa, and Nigeria—to attend a meeting for co-ordination of work. The meeting was also attended by representatives of UNICEF and the Commission for Technical Co-operation in Africa South of the Sahara.</td>
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<td>AFRO 33</td>
<td>R</td>
<td>Report on Health Situation (Sept. - Nov. 1957)</td>
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<td>A consultant was provided for three months to prepare a report on the health situation in non-self-governing territories in central and western Africa as the WHO contribution to the United Nations report on non-self-governing territories.</td>
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<td>AFRO 46</td>
<td>R</td>
<td>Short-term Consultant (1957)</td>
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<td>A short-term consultant was provided to advise on therapeutic methods to be adopted and on supplies needed in connexion with leprosy control projects in French Cameroons, French Equatorial Africa and French West Africa.</td>
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<td>Project No.</td>
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<td>Belgian Territories 8</td>
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<td>East Africa 1</td>
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<td>French Africa 7</td>
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**French Cameroons 1**

**UNICEF**

**Leprosy Control**

*See AFRO 46.*

**French Cameroons**

**Participation in Regional Courses and Meetings**

*See AFRO 21; AFRO 28.*

**French Equatorial Africa 2**

**UNICEF**

**Leprosy Control (Aug. 1956 - )**

*Aim of the project.* (a) To determine the true incidence of leprosy in the country by early diagnosis of cases; (b) to eliminate the disease gradually by domiciliary treatment with sulfones.

*Assistance provided by WHO during the year.* A five-month fellowship for study in Brazil and French Guiana.

Consultant services were provided under AFRO 46.

**French Equatorial Africa**

**Participation in Regional Courses and Meetings**

*See AFRO 21; AFRO 28.*

**French West Africa 1**

**UNICEF**

**Leprosy Control (1957)**

*Assistance provided by WHO during the year.* A five-month fellowship for study in Brazil and French Guiana.

Consultant services were provided under AFRO 46.

**French West Africa**

**Fellowships**

*See AFRO 26.*

**French West Africa**

**Participation in Regional Courses and Meetings**

*See AFRO 21.*

**Gambia 1**

**UNICEF**

**Malaria Control (Nov. - Dec. 1957)**

*Assistance provided by WHO during the year.* A consultant for one month to advise on future malaria control policy.

**Gambia 2**

**UNICEF**

**Leprosy Control (1957 - )**

*Aim of the project.* To reduce the incidence of leprosy; eventually to eliminate the disease.

*Assistance provided by WHO during the year.* A fellowship for the government leprologist to study in Nigeria before the project begins.

**Ghana 1**

**UNICEF**

**Malaria Control (1957 - )**

*Assistance provided by WHO during the year.* Supplies.

*Probable duration of assistance.* Until 1959.

**Ghana 3**

**UNICEF**

**Maternal and Child Health (July - Aug. 1957)**

*Aim of the project.* To assess the situation with regard to maternal and child health services.

*Assistance provided by WHO and work done.* A consultant for two months to study the situation and make recommendations.
PROJECT LIST: AFRICA

Bilharziasis Control (Nov. 1957 - )

Aim of the project. To investigate the incidence of bilharziasis; later, to carry out a control programme.

Assistance provided by WHO during the year. A consultant for six weeks.

Probable duration of assistance. Until 1959.

Fellowships

Health education. Two ten-month fellowships for study in the United Kingdom.

Nursing. A twelve-month fellowship to take a Diploma of Public Health (DPH) course in the United Kingdom.

Public health. A twelve-month fellowship to take a DPH course in the United Kingdom.

Participation in Regional Courses and Meetings

See AFRO 20; AFRO 24.

Tuberculosis Control (Nov. 1957 - )

Aim of the project. To assess the tuberculosis problem in an urban area by case-finding and tracing of contacts; later, to carry out a control programme, including chemotherapy and chemoprophylaxis.

Assistance provided by WHO and work done during the year. A bacteriologist who made a study of laboratory facilities.

Probable duration of assistance. Until 1960.

Malaria Control (Jan. 1955 - )

Assistance provided by WHO during the year. A consultant for one month.

Probable duration of assistance. Until the end of 1959 (assistance as required in investigating the reported resistance of the local vector, Anopheles gambiae, to dieldrin).

Work during the year. The control programme entered the surveillance stage.

Paediatrics. A ten-month fellowship for study in the United Kingdom.

Relapsing fever. A two-month fellowship for study in Tunisia.

Participation in Regional Courses and Meetings

See AFRO 24.

Yaws Control (Aug. 1953 - )

Aim of the project. To find and treat cases of yaws; to train local professional and other staff; so far as practicable, to provide ambulatory treatment for other diseases.

Assistance provided by WHO during the year. (a) A male public-health nurse, and an administrative officer; (b) a fellowship in public-health administration.

Probable duration of assistance. Until the end of 1959.

Work during the year. The initial treatment survey covering the whole country was completed, and re-surveys were carried out in seven districts. In the first ten months of the year about 566,000 persons were examined.

Malaria Control (Feb. 1953 - )

Aim of the project. To determine by epidemiological and entomological surveys the most effective and economical methods of controlling malaria; to plan an expanding programme of control.
Assistance provided by WHO during the year. (a) A malariologist, an entomologist and two sanitarians; (b) a short-term consultant.

Probable duration of assistance. Until the end of 1959.

Work during the year. Following reports that large numbers of adult Anopheles gambiae had been found in treated houses, a technician from the Anopheles gambiae Advisory and Research Team (see Inter-Regional 49) carried out detailed tests which confirmed that the mosquito had developed resistance to dieldrin—the insecticide in general use in the project area. At the same time a consultant investigated the effects of this development on the project. A plan of operations for a new malaria project, to start in 1958, was then drawn up, providing for the replacement of dieldrin by DDT, a detailed entomological survey, and an experiment to test the effect of two different dosage schedules of antimalarial drugs on a population of about 50 000.

Liberia 11
Fellowships

Health education. A ten-month fellowship for study in the United Kingdom.

Liberia 12
Fellowships

Medical training. A twelve-month fellowship for study in Germany.

Liberia 14
Tuberculosis Control (Oct. 1957 - )

Aim of the project. To make a survey of the tuberculosis problem.

Assistance provided by WHO during the year. A short-term consultant.

Probable duration of assistance. Until late December 1957.

Liberia 15
Environmental Sanitation (Sept. 1957 - )

Aim of the project. To investigate the increase in the number of flies observed after spraying with dieldrin in the malaria control programme; to take sanitation measures for permanent control of houseflies.

Assistance provided by WHO and work done during the year. A consultant for one month to study the situation.

Probable duration of assistance. Until the end of 1959.

Mauritius 2
Tuberculosis Control (June 1956 - )

Aim of the project. To make a survey of tuberculosis; to build up a comprehensive control service, for which local personnel will be trained in tuberculin testing, BCG vaccination, standard methods of diagnosis, laboratory work, home visiting, etc.

Assistance provided by WHO during the year. (a) A medical officer, an epidemiologist, a statistician, a laboratory technician, an x-ray technician and two public-health nurses; (b) two eight-month fellowships.

Probable duration of assistance. Until 1959.

Work during the year. Investigations were carried out to estimate the prevalence of tuberculosis in Mauritius. These included tests to determine tuberculin sensitivity, mass radiography, and bacteriological sputum examinations of population groups selected at random.
Nutrition Survey and Control of Deficiency Diseases (Oct. 1955 - )

Aim of the project. To study the nutritional status of the people and to take measures against malnutrition.

Assistance provided by WHO during the year. A nutritionist and an assistant nutritionist.

Probable duration of assistance. Until the end of 1959.

Work during the year. Extensive studies were made of anaemia amongst hospital patients, and this clinical study was supplemented by laboratory investigations. Haemoglobin surveys were made amongst school-children and studies were made to determine the relation between hookworm and anaemia.

The assistant nutritionist continued surveys of average diet and the preparation of charts of infant and child growth. The diet scale of institutions—prisons, orphanages, etc.—was examined and recommendations for improvement were made.

Fellowships

Environmental sanitation. Two nine-month fellowships to attend a course for sanitary inspectors in Canada.

Virus diseases. A twelve-month fellowship for study in Japan.

Training of Nursing Personnel (Jan. 1957 - )

Aim of the project. To increase the number of trained nurses in Mauritius.

Assistance provided by WHO during the year. A sister tutor.

Probable duration of assistance. Until 1961.

Work during the year. The system of training of nurses was surveyed and an estimate of nursing needs and resources was made, in order to provide the information for drawing up short-term and long-term plans for the improvement of nursing education in Mauritius. Some improvements in training facilities have already been introduced.

The sister tutor started teaching at the Victoria Hospital, Quatre Bornes.

Participation in Regional Courses and Meetings

See AFRO 20.

Fellowships

See Portuguese Territories 17, and EURO 52.

Yaws Control (July 1954 - )

Aim of the project. To control yaws by mass treatment with procaine penicillin; to train local personnel.

Assistance provided by WHO during the year. A venereologist and an assistant medical officer.

Probable duration of assistance. Until 1960.

Work during the year. The yaws programme continued according to plan. From January to October 1957 over two million persons were examined and about 983,000 treated. (Since the beginning of operations over six million have been examined, and over 3,500,000 treated.)

Consideration was given to new plans of operation—perhaps a separate one for each Region of the Federation—to cover the years 1958 to 1960.

Malaria Control, Western Sokoto (Aug. 1954 - )

Aim of the project. To carry out a pilot project of malaria control in Sokoto Province in order to demonstrate that the methods used can be technically and economically adapted for other parts of the country.

Assistance provided by WHO during the year. (a) An entomologist; (b) a fellowship.

Probable duration of assistance. Until the end of 1960.
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<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
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<tbody>
<tr>
<td>Nigeria 9</td>
<td>TA UNICEF</td>
<td><strong>Assistance to Schools of Hygiene (Jan. 1956 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To improve teaching and training methods in the four schools of hygiene—Kano (Northern Region), Ibadan (Western Region), Aba (Eastern Region) and Lagos (Federal capital).&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO during the year.</em> (a) A medical officer (attached to the Western Region from September 1957); (b) a six-month fellowship in health education.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until the end of 1958.&lt;br&gt;&lt;br&gt;<em>Work during the year.</em> The medical officer continued a survey of arrangements for training auxiliary health personnel and submitted recommendations to the Federal Government. In June he conducted a refresher course, held at Ibadan, Western Region, for instructors at various schools of hygiene throughout Nigeria.&lt;br&gt;&lt;br&gt;In September he was assigned to advise the Western Regional Government, at Ibadan, on the training of auxiliary health personnel and to reorganize the training syllabus for them.</td>
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<td>Nigeria 10</td>
<td>TA UNICEF</td>
<td><strong>Rural Health Services, Eastern Region (Nov. 1957 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To improve rural health services—particularly maternal and child health services—in the Eastern Region.&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO during the year.</em> A public-health administrator.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until 1960.</td>
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<tr>
<td>Nigeria 14</td>
<td>R UNICEF (FAO) (Rockefeller Foundation)</td>
<td><strong>Tuberculosis Control and Chemotherapy, Ibadan, Western Nigeria (Sept. 1957 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To make a tuberculosis survey; later, to carry out a control programme which will include chemotherapy.&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO and work done during the year.</em> The West Africa tuberculosis survey team worked on a study of the situation from September to November.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until the end of 1959.</td>
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<td>Nigeria 15</td>
<td>R UNICEF (FAO) (Rockefeller Foundation)</td>
<td><strong>Nutrition</strong>&lt;br&gt;&lt;br&gt;WHO made financial provision for a local specialist to take part in the FAO/WHO Joint Mission which in 1957 investigated the possibility of producing protein-rich foods in Nigeria.</td>
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<td>Nigeria</td>
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<td><strong>Participation in Regional Courses and Meetings</strong>&lt;br&gt;&lt;br&gt;See AFRO 20; AFRO 24; AFRO 28.</td>
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<td>Portuguese Territories 17</td>
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<td><strong>Fellowships</strong>&lt;br&gt;&lt;br&gt;<em>Bilharziasis.</em> A five-month fellowship awarded to a candidate from Mozambique to study in the Philippines, the United States of America, Puerto Rico, Brazil and France.&lt;br&gt;&lt;br&gt;<em>Emergency surgery.</em> A four-month fellowship awarded to a candidate from Mozambique for study in France.&lt;br&gt;&lt;br&gt;<em>Environmental sanitation.</em> A five-month fellowship awarded to a candidate from Angola for study in the United Kingdom and Brazil.&lt;br&gt;&lt;br&gt;<em>Mental health.</em> A four-month fellowship for study in the Union of South Africa.&lt;br&gt;&lt;br&gt;<em>Nursing.</em> A six-month fellowship awarded to a candidate from Mozambique to study nursing of leprosy patents in Brazil.</td>
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<td>Project No.</td>
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<td>Rhodesia and Nyasaland 7</td>
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<td>Rhodesia and Nyasaland 8</td>
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The entomologist carried out preliminary survey work, which included setting up catching stations and trap huts.

**Rhodesia and Nyasaland**

**Participation in Regional Courses and Meetings**

See AFRO 20.

**Seychelles 1**

**Public Health and Sanitation (Aug. 1953 - )**

*Aim of the project.* To improve environmental sanitation and health education of the public, and methods for the control of prevalent intestinal diseases in the territory; to train auxiliary personnel for sanitation, public-health nursing and maternal and child health; to prepare public-health legislation.

*Assistance provided by WHO during the year.* A medical officer, a public-health nurse, a laboratory technician and a sanitary engineer.

*Probable duration of assistance.* Until mid-1958.

*Work during the year.* The comprehensive survey of diseases was completed towards the middle of the year. The sanitary engineer gave advice on the environmental sanitation programme and the laboratory technician continued the training of local staff until completion of his assignment in October.

**Seychelles**

**Participation in Regional Courses and Meetings**

See AFRO 20.

**Sierra Leone 1**

**Yaws Control (Sept. 1956 - )**

*Aim of the project.* (a) To carry out, with mobile teams, a two-year mass campaign against yaws, using PAM, in the Northern Province; and (b) to find and treat, as far as possible, cases of other diseases (particularly leprosy) in co-operation with local authorities; (c) after the campaign, to set up treatment centres to deal with the remaining cases of yaws, in order to secure ultimate eradication.

*Assistance provided by WHO during the year.* A serologist and a public-health nurse.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* A plan of operations was prepared for extending the yaws control campaign to the South-Eastern Province.

Between January and November about 237,000 persons were examined in initial treatment surveys and in re-surveys made in the Northern and South-Eastern Provinces, and 192,000 of these were treated. (Since the beginning of operations about 579,000 persons have been examined and 449,000 treated.)

**Somaliland Protectorate 2**

**Tuberculosis Control (Aug. 1957 - )**

*Aim of the project.* To carry out a tuberculosis control programme.

*Assistance provided by WHO during the year.* A consultant for two months to help to prepare the project.

*Probable duration of assistance.* Until the end of 1959.

**Somaliland Protectorate 3**

**Malaria Control (Oct. 1957 - )**

*Aim of the project.* (a) To assess the control measures used against malaria in the Haud region; (b) to continue and reinforce the control programme.

*Assistance provided by WHO during the year.* Supplies.

*Probable duration of assistance.* Until 1961.

*Work during the year.* A meeting held in Addis Ababa in October to discuss the possibility of a combined programme in the Protectorate and in the Ogaden resulted in plans being made for a survey and control programme in the Protectorate, to start in 1958.

**Swaziland 3**

**Fellowships**

*Bilharziases.* A six-month fellowship for study in the Federation of Rhodesia and Nyasaland, Sudan and the Philippines.
Project No.  
Source of Funds  
Co-operating Agencies  

**Tanganyika**

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| Participation in Regional Courses and Meetings  
*See AFRO 20.*  |

**Uganda 3**

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| Assistance to Makerere College (June 1957 -  )  
*Purpose of the project.* To establish a chair in paediatrics at Makerere College.  
*Assistance provided by WHO and work done during the year.* A short-term consultant who visited the college to make an assessment of needs and available facilities.  
*Probable duration of assistance.* Until the end of 1959 (professor of paediatrics).  |

**Uganda 4**

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</table>
| Nutrition Survey (March 1955 -  )  
*Purpose of the project.* To determine the status of nutrition of representative groups in parts of Uganda and to assess the connexion between local dietary customs and any nutritional defects found.  
*Assistance provided by WHO during the year.* A nutritionist and an assistant nutritionist.  
*Probable duration of assistance.* Until the end of 1957.  
*Work during the year.* Investigations into the incidence of nutritional diseases and comprehensive dietary surveys continued.  |

**Uganda 12**

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<th>Description</th>
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</table>
| Malaria Control (1957 -  )  
*Purpose of the project.* To make recommendations on malaria control in the Kigezi District.  
*Assistance provided by WHO during the year.* A malariologist; an entomological technician from the Anopheles gambiae Advisory and Research Team (see Inter-regional 49).  
*Probable duration of assistance.* Until 1959.  
*Work during the year.* A malaria survey was carried out in the Kigezi Resettlement Area.  |

**Uganda 14**

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| Fellowships  
*Health education.* A six-month fellowship for study in New Caledonia and the Philippines.  |

**Union of South Africa**

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| Fellowships  
*Geographical medicine.* A six-month fellowship for study in Germany, France, the Netherlands, Denmark, the United Kingdom and the United States of America.  
*Geriatrics.* A four-month fellowship for study in the United Kingdom, the Netherlands and Denmark.  
*Malaria.* A six-month fellowship for study in Mozambique, Nigeria, Tanganyika, the United States of America, Mexico, the United Kingdom, Italy and Iraq.  
*Pathology.* A four-month fellowship for study in Canada and the United States of America.  
*Radiation medicine.* Two six-months fellowships—one for study in the United Kingdom, Sweden, Germany, France and Italy, the other for study in Switzerland, Sweden, the United Kingdom and the United States of America.  |

**West Africa 1**

<table>
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</table>
| Tuberculosis Survey Team, West Africa (Dec. 1955 -  )  
*Purpose of the project.* To determine the incidence of tuberculosis.  |
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<tbody>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong> A tuberculosis specialist, a laboratory technician, two public-health nurses and a statistician.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td><strong>Work during the year.</strong> Surveys were made in Ghana and Nigeria.</td>
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<th>Zanzibar 3</th>
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<tbody>
<tr>
<td><strong>Training of Auxiliary Personnel</strong> (June 1957 - )</td>
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<tr>
<td><strong>Aim of the project.</strong> To train auxiliary personnel for work in rural areas, particularly in connexion with maternal and child health.</td>
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<tr>
<td><strong>Assistance provided by WHO during the year.</strong> A sanitarian instructor and a health-visitor tutor.</td>
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<tr>
<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<tr>
<td><strong>Work during the year.</strong> The first course for rural health workers began in July and proceeded according to plan. The health-visitor tutor carried out investigations to assess the possibilities of organizing the training of health visitors.</td>
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<th>Zanzibar 4</th>
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<tbody>
<tr>
<td><strong>Malaria Control, Zanzibar and Pemba</strong> (Jan. 1957 - )</td>
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<tr>
<td><strong>Aim of the project.</strong> To carry out a malaria survey, followed by a control campaign.</td>
</tr>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong> A malariologist, an entomologist, a laboratory technician and a sanitarian.</td>
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<tr>
<td><strong>Probable duration of assistance.</strong> Until 1962.</td>
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<tr>
<td><strong>Work during the year.</strong> Work continued on the preliminary survey in Zanzibar and Pemba, in preparation for the campaign to begin early in 1958. Susceptibility testing revealed no sign in <em>Anopheles gambiae</em> of resistance to dieldrin, so this insecticide was recommended for use in both islands. Plans were made for an area on the northern tip of Zanzibar island, with a population of 25,000, to be sprayed with dieldrin/resin water-dispersible powder, as a further trial.</td>
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<th>Zanzibar</th>
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<td><strong>Participation in Regional Courses and Meetings</strong></td>
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<td>See AFRO 20; AFRO 24.</td>
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### THE AMERICAS

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<tr>
<th>Project No.</th>
<th>Description</th>
<th>Source of Funds</th>
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<tbody>
<tr>
<td>AMRO 1</td>
<td><strong>Environmental Sanitation Training, Brazil, Chile, and Mexico</strong> (to serve all countries in the Americas) (Dec. 1952 - )</td>
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</tbody>
</table>

**Aim of the project.** To train sanitary engineers and auxiliary personnel for staffing national and local health departments; to strengthen courses and to expand facilities in Latin America for training environmental sanitation personnel from all countries of the Americas.

**Assistance provided by WHO during the year.** (a) Two junior sanitary engineers; (b) seventeen fellowships; (c) supplies and equipment.

**Probable duration of assistance.** Until 1965.

**Work during the year.** Teaching of sanitary engineering continued at the Schools of Public Health of the Universities of Chile and Mexico. The second course for sanitary inspectors at the School of Hygiene of the University of São Paulo was completed in May, and the University’s annual sanitary engineering course for an M.P.H. degree began in March. Courses in Chile and São Paulo were attended by students on WHO fellowships. A five-month course in environmental sanitation for sanitary engineers began in July at the School of Public Health, Chile. This is the eleventh such course at the School, and the ninth open to students from other countries. WHO granted fellowships for attendance to ten students from various Latin-American countries. Supplies were provided for the course at the University of Mexico’s School of Sanitary Engineering.

<table>
<thead>
<tr>
<th>AMRO 6</th>
<th>See Bolivia 11; Peru 23.</th>
</tr>
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<tbody>
<tr>
<td>AMRO 7</td>
<td><strong>Malaria and Aedes aegypti Eradication, Central America and Panama</strong> (Oct. 1952 - )</td>
</tr>
<tr>
<td>TA</td>
<td>TA Special Malaria Fund, PASB</td>
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<td></td>
<td>UNICEF</td>
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</tbody>
</table>

**Assistance provided by WHO during the year.** A malariologist, a medical officer (Aedes aegypti eradication adviser), and two sanitarians.

An additional malariologist, a public-health engineer and an administrative methods consultant have been provided from the Special Malaria Fund for the Americas.

**Probable duration of assistance.** Until 1962 (Aedes aegypti eradication only under this project as from 1 January 1958).

**Work during the year.** Advice and assistance in planning, training, operation of the spraying campaign, evaluation, and epidemiological surveillance was given periodically by the central unit of malaria eradication technical consultants to the country malaria projects in Central America and Panama.

Advice on Aedes aegypti eradication was given throughout the area.

<table>
<thead>
<tr>
<th>AMRO 8</th>
<th><strong>Malaria and Aedes aegypti Eradication, Caribbean Area</strong> (Oct. 1952 - )</th>
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</thead>
<tbody>
<tr>
<td>TA</td>
<td>UNICEF</td>
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</table>

**Assistance provided by WHO during the year.** (a) Two medical officers and five sanitarians; (b) supplies and equipment.

**Probable duration of assistance.** Until 1962. (The malaria eradication operations will be transferred to another project from 1 January 1958.)

**Work during the year.** Plans for a malaria eradication campaign in Jamaica and Trinidad were completed and approved. Total spraying coverage started in January 1957 in Surinam; in February in Grenada; in June in Trinidad. Geographical reconnaissance continued in Jamaica. Malaria eradication work has been in full operation in St Lucia since 1956. In Guadeloupe eradication is nearly achieved and a survey for evaluation of results has been planned. In Tobago the campaign has reached the surveillance stage. Malaria has been eradicated from the coastlands of British Guiana and in Martinique. The control programme in Dominica continued. Eradication campaigns at different stages have progressed in the Caribbean, except in Saba, St Eustatius and St Martin in the Netherlands Antilles, and in the British and United States Virgin Islands (St John and St Thomas).

Aedes aegypti is considered to be eradicated in Bermuda, French Guiana and St Croix (United States Virgin Islands); no locality remains infested in Aruba and British Guiana; only one is still positive in Grenada, one in St Vincent, one in Curacao and four in St Lucia; and the infestation has been reduced by at least half in Antigua, Barbados and St Kitts-Nevis-Anguilla. Steady progress has been reported from the rest of
Project No.  
Source of Funds  
Co-operating Agencies  

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<tr>
<th>Description</th>
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<tr>
<td>the islands, except Montserrat, where the campaign stopped in June 1956, and Puerto Rico, Martinique and Dominica, which have not reported new activities since August 1955, September 1956 and October 1956, respectively.</td>
</tr>
</tbody>
</table>

**AMRO 10**  
TA  

**Inter-American Programme for Education in Biostatistics, Santiago, Chile** (to serve Latin America)  
(Oct. 1952 - )  

**Aim of the project.** To improve vital and health statistics of Latin American countries by training their technical personnel; to provide training in vital and health statistics at the School of Public Health of the University of Chile; to develop the Chilean services responsible for vital and health statistics, where practical training will be given, and to organize model local offices of civil registration and vital and health statistics for demonstration purposes.  

**Assistance provided by WHO during the year.** (a) An expert in health-statistics, and a short-term consultant in demography; (b) eleven fellowships for students from Argentina, Bolivia, Mexico, Nicaragua, Peru, and Paraguay to study vital and health statistics at the School of Public Health in Chile, and two short-term fellowships for students from Cuba and Guatemala for studies in Mexico; (c) financial assistance to the School of Public Health of Chile for expanding its statistical staff and facilities to provide instruction for technical personnel from other countries; (d) some supplies and equipment.  

**Probable duration of assistance.** Until 1961.  

**Work done.** About 180 students from nineteen countries have been trained in the five annual and supplementary courses so far given at the School (1953-57).  

**AMRO 18**  
R  

**Medical and Public-Health Education** (March 1953 - )  

**Aim of the project.** To strengthen schools of medicine and public health in Latin America and the United States, by consultant services, interchange of professors, visits by faculty members to the countries from which their students come, and fellowships to teaching personnel for further training in universities abroad; to broaden and improve medical education by giving more training in preventive medicine to undergraduates.  

**Assistance provided by WHO during the year.** (a) Two short-term consultants; (b) ten fellowships; (c) supplies and equipment.  

**Probable duration of assistance.** Until 1965.  

**Work during the year.** Advice was given to schools of medicine and of public health in the Region, especially on teaching of preventive medicine, curriculum organization and teaching methods. Information on the teaching of medicine and of public health was distributed to schools and institutions in Latin America. Fellowships were granted to professors of schools of public health and of medical schools in the United States of America and in Latin America, to observe health organization and general conditions in countries from which their students come and teaching of public health or medical education in selected centres.  

**AMRO 28**  
R  

**Advanced Nursing Education, School of Public Health, University of Chile, Santiago** (to serve Latin America)  
(Jan. 1955 - )  

**Aim of the project.** To train graduate nurses for administrative, teaching and supervisory posts in schools of nursing, hospitals, and public-health services, concentrating first on communicable-disease nursing.  

**Assistance provided by WHO during the year.** (a) A nurse educator; (b) eight twelve-month fellowships; (c) some supplies and equipment.  

**Probable duration of assistance.** Until 1965.  

**Work during the year.** Twenty-two students were enrolled; eight of them came from other countries on WHO fellowships. An analysis was made of the role of the School, in connexion with which the nurse educator helped to conduct seminars, to draw up a modified course of nursing for 1958 and to plan a survey of nursing resources and needs.  

**AMRO 47**  
TA  
UNICEF  

**Yaws Eradication and Syphilis Control, Caribbean Area** (Nov. 1954 - )  

**Aim of the project.** To eradicate yaws and to reduce the prevalence of syphilis and gonorrhoea in the Caribbean area; to strengthen venereal-disease services, including laboratory serological services; to train local personnel of all categories in mass campaign methods.  

**Assistance provided by WHO during the year.** A medical officer, a short-term consultant, and a serologist.
### Project List: The Americas

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<tr>
<th>Project No.</th>
<th>Source of Funds</th>
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<th>Description</th>
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<td></td>
<td></td>
<td>Probable duration of assistance. Until 1960.</td>
</tr>
</tbody>
</table>

**Work during the year.** In Anguilla, Grenada, Nevis, St Kitts and St Vincent the mass campaigns were completed; those in Dominica, St Lucia, Trinidad and Tobago continued, the re-survey stage being reached in the last three.

**AMRO 61**

Rabies Control (Jan. 1954 - )

*Aim of the project.* To co-ordinate national and local rabies-control programmes; to co-ordinate studies of the ecology of bats and of their importance in the continued existence of rabies; to train personnel.

*Assistance provided by WHO during the year.* (a) A rabies adviser and four short-term consultants; (b) twenty-seven two-week fellowships for attendance at the regional rabies training course in Caracas, Venezuela, to trainees from the following countries: Argentina, Bolivia, Brazil, British Guiana, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, French Guiana, Grenada, Guatemala, Mexico, Nicaragua, Paraguay, Peru, Trinidad; (c) supplies and equipment.

**Probable duration of assistance.** Until 1961.

*Work during the year.* Assistance and technical advice were provided in all aspects of rabies control, including laboratory diagnosis, and production of vaccine and hyperimmune serum.

Programmes for control of canine rabies received particular attention, especially in the countries of Central America, and in Panama, where the health authorities are particularly concerned about the danger of the introduction of rabies.

The third WHO regional rabies training course, and a seminar on public-health virology, took place in the National Institute of Hygiene, Caracas, Venezuela from 31 March to 13 April 1957. The course, which provided the participants with the latest information on rabies diagnosis, treatment, control, and eradication, was attended by thirty-four students from twenty countries and territories, and by four observers ---from Venezuela and Ecuador and from FAO and the Pan American Zoonoses Center.

**AMRO 76**

Vaccine Testing (to serve all Latin-American countries) (July 1954 - )

*Aim of the project.* To help laboratories undertaking the production of vaccines in the Americas to maintain high standards of potency and safety.

*Assistance provided by WHO and work done during the year.* A grant towards cost of confirmatory testing of vaccines, antigens and antisera for the national Ministries of Health.

**Probable duration of assistance.** Indefinite.

**AMRO 81**

Pan American Zoonoses Center, Azul, Argentina (Dec. 1956 - )

*TA*  
*PASB*  
*(FAO)*

*Aim of the project.* To promote and strengthen anti-zoonosis work in the Americas.

*Assistance provided by WHO during the year.* (a) A chief of laboratory services, a specialist in zoonoses and an administrative officer; (b) supplies and equipment.

Service and para-professional staff are provided from the special fund contributed annually by the Government of Argentina.

**Probable duration of assistance.** Indefinite.

*Work during the year.* Administrative and technical organization of the Center, recruitment of personnel, and preparation for large-scale work in 1958 were carried out.

**AMRO 85**

Latin American Center for Classification of Diseases, Caracas, Venezuela (April 1955 - )

*R*  


*Assistance provided by WHO and work done during the year.* A grant was made to the Center to permit the employment of a statistician. A seminar was held at the Center in August, on the 1955 revision of the International Classification of Diseases, with a view to stimulating its application and promoting improvement of medical certification. WHO provided seventeen fellowships for participants from Argentina, Brazil, Canada, Chile, Costa Rica, Ecuador, El Salvador, Guatemala, Haiti, Mexico, Nicaragua, Panama,
<table>
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<tbody>
<tr>
<td>AMRO 86 R</td>
<td></td>
<td>Health Statistics, British Honduras, Costa Rica, Cuba, Dominican Republic, El Salvador, Guatemala, Haiti, Honduras, Nicaragua and Panama (Jan. 1955 - )</td>
<td>Paraguay, United States of America, and Uruguay. Some equipment and supplies were also provided to the Center. Probable duration of assistance. Indefinite.</td>
</tr>
<tr>
<td>AMRO 91 R</td>
<td></td>
<td>Seminar on Application of the International Sanitary Regulations, Maracay, Venezuela (21 - 25 Jan. 1957)</td>
<td>Assistance provided by WHO during the year. (a) Grants to seventeen governmental officials (quarantine officers, epidemiologists, statisticians) from eight South-American countries for participation in the seminar; (b) supplies and equipment. Work done. Thirty-five persons attended the seminar, at which the application of the International Sanitary Regulations and methods of improving the reporting of communicable diseases were discussed. (This is the second seminar on the International Sanitary Regulations held in the Americas; the first took place in San José, Costa Rica, in 1955.)</td>
</tr>
<tr>
<td>AMRO 93 R  (ICA)</td>
<td></td>
<td>Health Education, Cuba, Dominican Republic, Haiti and Mexico (Oct. 1955 - )</td>
<td>Aim of the project. To improve health education by studies to determine the countries' needs; advice on problems; help in selecting and training health educators; and training various categories of public-health workers in health education. Assistance provided by WHO and work done during the year. A health educator, who assisted the National Commission for the Eradication of Malaria, of Mexico, to draw up a health education programme for 1958, and co-operated in planning courses with the Schools of Public Health of Guatemala and Mexico. He also helped in the health education programme, including the selection of students, in the Dominican Republic. Probable duration of assistance. Indefinite.</td>
</tr>
<tr>
<td>AMRO 95 TA UNICEF</td>
<td></td>
<td>Environmental Sanitation, Caribbean Area (May 1956 - )</td>
<td>Aim of the project. To improve environmental sanitation. Assistance provided by WHO during the year. A public-health engineer and a public-health sanitarian. Probable duration of assistance. Until 1961. Work during the year. In Trinidad some plans were made for a sanitation programme and the disposal of water wastes in a housing development in Arima was investigated. Sanitation surveys were made in Grenada and St Vincent. Sanitation problems of a school in Barbados were studied. Preliminary discussions took place on the water supply in Jamaica.</td>
</tr>
<tr>
<td>Argentina 3 TA</td>
<td></td>
<td>Nursing Education, Province of Córdoba (Jan. 1957 - )</td>
<td>Aim of the project. To train nurses for teaching, supervisory and administrative positions as a first step in improving hospital and public-health nursing services. Assistance provided by WHO during the year. A nurse educator. Probable duration of assistance. Until 1961. Work during the year. The nurse educator, with the national nursing instructors and the director of the school, studied the school facilities and field practice area and prepared a revised curriculum for the school.</td>
</tr>
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### Project List: The Americas

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<tbody>
<tr>
<td>Argentina 6</td>
<td>R</td>
<td></td>
<td>Plans were made for a recruitment campaign to attract young women with full high-school education. Scholarships were obtained to enable the students to give full time to their studies.</td>
</tr>
<tr>
<td>Argentina 7</td>
<td>TA UNICEF</td>
<td>Local Health Services, Province of Chaco (May 1957 - )</td>
<td><strong>Aim of the project.</strong> To provide adequate public-health services in one province and to promote the extension of the same type of services to the other provinces. <strong>Assistance provided by WHO during the year.</strong> Two consultants and two nurses. <strong>Probable duration of assistance.</strong> Until 1961.</td>
</tr>
<tr>
<td>Argentina 15</td>
<td>R (FAO) UNICEF</td>
<td>Nutrition (Aug. 1957 - )</td>
<td><strong>Aim of the project.</strong> (a) To make a nutrition survey; (b) to plan nutrition programmes; (c) to undertake education of the public in nutrition and training of nutrition specialists and auxiliary personnel. <strong>Assistance provided by WHO during the year.</strong> A three-month travel grant to the Director of the Nutrition Institute to visit the Institute of Nutrition of Central America and Panama and institutes in the United States of America.</td>
</tr>
<tr>
<td>Barbados 2</td>
<td>TA UNICEF</td>
<td>Local Health Services (April 1955 - )</td>
<td><strong>Aim of the project.</strong> To develop, for the whole island, a comprehensive integrated public-health service suited to its needs and resources. <strong>Assistance provided by WHO during the year.</strong> (a) A laboratory adviser; (b) a twelve-month fellowship to study public-health nursing in the United States of America; (c) equipment and supplies for the public-health laboratory. <strong>Probable duration of assistance.</strong> Until 1958. <strong>Work during the year.</strong> UNICEF laboratory supplies and equipment arrived early in 1957. In March, a WHO public-health laboratory adviser came to Barbados to assist in planning and setting up a central public-health laboratory in Bridgetown; laboratory procedures were established and in-service training of local laboratory staff started. The main BCG campaign ended in April; a modified and limited campaign continued during the year.</td>
</tr>
<tr>
<td>Bolivia 4</td>
<td>TA Special Malaria Fund, PASB UNICEF</td>
<td>Malaria Eradication (1956 - ) (continuation of the control project carried out from 1954 to 1956)</td>
<td><strong>Assistance provided by WHO during the year.</strong> A malarialogist. Two six-month fellowships were provided from the Special Malaria Fund for the Americas. <strong>Probable duration of assistance.</strong> Until 1963. <strong>Work during the year.</strong> The survey to delimit the malarious area was completed in April. The geographical reconnaissance (census, numbering of houses, and preparation of itineraries) and training of personnel continued. The plan of operations was prepared and presented to UNICEF in September.</td>
</tr>
<tr>
<td>Bolivia 5</td>
<td>R</td>
<td>Nursing Education, National School of Nursing, La Paz (Aug. 1953 - )</td>
<td><strong>Aim of the project.</strong> To raise the standard of nursing throughout the country by reorganizing the National School of Nursing and improving nursing education.</td>
</tr>
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THE WORK OF WHO, 1957

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<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year. (a) Two nurse educators; (b) supplies and equipment.</strong> Fellowships were provided under Bolivia 13.</td>
</tr>
<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until 1959.</td>
</tr>
<tr>
<td><strong>Bolivia 11</strong></td>
<td><strong>Joint Field Mission on Indigenous Populations, Andean Highlands (Jan. 1957 - )</strong> (continuation of work carried out under AMRO 6 since 1952)</td>
</tr>
<tr>
<td></td>
<td><strong>Aim of the project.</strong> To promote economic and social development of indigenous populations of the Andean highlands, with a view to facilitating their integration into their national communities.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A medical officer.</td>
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<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until 1960.</td>
</tr>
<tr>
<td><strong>Bolivia 13</strong></td>
<td><strong>Fellowships</strong></td>
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<tr>
<td></td>
<td><strong>Public-health administration.</strong> Two ten-month fellowships for fourth-year studies in the course of basic nursing at the School of Nursing, Valparaiso, Chile (see also Bolivia 5).</td>
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<tr>
<td><strong>Bolivia</strong></td>
<td><strong>Participation in Regional Courses and Meetings</strong></td>
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<tr>
<td></td>
<td><em>See AMRO 10; AMRO 61.</em></td>
</tr>
<tr>
<td><strong>Brazil 17</strong></td>
<td><strong>Hydatidosis Control (June 1956 - )</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Aim of the project.</strong> To develop and operate a programme for controlling hydatidosis, which will include health education of the public and measures to reduce the prevalence of the disease in domestic animals.</td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A twelve-month fellowship to study veterinary public health, particularly zoonoses.</td>
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<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until 1960.</td>
</tr>
<tr>
<td><strong>Brazil 18</strong></td>
<td><strong>National Drug Service (April 1955 - )</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Aim of the project.</strong> To establish a national service for the control of chemical, bacteriological and biological standards, and to draw up regulations on food and drug control.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A drug control adviser.</td>
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<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until 1959.</td>
</tr>
<tr>
<td><strong>Brazil 19</strong></td>
<td><strong>School of Public Health, Rio de Janeiro (1957 - )</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Aim of the project.</strong> To establish a national institute for professional education in public health.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A professor of public health.</td>
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<tr>
<td></td>
<td><strong>Work during the year.</strong> Work began on a study of the country's needs and resources in public-health personnel, on an evaluation of the course at Rio de Janeiro and on development of training facilities for professional and auxiliary health workers.</td>
</tr>
</tbody>
</table>
Brazil 21

Project No. 21
Source of Funds TA
Co-operating Agencies

Description

Trachoma Control (Aug. 1957 - )

Aim of the project. To organize pilot trachoma control programmes in various areas of Brazil.

Assistance provided by WHO during the year. Two three-month fellowships (one to the chief of the campaign) for study in Switzerland, Italy, Morocco and Spain.

Probable duration of assistance. Until 1959.

Brazil 22

Project No. 22
Source of Funds TA
Co-operating Agencies

Description

Nursing Education (Feb. 1956 - )

Aim of the project. First phase: To evaluate nursing needs and resources.

Assistance provided by WHO during the year. A nurse educator.

Probable duration of assistance. Until 1960.

Work during the year. Work continued on the survey to determine the type and number of professional and auxiliary nursing personnel required. Most of the data were collected and good progress was made with their analysis.

Brazil

Participation in Regional Courses and Meetings

See AMRO 61; AMRO 85.

British Guiana

Participation in Regional Courses and Meetings

See AMRO 61.

British Guiana and West Indies 5

Fellowships

Environmental sanitation. A two-month fellowship to an engineer from St Kitts for study in Puerto Rico.

Laboratory services. A one-month fellowship to a medical officer from Trinidad to study laboratory services at the University College of the West Indies, Jamaica; a six-month fellowship to a medical officer from St Vincent to study general and public-health laboratory methods and techniques at the same college.

Veterinary public health. A twelve-month fellowship to a Jamaican for study in the United States of America.

British Honduras 4

Fellowships


British Honduras 5

R Rural Health Services (June 1957 - )

Aim of the project. To strengthen the health services of British Honduras and extend them throughout the rural areas.

Assistance provided by WHO during the year. A twelve-month fellowship to study public-health administration in the United States of America; two fellowships in nursing education—one of twelve months for study in Canada, and one of four months for study in the United States of America.

Work during the year. A plan of operations was prepared.

Canada 1

Fellowships

Public-health administration. A twelve-month fellowship for study in the United States of America.

Canada

Participation in Regional Courses and Meetings

See AMRO 85.

Chile 10

Tuberculosis Control (BCG) (April 1956 - )

Aim of the project. To test and vaccinate persons between one and thirty years of age, in rural areas where the population is small; to train local personnel.

Assistance provided by WHO during the year. A BCG nurse.
Probable duration of assistance. Until the end of 1957.

Work during the year. By September 776,703 persons had been tuberculin tested and 385,552 persons vaccinated with BCG.

Chile 15
Source of Funds
Co-operating Agencies

Aim of the project. To make a survey of the consumption of alcoholic beverages and of alcoholism in Chile, as a preliminary to a programme for controlling alcoholism.

Assistance provided by WHO during the year. A consultant.

Work done. Following the survey, proposals were made for a control programme based on health centres and for a programme for training personnel.

Chile 17
Source of Funds
Co-operating Agencies
University of Chile, Medical School (1956 - 1957)

Aim of the project. To provide essential teaching equipment.

Assistance provided by WHO. Equipment for the Medical School including audiovisual aids (such as projectors) and microscopes and instruments for the anatomy laboratory.

Chile 20
Source of Funds
Co-operating Agencies
Midwifery Education (Sept. 1956 - )

Aim of the project. To establish a centre for midwifery training in Concepción, and to improve midwifery training generally.

Assistance provided by WHO and work done during the year. (a) A nurse midwife educator who advised on preparation of basic educational programmes for midwives, training of instructors, and appraisal of current practice and setting of standards for maternal and infant care; (b) a three-month fellowship for study in Europe; (c) supplies and equipment.

Probable duration of assistance. Until 1960.

Chile 25
Source of Funds
Co-operating Agencies
Fellowships

Maternal and child health. A four-month fellowship for study of the organization of maternal and child health services in Colombia, Guatemala, Mexico and the United States of America.


Chile 28
Source of Funds
Co-operating Agencies
Fellowships

Cardiology. A one-month fellowship for study in the United States of America.

Public-health administration. A twelve-month fellowship for study in the United States of America.

Chile
Source of Funds
Co-operating Agencies
Participation in Regional Courses and Meetings

See AMRO 61; AMRO 85.

Colombia 4
Source of Funds
Co-operating Agencies
Public-Health Services (Sept. 1951 - )

Aim of the project. To reorganize and modernize the departmental public-health services; to train professional and auxiliary personnel of health centres; to provide, with UNICEF assistance, modern supplies and equipment for health centres and services in five departments; to provide facilities and personnel for environmental sanitation, especially in rural areas.

This project is a redefinition and extension of the maternal and child health project (Colombia 4) which began in 1951.

Assistance provided by WHO during the year. (a) Two medical officers, a public-health engineer, and three public-health nurses; (b) two fellowships—one of twelve months and one of six months; (c) some supplies and equipment.

Probable duration of assistance. Until 1961.
### Colombia 5

**Malaria Eradication (1957 - )** (continuation of the control project carried out from 1951 to 1956)

*Assistance provided by WHO during the year.* (a) A malarialogist, an entomologist and two sanitarians; (b) supplies and equipment.

*Probable duration of assistance.* Until 1963.

*Work during the year.* The National Service for the Eradication of Malaria became a separate entity under the Ministry of Health. The pre-eradication survey that began in 1956 was completed in July. The plan for the eradication of malaria was completed and presented to UNICEF in September. Geographical reconnaissance and training of personnel continued.

### Colombia 22

**Aëdes aegypti Eradication (Jan. 1951 - )**

This project was part of Colombia 5 until 31 December 1956.

*Assistance provided by WHO during the year.* A medical officer and a sanitarian.

*Probable duration of assistance.* Until 1962.

*Work during the year.* In January 1957 the Aëdes aegypti eradication service was separated from the malaria service and its operations were placed under the Carlos Finlay Institute. House-to-house inspection and perifocal application of DDT water-dispersible powder continued. By 30 September, 3064 localities, 341 of which were found positive, had been surveyed; 2667 were treated and post-treatment inspection of 327 of them showed one still positive.

### Cuba 5

**Malaria Eradication (Feb. 1957 - )**

*Aim of the project.* To eradicate malaria from the remaining malarious area of the provinces of Pinar del Rio and Oriente.

*Assistance provided by WHO and work done during the year.* A malarialogist, who received special training at the international training centre for malaria eradication in Mexico before taking up his duties on the project late in the year.

*Probable duration of assistance.* Until 1963.

*Work during the year.* The plan of operations for the epidemiological survey needed to determine the infected area was discussed with the Government.

### Dominican Republic 2

**Malaria and Aëdes aegypti Eradication (1957 - )** (continuation of the control project carried out from 1952 to 1956)

*Assistance provided by WHO during the year.* (a) An Aëdes aegypti eradication adviser, a malarialogist and a sanitarian; (b) two four-month fellowships; (c) supplies and equipment.

*Probable duration of assistance.* Until 1960.
**Work during the year.** The plan for the eradication of malaria was prepared. Geographical reconnaissance was carried out until the end of September. Complete spraying coverage with dieldrin of all houses in the malarious area began in October.

The *Aedes aegypti* eradication campaign progressed with house-to-house inspection and perifocal application of DDT water-dispersible powder.

**Dominican Republic**

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>Fellowships</td>
<td></td>
<td><em>Venereal-disease laboratory techniques.</em> A four-month fellowship for study in Venezuela.</td>
</tr>
<tr>
<td>R</td>
<td>Participation in Regional Courses and Meetings</td>
<td></td>
<td>See AMRO 61.</td>
</tr>
</tbody>
</table>

**Ecuador**

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Rural Public-Health Services (Nov. 1953 - )</td>
</tr>
<tr>
<td>TA</td>
<td><em>Aim of the project.</em> To expand the maternal and child health project into a general programme for strengthening and integrating the country's public-health services, developing a public career service and establishing new health centres, especially in rural areas.</td>
</tr>
<tr>
<td>UNICEF</td>
<td>WHO assistance to this project, previously financed by PASB, started in January 1955.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO during the year. (a) A medical officer and a public-health nurse; (b) two eleven-month fellowships to study public-health administration, in Puerto Rico and in Chile respectively; (c) supplies and equipment.</td>
</tr>
<tr>
<td></td>
<td>Probable duration of assistance. Until 1960.</td>
</tr>
<tr>
<td>14</td>
<td>Malaria Eradication (Nov. 1956 - )</td>
</tr>
<tr>
<td>TA</td>
<td><em>Aim of the project.</em> A malarialogist.</td>
</tr>
<tr>
<td>Special Malaria Fund, PASB</td>
<td>Supplies and equipment were provided from the Special Malaria Fund for the Americas.</td>
</tr>
<tr>
<td>16</td>
<td>Nursing Education, School of Nursing, Guayaquil (May 1957 - )</td>
</tr>
<tr>
<td>R</td>
<td><em>Aim of the project.</em> To raise the standard of the School of Nursing in the Medical School of the University of Guayaquil, to enable it to train graduate nurses for the country's expanding hospital and public-health services.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO during the year. A nurse educator.</td>
</tr>
<tr>
<td></td>
<td>Probable duration of assistance. Until 1961.</td>
</tr>
<tr>
<td>TA</td>
<td><em>Aim of the project.</em> To extend practical studies on nutrition at the National Institute of Nutrition, using available data on basic food analysis and biochemical and clinical investigation; to give further training to its staff and develop its organization and operation; to co-ordinate its activities with public-health programmes so as to improve the nutrition of the population.</td>
</tr>
<tr>
<td>PASB (Kellogg Foundation)</td>
<td>WHO assistance to this project started in 1955.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO during the year. (a) A nutrition consultant; (b) supplies and equipment.</td>
</tr>
<tr>
<td></td>
<td>Probable duration of assistance. Until 1961.</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
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**Ecuador**

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**El Salvador 5**

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<tr>
<th>Project No.</th>
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**French Guiana**

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**Grenada**

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<tr>
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**Guatemala 1**

<table>
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<tr>
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**Guatemala 6**

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<tr>
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**Guatemala 8**

<table>
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</table>

*Work during the year.* Progress was made with the educational and training programme at the Institute and with the medical nutrition survey. The staff has been strengthened by the return of the trainees.

Assistance was given in developing the Department of Nutrition of the Institute of Hygiene of Quayaquil.

**Ecuador**

Participation in Regional Courses and Meetings

*See AMRO 61; AMRO 85.*

**El Salvador 5**

Health Demonstration Area, San Andrés Valley (May 1951 - )

_Aim of the project._ To develop a public-health service adapted to the resources of the country and the needs of the rural areas; to organize integrated public-health services in one area as a model for similar services in other areas; to train health personnel for the demonstration and other areas.

_Assistance provided by WHO during the year._ (a) A medical officer, a sanitary engineer and three public-health nurses; (b) supplies and equipment.

_Probable duration of assistance._ Until 1960.

*Work during the year.* Training of professional and auxiliary personnel continued in the area.

**El Salvador**

Participation in Regional Courses and Meetings

*See AMRO 85.*

**French Guiana**

Participation in Regional Courses and Meetings

*See AMRO 61.*

**Grenada**

Participation in Regional Courses and Meetings

*See AMRO 61.*

**Guatemala 1**

Malaria Eradication (1956 - ) (continuation of control programme carried out under AMRO 7 since 1952)

_Assistance provided by WHO during the year._ A sanitary engineer and a sanitary inspector.

_Six fellowships and supplies and equipment were provided from the Special Malaria Fund for the Americas._

_Probable duration of assistance._ Until 1962.

*Work during the year.* Total spraying coverage with dieldrin, which began in August 1956, was continued (See also AMRO 7.)

**Guatemala 6**

Training of Nursing Auxiliaries (April 1955 - )

_Aim of the project._ To prepare graduate nurses as instructors of auxiliary nursing personnel, and to train nursing auxiliaries for hospital service, by a central training programme in Guatemala City and extension training programmes in the provinces; to strengthen the country’s hospital nursing services and to supply the additional auxiliary nurses urgently needed for all health services.

_Assistance provided by WHO during the year._ (a) A nurse educator; (b) a twelve-month fellowship; (c) supplies and equipment.

_Probable duration of assistance._ Until 1959.

*Work during the year.* In August forty-eight auxiliary nursing students obtained their certificate. Progress was made with the in-service education programme for employed auxiliary nursing personnel of the general hospital. A second course for the preparation of instructors of auxiliary personnel started in October.

**Guatemala 8**

Rural Public-Health Services (Aug. 1954 - )

_Aim of the project._ To reorganize and expand the public-health services in rural areas and to train professional and auxiliary personnel for them.
Guatemala 11

**BCG Vaccination** (June 1956 - )

**Aim of the project.** To undertake a BCG campaign covering at least one million people.

**Assistance provided by WHO during the year.** A medical officer, who also worked on project Honduras 5.

**Probable duration of assistance.** First quarter of 1958.

**Work during the year.** Satisfactory progress has been made with the vaccination campaign, which started in August 1956. By the end of July 1957 a total of 1,459,608 persons had been tuberculin tested and 720,781 vaccinated with BCG.

Guatemala

**Participation in Regional Courses and Meetings**

See AMRO 10; AMRO 61; AMRO 85.

Haiti 1

**Yaws Eradication and Syphilis Control** (July 1950 - )

**Aim of the project.** To eradicate yaws and control syphilis in urban and rural areas by mass treatment with antibiotics, and by training local personnel and educating the public.

**Assistance provided by WHO during the year.** (a) Three medical officers and two sanitary inspectors; (b) a one-month fellowship; (c) supplies and equipment.

**Probable duration of assistance.** Until 1959.

**Work during the year.** The mass campaign for yaws eradication was completed in July. A surveillance system was established, to keep a constant watch for any new cases of yaws that might appear. Plans were made for surveillance to be combined with a mass smallpox vaccination campaign. The anti-syphilis work diminished somewhat in 1957 but is to be intensified in 1958.

Haiti 4

**Malaria and Aedes aegypti Eradication** (1957 - ) (continuation of the control project carried out from 1953 to 1956)

**Assistance provided by WHO during the year.** Three fellowships.

The staff—a malarialogist, two sanitarians and an administrative officer—and thirteen fellowships, were provided from the Special Malaria Fund for the Americas.

**Probable duration of assistance.** Until 1963. (A.aegypti eradication will be transferred to another project in 1958.)

**Work during the year.** The conversion to malaria eradication operations proceeded. Total spraying coverage, scheduled to start in October 1957, was postponed to 1958. Due to local conditions work has been largely limited to focal inspections and focal spraying of the larger urban areas.

By September, 2376 localities presumed to be infested with Aedes aegypti had been inspected, and 602 were found positive; these were treated and post-treatment inspection of 435 of them showed 27 still positive.

Haiti 15

**Fellowships**

**Nursing education.** One twelve-month fellowship for study in Canada.

**Public-health nursing.** Two twelve-month fellowships for study in Canada.

Haiti

**Participation in Regional Courses and Meetings**

See AMRO 85.
**Honduras 1**

**Source of Funds**: TA

**Co-operating Agencies**: Special Malaria Fund, PASB, UNICEF

**Description**

**Malaria Eradication (1956 - )** (continuation of control programme carried out under AMRO 7 since 1952)

*Assistance provided by WHO during the year.* A malariologist and a sanitary engineer. Six short-term fellowships and supplies and equipment were provided from the Special Malaria Fund for the Americas.

*Probable duration of assistance.* Until 1962.

*Work done during the year.* The epidemiological and geographical reconnaissance was completed during the year. Total spraying coverage with dieldrin of all houses in the malarious area began in November 1957. (See also AMRO 7.)

---

**Honduras 4**

**Source of Funds**: TA

**Co-operating Agencies**: UNICEF

**Description**

**Rural Public-Health Services (Aug. 1955 - )**

*Assistance provided by WHO during the year.* (a) A medical officer, a sanitary engineer and two public-health nurses; (b) two twelve-month fellowships; (c) supplies and equipment.

*Probable duration of assistance.* Until 1962.

*Work during the year.* Plans for the expansion of rural public-health services were submitted to the Minister of Public Health. Progress was made in training sanitary inspectors and nursing auxiliaries. The construction of the first health unit and training centre was completed in August.

---

**Honduras 5**

**Source of Funds**: TA

**Co-operating Agencies**: UNICEF

**Description**

**BCG Vaccination (March 1957 - )**

*Assistance provided by WHO during the year.* A medical officer who also worked on project Guatemala 11.

*Probable duration of assistance.* Until 1958.

*Work during the year.* The mass campaign started in June. By September, 246,885 persons had been tuberculin tested, and 114,032 vaccinated with BCG.

---

**Jamaica 7**

**Co-operating Agencies**: R

**Description**

**Fellowships**

*Venereal diseases.* A two-month fellowship for study in the United States of America.

*Vital statistics.* A fifteen-month fellowship for study in the United States of America.

---

**Martinique 3**

**Source of Funds**: TA

**Co-operating Agencies**: R

**Description**

**Fellowships**

*Maternal and child health.* A three-month fellowship for study of the organization of maternal and child health services in the United States of America and Canada.

*Medico-social work.* A three-month fellowship for study in the United States of America and Canada.

---

**Mexico 18**

**Source of Funds**: R

**Co-operating Agencies**: UNICEF

**Description**

**Fellowships**

*Laboratory services.* A five-month fellowship for study in the United States of America.

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**Mexico 22**

**Source of Funds**: R

**Co-operating Agencies**: UNICEF

**Description**

**Integrated Health Services, State of Guanajuato (Aug. 1955 - )**

*Assistance provided by WHO during the year.* (a) A medical officer, a sanitary engineer, a nurse, and a sanitary inspector; (b) supplies and equipment.
Project No. | Source of Funds | Co-operating Agencies |
---|---|---|
Mexico 24 | TA | Mexico 53 |
| Special Malaria Fund, PASB | UNICEF |
| Malaria Eradication (1956 - 1957) (continuation of the control project carried out from 1949 to 1952 and from 1954 to 1955) |
| Assistance provided by WHO during the year. | A malariologist, a sanitary engineer, a scientist, and a sanitarian. |
| Two three-week fellowships were provided from the Special Malaria Fund for the Americas. |
| Probable duration of assistance. | Until 1961. |
| Work during the year. | Total spraying coverage of all houses with residual insecticides was started in January and will continue until the end of 1960. Arrangements were made with the Ministry of Health of Mexico to expand training facilities to provide instruction also for malaria eradication personnel from outside Mexico, so as to prepare them for work in the malaria eradication projects in other American countries. |

Mexico | Participation in Regional Courses and Meetings |
---|---|
| See AMRO 10; AMRO 61; AMRO 85. |

Nicaragua 3 | Rural Public-Health Services (Sept. 1954 - 1957) |
---|---|
| Aim of the project. | To reorganize and develop rural health services throughout the country with training facilities for local health personnel. |
| Assistance provided by WHO during the year. | A twelve-month fellowship for study in Puerto Rico. |

Nicaragua 5 | Nursing Education, National School of Nursing, Managua (March 1955 - 1957) |
---|---|
| Aim of the project. | To establish at the National School of Nursing a good permanent nursing education programme, providing for teaching of the social, preventive and community aspects of a nurse’s work and a broader and better basic curriculum; to prepare nurses for teaching posts; to improve the School’s classrooms and laboratories. |
| Assistance provided by WHO during the year. | (a) Three nurse educators; (b) supplies and equipment. |
| Probable duration of assistance. | Until 1959. |
| Work during the year. | The curriculum of the School was revised to include the social aspects of nursing and preventive medicine. The faculty was strengthened by the appointment of new instructors and the training of others already in service. Several graduate nurses already trained abroad served in the faculty. |

Nicaragua 6 | Fellowships |
---|---|
| Nursing education. | A twelve-month fellowship for study in Costa Rica. |

Nicaragua | Participation in Regional Courses and Meetings |
---|---|
| See AMRO 10; AMRO 61; AMRO 85. |

Panama 1 | Public-Health Services (Aug. 1952 - 1957) |
---|---|
<p>| Aim of the project. | To strengthen rural public-health services; to develop effective methods of public-health administration suited to the social, economic and cultural needs of the population; to provide facilities for training auxiliary and professional public-health personnel; to organize and develop the Central Laboratory in Panama City and rural laboratories. |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td></td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A medical officer, a public-health engineer, and two nurses; (b) one short-term and two long-term fellowships; (c) supplies and equipment.</td>
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<td><strong>Probable duration of assistance.</strong> Until 1960.</td>
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<td></td>
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<td></td>
<td><strong>Work during the year.</strong> A plan for reorganizing the central health services was developed. It provides for (a) decentralization of services; (b) integration of preventive and hospital services; (c) establishment of priority for preventive programmes; (d) establishment of full-time posts in the health services. Training courses continued for physicians, nurses, sanitary inspectors, laboratory technicians, and public-health auxiliary workers.</td>
</tr>
<tr>
<td>Panama 2</td>
<td>TA</td>
<td>Special Malaria Fund, PASB UNICEF</td>
<td>Malaria Eradication (1956 -  ) (continuation of control programme carried out under AMRO 7 since 1952)</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A malarialogist.</td>
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<td></td>
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<td></td>
<td>Six short-term fellowships and supplies and equipment were provided from the Special Malaria Fund for the Americas.</td>
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<td></td>
<td><strong>Probable duration of assistance.</strong> Until 1962.</td>
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<td></td>
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<td></td>
<td><strong>Work during the year.</strong> The epidemiological and geographical surveys, including numbering of all houses in the malarious area, were completed during the year and personnel were trained. Total spraying coverage of all houses with residual insecticides was started in October. (See also AMRO 7.)</td>
</tr>
<tr>
<td>Panama</td>
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<td>Participation in Regional Courses and Meetings</td>
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<td>See AMRO 85.</td>
</tr>
<tr>
<td>Paraguay 1</td>
<td>TA</td>
<td>Special Malaria Fund, PASB UNICEF</td>
<td>Malaria Eradication (Oct. 1955 -  )</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) Seven fellowships; (b) supplies and equipment.</td>
</tr>
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<td><strong>Probable duration of assistance.</strong> Until 1962.</td>
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<tr>
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<td></td>
<td><strong>Work during the year.</strong> Total spraying coverage of all houses with residual insecticides started in October.</td>
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<td></td>
<td><strong>Aim of the project.</strong> To reduce the incidence of leprosy by intensive sulfone therapy to interrupt the chain of infection.</td>
</tr>
<tr>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A medical officer; (b) five short-term fellowships.</td>
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<td><strong>Probable duration of assistance.</strong> Until 1959.</td>
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<td><strong>Work during the year.</strong> Case-investigating teams tested 221 429 persons; 897 new cases were detected, and ambulatory treatment was carried out. Search for contacts was started during the year and has been made a routine measure. By July 1010 contacts had been tested, 4.8 per cent. of which were found infected and 2.5 per cent. kept in observation. These activities were strengthened by the gradual establishment of permanent services, such as centres for treatment and control of sources of infection.</td>
</tr>
<tr>
<td>Paraguay 10</td>
<td>TA</td>
<td>UNICEF</td>
<td>Public-Health Services (Jan. 1955 -  )</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To organize and expand comprehensive central and local public-health services, with programmes for maternal and child health, control of communicable diseases, environmental sanitation; to establish adequate public-health laboratory services and training of professional, technical and auxiliary personnel.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A medical officer, a bacteriologist, an epidemiologist, a sanitary engineer, and a public-health nurse; (b) one long-term and one short-term fellowship; (c) supplies and equipment.</td>
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<td><strong>Probable duration of assistance.</strong> Until 1962.</td>
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<td><strong>Work during the year.</strong> The international team advised on the development of the central and local services. A five-year plan was drawn up for extending basic health services to all parts of the country. The District of San Lorenzo was developed as a training and demonstration area.</td>
</tr>
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</table>
Project No.  
Source of Funds  
Co-operating Agencies  

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<tr>
<td><strong>Paraguay</strong></td>
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</table>
| Participation in Regional Courses and Meetings  
*See AMRO 10; AMRO 61; AMRO 85.* |

<table>
<thead>
<tr>
<th>Peru 21</th>
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</thead>
<tbody>
<tr>
<td><strong>Fellowships</strong></td>
</tr>
<tr>
<td>Public-health administration. Two twelve-month fellowships for study in the United States of America and an eleven-month fellowship for study in Mexico.</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Peru 22</th>
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<tbody>
<tr>
<td><strong>Public-Health Services (Jan. 1956 - )</strong></td>
</tr>
</tbody>
</table>
| Assistance provided by WHO during the year. (a) A medical officer and a public-health nurse; (b) a short-term fellowship.  
Probable duration of assistance. Until 1961. |
| *Work during the year.* Public-health nursing needs were assessed and the extension of services progressed. |

<table>
<thead>
<tr>
<th>Peru 23</th>
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<tbody>
<tr>
<td><strong>Joint Field Mission on Indigenous Populations, Andean Highlands (Jan. 1957 - )</strong> (continuation of work carried out under AMRO 6 since 1952)</td>
</tr>
<tr>
<td>Aim of the project. To promote economic and social development of indigenous populations of the Andean highlands, with a view to facilitating their integration into their national communities.</td>
</tr>
<tr>
<td>Assistance provided by WHO during the year. A medical officer.</td>
</tr>
<tr>
<td><em>Work during the year.</em> Work at the rural health centres in the Puno area of Peru gradually increased. Two small health centres were organized in the Indian community of Taraco.</td>
</tr>
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<thead>
<tr>
<th>St Kitts</th>
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<tbody>
<tr>
<td><strong>Fellowships</strong></td>
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<tr>
<td><em>See British Guiana and West Indies 5.</em></td>
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<td><em>See British Guiana and West Indies 5.</em></td>
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<tr>
<th>Trinidad 5</th>
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<tbody>
<tr>
<td><strong>Fellowships</strong></td>
</tr>
<tr>
<td>Leprosy. A three-month fellowship for study in Surinam and French Guiana.</td>
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<td><strong>Fellowships</strong></td>
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<td><em>See British Guiana and West Indies 5.</em></td>
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<td><em>See AMRO 61.</em></td>
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<th>United States 7</th>
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<tbody>
<tr>
<td><strong>Fellowships</strong></td>
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</tbody>
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| Epidemiology of anthrax. A sixteen-week fellowship for study in several European countries.  
Forensic medicine. A fourteen-week fellowship for study in the United Kingdom, France, Belgium, Germany, Denmark, and Sweden. |

<table>
<thead>
<tr>
<th>United States</th>
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<tbody>
<tr>
<td><strong>Participation in Regional Courses and Meetings</strong></td>
</tr>
<tr>
<td><em>See AMRO 85.</em></td>
</tr>
</tbody>
</table>
Project No.  
Source of Funds  
Co-operating Agencies

**Uruguay 5**

<table>
<thead>
<tr>
<th>TA</th>
<th>UNICEF</th>
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</thead>
</table>

**Description**

**Rural Health Services (Aug. 1955 - )**

**Aim of the project.** To reorganize and improve basic rural health services by: combining the efforts of all public-health institutions, under the direction of the Ministry of Health; creating integrated services based on health centres, improving those centres, establishing new ones in remote communities, and increasing the number of subcentres; organizing community participation; training all categories of local public-health personnel; supporting the work by a health education programme.

**Assistance provided by WHO during the year.** A medical officer, a sanitary engineer, and a public-health nurse.

**Probable duration of assistance.** Until 1960.

**Work during the year.** The health services of the Department of Rivera were strengthened. Nursing personnel were given training in public health.

**Uruguay 8**

<table>
<thead>
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<th>R</th>
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</table>

**Fellowships**

**Nursing.** Four twelve-month fellowships in various branches of nursing, three for study in the United States of America and one for study in Guatemala.

**Public-health administration.** An eleven-month fellowship for study in Chile.

**Uruguay**

**Participation in Regional Courses and Meetings**

See AMRO 85.

**Venezuela 1**

<table>
<thead>
<tr>
<th>TA</th>
<th>UNICEF</th>
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</thead>
</table>

**Description**

**Local Health Services (Survey: March - May 1953; July 1955 - )**

**Aim of the project.** To set up in the Tuy Valley a unit providing well-balanced rural health services (including medical and dental care) where public-health personnel for the rest of the country will be trained and which will demonstrate the part played by modern public-health practice in the social and economic development of an area.

**Assistance provided by WHO during the year.** (a) A medical officer, a sanitary engineer, and a nurse; (b) two fellowships; (c) supplies and equipment.

**Probable duration of assistance.** Until 1960.

**Work during the year.** Training courses were given for professional and auxiliary personnel. The sanitary engineer helped to draw up an environmental sanitation programme for the Tuy Valley.

**Venezuela 10**

<table>
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<th>R</th>
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</table>

**Fellowships**

**Veterinary public health.** A twelve-month fellowship for study in Canada.
SOUTH-EAST ASIA

SEARO 2

TA

Assistance to Tuberculosis Laboratories (Aug. 1955 - )

Aim of the project. To assist countries of the Region (Afghanistan, Burma, Ceylon, India, Indonesia and Thailand) in developing laboratory work in connexion with the expansion of their tuberculosis services.

Assistance provided by WHO during the year. A bacteriologist.

Probable duration of assistance. Until 1959.

Work during the year. The bacteriologist continued his visits to the tuberculosis laboratories established with WHO assistance in the Region for the purpose of assessing the methods followed, the equipment used and the standards maintained.

At the request of the Indian Council of Medical Research, he made a tour of certain areas in India, to study the bacteriological techniques and procedures being used in the national tuberculosis prevalence survey. A joint report on the findings of this study was sent to the Council.

SEARO 13

R

Tuberculosis Workers' Meeting, New Delhi (14-18 Jan. 1957)

Aim of the project. To provide an opportunity for exchange of views and experience on tuberculosis control.

Assistance provided by WHO and work done. Cost of travel and maintenance expenses of sixteen participants from the South-East Asia Region. The meeting, which was presided by the Chief of the Tuberculosis Section at Headquarters, was attended by WHO tuberculosis field workers and their national counterparts from the South-East Asia, Eastern Mediterranean and Western Pacific Regions, and by the tuberculosis advisers of the South-East Asia and Western Pacific Regional Offices—thirty-five persons in all. The principles of tuberculosis control programmes, and the technical methods to be employed, were discussed.

SEARO 18

R

Preparation of Annual Public-Health Reports, Afghanistan, Burma and Thailand (March 1957 - )

Aim of the project. To assist the health departments of certain countries in the Region in preparing their annual public-health reports.

Assistance provided by WHO and work done. A consultant in public-health administration, who assisted the health administration of Burma to prepare its draft annual health reports for 1955 and 1956.

Probable duration of assistance. Until mid-1958.

SEARO 20

TA

Rural Health Conference, New Delhi (14 - 26 Oct. 1957)

Aim of the project. To discuss the problems of organizing health services in rural areas.

Assistance provided by WHO. (a) A consultant in public-health administration for six months, to make arrangements for the conference and prepare working papers; (b) cost of attendance of thirty participants from Afghanistan, Burma, Ceylon, India, Indonesia, Nepal, Portuguese India and Thailand; (c) supplies.

Work done. The conference consisted of presentation and discussion of working papers, formal lectures, group discussions, and field visits. There was exchange of technical information on the state of development of the rural health services in each country, and particular attention was paid to the planning, organizing and administration of rural health services, including financing, staffing, size of health units, siting of centres, services to be provided, supervision of staff required, training of personnel, evaluation, integration of special health activities, and community participation.

SEARO 28

R

Medical Education Study Tour (Nov. 1957 - )

Aim of the project. To arrange study tours to enable small groups of professors and senior teachers in selected non-clinical subjects to visit certain medical colleges and research institutions in India, on a programme of discussions in their speciality.

Assistance provided by WHO during the year. Travel costs and subsistence allowances for six visiting professors.
Probable duration of assistance. Until 1959.

Work during the year. The subject chosen for study in 1957 was pathology. Six visiting professors started their three-week tour of medical colleges and schools and research institutions in India on 21 November 1957, accompanied by an Indian professor from the Grant Medical College, Bombay.

SEARO 33

Hospital Physics (Nov. 1957 - )

Aim of the project. To provide hospital staff, research workers and public-health administrators with information on radiation protection in hospitals.

Assistance provided by WHO during the year. A consultant for six weeks to visit the main medical centres in India (Delhi, Lucknow, Madras, Bombay and Calcutta) and Ceylon, give a series of lectures on "Recent views on radiation protection as applied to clinical medicine", discuss hospital physics in general and advise on radiation protection measures in the radiological units visited.


SEARO 37

Rehabilitation

WHO made a grant to a participant from India for attendance at the Seminar on Rehabilitation, held in Solo, Indonesia, from 26 August to 7 September 1957. The seminar was organized by the Government of Indonesia and the United Nations in co-operation with ILO, WHO, the International Society for the Welfare of Cripples and the World Veterans Federation.

Afghanistan 1

See Afghanistan 11.

Afghanistan 4


Aim of the project. To train male nurses, in a three-year course, for hospital and community health services.

Assistance provided by WHO during the year. (a) Two nurse tutors; (b) supplies and equipment.

Probable duration of assistance. Until the end of 1957, when the project will be merged with Afghanistan 35.

Work during the year. Seventeen students completed their first-year training, and a second group of ten was enrolled. A refresher course was held for a group of graduate nurses at the Ali-Abad Hospital. A series of lectures on ward and hospital administration was given to head nurses.

As part of a refresher course for teachers from the provinces, which was held at the Teachers' Training College in Kabul, one of the nurse tutors gave a course of lectures, as well as some instruction on the recognition of communicable diseases, particularly in schoolchildren. Instruction in anatomy, physiology and first aid was given to the students at the school for sanitarians (see Afghanistan 28).

Afghanistan 6 and 39

Public-Health Administration, Kabul (Nov. 1951 - )

Aim of the project. To improve public-health administration and services; to train medical and para-medical personnel; to co-ordinate national and internationally assisted health programmes.

Assistance provided by WHO during the year. A short-term consultant in public-health administration and an administrative assistant.

Probable duration of assistance. Until the end of 1959.

Work during the year. The consultant helped the Government to formulate the health part of the five-year development plan, and co-ordinated in a single report the recommendations of specialist advisers from the Regional Office who had visited Afghanistan and helped to draft parts of the plan relating to their specialities.

The administrative assistant helped to train staff at the Ministry of Public Health in office procedures.

Afghanistan 7

Strengthening of Health Statistics Organization, Kabul (April 1956 - )

Aim of the project. To follow up the work of the WHO-sponsored training course in vital and health statistics held in Kabul in 1954; to reorganize the Health Statistics Division of the Health Directorate.

Assistance provided by WHO during the year. (a) A health statistician; (b) a twelve-month international fellowship; (c) supplies and equipment.
The statistician and his counterpart gave lectures on health statistics as part of a refresher course for medical officers.

Tuberculosis Control and Training Centre, Kabul (Nov. 1953 - Nov. 1957)

Aim of the project. To establish a model tuberculosis service, particularly for preventive work; to train staff in modern methods of diagnosis and control, including domiciliary chemotherapy; to carry out epidemiological survey work.

Assistance provided by WHO during the year. (a) A senior officer, a public-health nurse and a laboratory technician; (b) supplies and equipment.

Work done. The Tuberculosis Centre was opened for routine work in July 1954. A diagnostic service has been set up, which carries out tuberculin testing, photofluorography and laboratory work, including culture of the tubercle bacillus.

Sixteen doctors, two x-ray technicians, twelve x-ray assistants, two laboratory technicians, five laboratory assistants, and twenty-one nurses and home visitors were trained.

A domiciliary service was set up; its scope is limited, but it is well planned and operated, and can be expanded.

UNICEF supplied isoniazid for the domiciliary service, and equipment, including containers and record cards needed for sending batches of sputum to a laboratory in Europe for special examination, including typing of the organism.


Aim of the project. To expand and improve maternal and child health services and increase training facilities.

Assistance provided by WHO during the year. A maternal and child health officer and a public-health nurse (until December 1956).

Work done. Two antenatal and two well-baby clinics, the first in Afghanistan, were established in Kabul in 1951. By the end of 1956 there were five of each.

The Shararah Maternity Hospital has been reorganized and converted into a post-graduate teaching institution. A domiciliary midwifery service—the first in the country—has been established; but it has not yet sufficient staff and transport to meet all the calls made on it, and the Government has been obliged temporarily to limit its work. A child health clinic has been established, and the paediatric department has been completely reorganized.

In 1956 eleven nurses graduated from the Mastoorat Hospital and eleven midwives completed their training at the Shararah Hospital. Sixteen nurses and eighteen midwives were being trained in 1957.

Malaria Control (Aug. 1956 - )

Aim of the project. To consolidate the malaria control campaigns (carried out under Afghanistan 1 since 1949) for malaria eradication; to assess results and plan future operations.

Assistance provided by WHO during the year. (a) A consultant malarialogist, for two months, to help with implementation of surveillance procedures; (b) four regional fellowships—two for two months, and two for three months; (c) medicine chests for malaria inspectors, to facilitate surveillance work.

An advisory team on malaria eradication (malarialogist, entomologist and two technicians) worked on the project from September to December 1956.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
</table>
*Aim of the project.* To improve environmental sanitation by: sanitary surveys; standard sanitary installations for urban and rural communities; design and construction of water-supply and sanitary installations for government institutions and public buildings; lectures in sanitation at the Faculty of Medicine, Kabul University, and other training institutions for health workers.  
*Assistance provided by WHO during the year.* A sanitary engineer (until December 1956).  
*Work done.* Problems connected with the water supply in Kabul and Kandahar were investigated; public baths were installed; sanitation of lodging houses and schools was improved; standard sanitary installations were designed.  
Under this project help was provided with environmental sanitation work being carried out in connexion with the Shewaki Rural Development Project, and with training given at the Shararah Midwifery School and the School for Male Nurses to malaria inspectors, sanitarians, and various auxiliary workers. Assistance was also given with the refresher courses held for medical officers. |
| Afghanistan 13 | R | **Assistance to Faculty of Medicine, University of Kabul** (Jan. - Aug. 1952; Sept. 1953 - )  
*Aim of the project.* To develop on sound lines the Departments of Anatomy, Physiology, Preventive Medicine, Internal Medicine and Paediatrics of the Faculty of Medicine and to train national counterparts of the visiting professors.  
*Assistance provided by WHO during the year.* (a) A professor of anatomy, a professor of physiology, a professor of paediatrics, a professor of preventive and social medicine and a professor of internal medicine; (b) equipment (charts and models).  
*Probable duration of assistance.* Until 1961.  
*Work during the year.* The professor of physiology was replaced by his Afghan counterpart in December 1956. Satisfactory progress has been made in this discipline, the number of students has steadily increased and teaching, which now includes laboratory training, has improved.  
The professor of preventive and social medicine continued his courses at the Faculty and helped with a second refresher course of medical officers and with the training of nurses and sanitarians.  
The professor of anatomy terminated his assignment in December 1957; the professors of paediatrics and internal medicine started their assignments in April and September respectively. |
| Afghanistan 20 | TA UNICEF | **Vaccine Production, Kabul** (Jan. 1955 - )  
*Aim of the project.* To reorganize, expand and improve facilities for vaccine production in order to provide adequate supplies of vaccine for the national health programmes; to train local personnel in production of biological substances; to organize a suitable system of vaccine distribution and use.  
*Assistance provided by WHO during the year.* (a) A laboratory specialist and a consultant for four weeks; (b) supplies and equipment.  
*Probable duration of assistance.* Until 1959.  
*Work during the year.* The Vaccine Institute, which now produces smallpox, cholera, TAB and rabies vaccines, started also the production of high titre sera and Kahn antigens. The Institute buildings were renovated and extended.  
The consultant made an evaluation of the project in October, and submitted a report and recommendations on production of freeze-dried smallpox vaccine. |
| Afghanistan 21 | TA UNICEF | **Public Health Provincial Expansion and Nursing Education, Kandahar and other Provincial Centres** (Jan. 1955 - )  
*Aim of the project.* To organize and develop provincial health services (starting in Kandahar) and to train personnel for them. |
### Afghanistan 22

**Source of Funds**: TA

<table>
<thead>
<tr>
<th>Co-operating Agencies</th>
<th>Project No.</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Assistance provided by WHO during the year. A public-health officer, a public-health nurse and a midwife tutor.</td>
</tr>
</tbody>
</table>

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** The public-health officer surveyed services and facilities in Kandahar. A plan for improvement of sanitation in Kandahar was prepared and partly implemented, and improvements were made in the women's hospital and the maternal and child health clinics. Domiciliary and midwifery services were established and further nurse-midwife helpers were trained.

### Environmental Sanitation, Kabul Municipality (Nov. - Dec. 1955; March 1956 - )

**Source of Funds**: TA

<table>
<thead>
<tr>
<th>Co-operating Agencies</th>
<th>Project No.</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Aim of the project. To develop a sanitation section in the Kabul Municipality; to plan and carry out a programme of sanitation including the design, operation and maintenance of sanitary installations; to train sanitation personnel.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) A sanitary engineer; (b) a twelve-month international fellowship.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** A sanitary survey of Kabul was made and the analysis of the findings was begun. Plans were made for the construction of public latrines, public baths and other sanitary installations.

A sanitation manual, based on the lectures given to district directors and other municipal officials, was prepared.

The Afghan counterpart of the WHO sanitary engineer and a district director of the municipality started their WHO fellowship studies.

### Afghanistan 23

**Source of Funds**: R

<table>
<thead>
<tr>
<th>Co-operating Agencies</th>
<th>Project No.</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Refresher Courses for Medical Officers (Second course: 22 May - 11 Sept. 1957)</td>
</tr>
</tbody>
</table>

**Aim of the project.** To provide provincial medical officers with theoretical and practical training in modern methods of public-health practice.

The first course took place from 20 May to 10 August 1956.

**Assistance provided by WHO during the year.** Forty per cent. of the cost of travel and of maintenance expenses for six medical officers from outside Kabul; assistance from WHO project staff in Kabul, secretarial help, and teaching equipment.

**Probable duration of assistance.** Two further courses, in 1958 and 1959.

**Work during the year.** The second refresher course was attended by nine medical officers—three from Kabul and six from the provinces. It included a programme of field practice (not given in the first course) and meetings of the participants for discussion. Particular attention was paid to public health.

### Assistance to Public-Health Laboratory, Kabul (May 1956 - )

**Source of Funds**: TA

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<tr>
<th>Co-operating Agencies</th>
<th>Project No.</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Aim of the project. To consolidate the work of the public-health laboratory at Kabul; to give further training to laboratory technicians.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) A laboratory technician; (b) supplies and equipment.

**Probable duration of assistance.** Until 1959.

**Work during the year.** A nine-month training course for laboratory assistants was completed early in 1957; six of the seven students passed. A training course for laboratory technicians, to last two years, was started in February, with fourteen students in attendance.

Photo-electric colorimeter methods were introduced in the Biochemistry and Haematology Departments. Antibiotic sensitivity tests were carried out on an experimental basis. The culture media section was reorganized; a few new culture media were introduced for the first time.

### Afghanistan 26

**Source of Funds**: TA

<table>
<thead>
<tr>
<th>Co-operating Agencies</th>
<th>Project No.</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Rural Health Unit, Chaurassia (Shewaki) (April 1956 - )</td>
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</tbody>
</table>

**Aim of the project.** To improve water supplies and excreta disposal in the rural areas of Chaurassia, Shewaki, Volayit and Mozai; to devise simple, practical and economical sanitary works and test their applicability on a pilot scale; to extend similar sanitation programmes to other rural areas; to train sanitaryans and other local staff.
Acitivities provided by WHO during the year. (a) A sanitarian; (b) two ten-month fellowships—one regional and one international.

Probable duration of assistance. Until the end of 1959.

Work during the year. The area of the project was enlarged to cover fifty-nine instead of eleven villages. Progress was slow, owing to technical difficulties and lack of a sanitarian to supervise the work during four months.

School for Sanitarians, Kabul (July 1955 - )

Aim of the project. To train sanitarans for community health services.

Acitivities provided by WHO during the year. (a) A sanitarian; (b) teaching equipment and supplies.

Probable duration of assistance. Until the end of 1960.

Work during the year. The training of sanitarans was continued as planned, and a second class of twenty-two students was started. A study was made of the academic and field training given, with a view to revising the whole training programme.

Assistance to Jalalabad and Kandahar Hospitals (Nov. 1956 - )

Aim of the project. To modernize the facilities for diagnosis, treatment and training at the provincial hospitals of Jalalabad and Kandahar.

Acitivities provided by WHO during the year. Supplies and equipment, including two ambulances, for the two hospitals at Jalalabad and Kandahar.

Probable duration of assistance. Until mid-1958.

Assistance to X-Ray Department, Faculty of Medicine, Kabul (Nov. 1956 - )

Aim of the project. To upgrade facilities and to improve the standard of teaching in the X-Ray Department of the Faculty of Medicine; to train x-ray technicians in the operation and maintenance of equipment; to improve diagnostic facilities at the Ali-Abad Hospital, and to give training to doctors.

Acitivities provided by WHO during the year and work done. Supplies and equipment (x-ray equipment and films).

Probable duration of assistance. Until 1959.

Nursing Education (June 1957 - )

Aim of the project. To develop the training of male and female nurses and midwives; to establish a training programme for auxiliary nurse midwives; to plan for meeting the country's needs in nursing services.

Acitivities provided by WHO during the year. (a) A public-health nurse midwife; (b) supplies and equipment.

Probable duration of assistance. Until 1961. (From 1958, Afghanistan 4, and the parts of Afghanistan 10 and 21 concerning female nursing and midwifery in Kabul, will be transferred to this project.)

Work during the year. The curriculum of the midwifery school at the Shararah Hospital was studied with a view to revision. Assistance was given with the refresher course for male nurses held at the Ali-Abad Hospital.

Fellowships

Laboratory techniques. A nine-month regional fellowship for study in India.

Nursing. Two twelve-month international fellowships for study in Lebanon.


Vaccine manufacture. An eight-month regional fellowship for study in India.

See Afghanistan 6.
Afghanistan 40

**Source of Funds**

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Agency</th>
<th>Description</th>
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<tbody>
<tr>
<td>Afghanistan</td>
<td>R</td>
<td>Medical Stores Management (Nov. 1957 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To improve the organization, system of storage and distribution methods of the Central Medical Depot of the Ministry of Public Health.

**Assistance provided by WHO and work done during the year.** A consultant for two months, who reviewed the arrangements for purchase, storage and distribution of medical supplies and equipment.

**Probable duration of assistance.** Until the end of 1957.

Afghanistan

**Participation in Regional Meetings**

See SEARO 20.

Barma 10

**Project No.**

<table>
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<tr>
<th>Source of Funds</th>
<th>Agency</th>
<th>Description</th>
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<tbody>
<tr>
<td>Afghanistan</td>
<td>TA</td>
<td>Tuberculosis Country Adviser and Lecturer (July 1955 - )</td>
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</table>

**Aim of the project.** To organize and expand the national tuberculosis service; to give lectures on tuberculosis to undergraduates and graduates at the Rangoon Medical College; to give further training to counterparts so that they may carry out both the above functions.

**Assistance provided by WHO during the year.** (a) A tuberculosis adviser and lecturer; (b) two international fellowships—one of fifteen months and one of twelve months.

**Probable duration of assistance.** Until 1959.

**Work during the year.** Until completion of his assignment in June, the adviser continued his lectures and practical demonstration of tuberculosis diagnosis and control to graduate and post-graduate students in Rangoon. Plans were made for a national survey of tuberculosis prevalence, for a BCG consolidation programme and for domiciliary chemotherapy, in association with the Rangoon and Mandalay tuberculosis centres. Assistance was given to the Director of the Rangoon tuberculosis centre in reviewing technical procedures and improving them where necessary.

Barma 18

**Project No.**

<table>
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<tr>
<th>Source of Funds</th>
<th>Agency</th>
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<tbody>
<tr>
<td>Afghanistan</td>
<td>TA</td>
<td>Tuberculosis Control and Training Centre, Mandalay (July 1954 - Dec. 1957)</td>
</tr>
</tbody>
</table>

**Aim of the project.** To establish a model tuberculosis service, particularly for preventive work; to train personnel in modern methods of diagnosis and control, including domiciliary chemotherapy; to carry out epidemiological surveys.

**Assistance provided by WHO during the year.** (a) A medical officer, a laboratory technician, an x-ray technician and a public-health nurse; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** Difficulties were experienced, owing to shortage of staff and certain equipment, but some of them were eventually overcome.

The x-ray technician had trained sufficient staff to carry on the work of the department by the end of his assignment in December 1956, but no further trainees were available.

The domiciliary service was expanded, in spite of certain setbacks, but no survey work could be carried out.

The medical officer tuberculin tested over 2000 people of all age groups in the Northern Shan States, which are predominately rural. About 80 per cent. returned for the reading of the test and most of those with negative reaction were vaccinated.

The medical officer also gave lectures and demonstrations to 180 participants in a seminar for teachers from all parts of the country, held in Maymyo in April.

Barma 21

**Project No.**

<table>
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<tr>
<th>Source of Funds</th>
<th>Agency</th>
<th>Description</th>
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**Aim of the project.** To strengthen the Health Education Bureau, Rangoon; to assist with developing a health education programme in the Teachers' Training Institute; to train all categories of health personnel in health education; to improve health education throughout the country.

**Assistance provided by WHO during the year.** (a) A health educator; (b) two three-month regional fellowships; (c) supplies.

**Probable duration of assistance.** Until the end of 1959.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
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<td>Work during the year. Health visitors and health assistants were given in-service training. Six lecture-discussion seminars were arranged for doctors from the districts. A ten-day in-service training seminar was held for health education assistants working in various parts of Burma, and a series of lectures on principles and methods of health education was held for twenty medical officers, as part of a short course on public health. A “Suggested Guide Line for strengthening the Health Education Bureau and Programme of Work for 1957-58” was prepared, after a study of the functions and administration of the bureau had been made. A “Health Education Newsletter” was started for distribution to all public-health personnel. Steps were taken to set up a health education committee for strengthening health education work.</td>
</tr>
</tbody>
</table>

**Burma 22**

Vital and Health Statistics, Rangoon (Dec. 1955 - )

**Aim of the project.** To establish machinery for prompt notification of accurate statistical data; to improve processing of the information and to train staff in statistical methods.

**Assistance provided by WHO during the year.** (a) A specialist in vital statistics; (b) a twelve-month international fellowship; (c) supplies and equipment.

**Probable duration of assistance.** Until the end of 1960.

**Work during the year.** Agreement was reached with the Ministry of Health and the Inter-departmental Committee on Vital and Health Statistics on the WHO specialist’s recommendations for a new system of vital registration and statistics, on which a report will be submitted to the Government.

The statistician and the project staff assisted in the preparation of material for the current annual health reports. All vital statistics returns for the years 1947 to 1956 were checked and revised. The compilation of hospital and dispensary returns continued.

Lectures on vital and health statistics were given to medical officers attending the public-health refresher courses, and to medical students.

**Burma 25**

Post-graduate School of Nursing, Rangoon (Jan. - Nov. 1955; Aug. 1956 - )

**Aim of the project.** To give post-graduate training to nursing tutors, public-health nurses and midwife tutors, to meet the requirements of the integrated health services.

**Assistance provided by WHO during the year.** A nurse educator.

**Probable duration of assistance.** Until the end of 1960.

**Work during the year.** Curricula were drawn up for the new course for sister tutors and for the public-health nursing course, which is being resumed after a lapse of two years. Enrolment of students for these two courses proceeded.

**Burma 26**

Nutrition, Rangoon (Aug. 1954 - )

**Aim of the project.** To reorganize the nutrition services and carry out a nutrition programme; to establish a nutrition laboratory in Rangoon; to study and improve institutional diets; to survey dietary habits and nutritional status of certain population groups; to establish community feeding centres.

**Assistance provided by WHO during the year.** A medical nutritionist and a biochemist.

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** Nutrition and dietary surveys were carried out in different parts of Burma and the results analysed. Another survey was made to study the incidence of beriberi among 1500 nursing and pregnant mothers in Rangoon.

The somatometric data of over 30,000 schoolchildren were collected and analysed. Rice samples and samples of other local foods were examined, and a pilot feeding programme was started with a view to investigating the effect of adding locally prepared fish flour to the diet of 130 children in day nurseries. The programme was continued for nine months and the analysis of the results was begun. The information collected is destined for use in planning a national nutrition programme.

**Burma 28**

Assistance to Medical College, Rangoon University (Feb. 1955 - )

**Aim of the project.** To upgrade the departments of pharmacology, physiology and preventive medicine in the Medical College of Rangoon University, as part of a long-term programme for upgrading the medical faculty as a whole.
**Burma 30**

**Development of Environmental Sanitation Division, Ministry of Health (March 1956 - )**

**Aim of the project.** To develop and strengthen the Division of Environmental Sanitation in the Ministry of Health; to plan a country-wide programme in environmental sanitation; to develop a demonstration and training centre in the Aung San Myo area. (See also Burma 34, which was operated jointly with this project until the last quarter of 1957.)

**Assistance provided by WHO during the year.** A sanitarian; and a sanitary engineer since August 1957.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The sanitary engineer and responsible officials discussed the environmental sanitation problems and planned future action.

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**Burma 31**

**Strengthening of Malaria Division (Malaria Eradication Programme) (May 1954 - )**

**Aim of the project.** To strengthen the Malaria Division of the Central Government; to plan the extension of malaria control to the whole country with a view to ultimate eradication; and to train personnel.

**Assistance provided by WHO during the year.** (a) A malariologist, an entomologist and a sanitarian; an advisory team on malaria eradication—a malariologist, an entomologist and two technicians—from August to November 1957; (b) four regional fellowships—one for three months and three for two months—for advanced studies in malaria control.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The malaria eradication programme started in February 1957. Appraisal surveys were intensified and 8,700,000 persons exposed to malaria in all parts of the country were protected by spraying operations.

On the Arakan coast, *Anopheles sundaicus* has developed resistance to DDT.

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**Burma 32**

**Rural Health Unit, Mandalay (Dec. 1955 - )**

**Aim of the project.** To set up a rural health unit to demonstrate a health service combining preventive, curative and social work; to establish programmes for training in rural health work, including communicable-disease control, vital and health statistics, health education, maternal and child health, nursing, and environmental sanitation; to develop a country-wide programme of rural health services.

**Assistance provided by WHO during the year.** A ten-month regional fellowship.

**Probable duration of assistance.** Until the end of 1959.

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**Burma 34**

**Strengthening of Environmental Sanitation (March 1956 - )**

**Aim of the project.** To establish in the Aung San Myo area a pilot demonstration area where rural water supplies and excreta disposal will be improved; to devise simple, practical and cheap schemes for rural
water supply and latrine construction; to provide services and facilities for extending sanitation to all rural areas; to train sanitation personnel. (See also Burma 30, which was operated jointly with this project until the last quarter of 1957.)

**Assistance provided by WHO during the year.** A sanitarian.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Latrine and well construction in the Aung San Myo area continued, but progress was slow owing to administrative and other difficulties. A programme of rural sanitation was started in the area, and water supply work and latrine construction were undertaken in different villages. A helminthic survey carried out in Sawbwaygygione village showed high infection rates.

Health workers of various categories were trained in environmental sanitation.

**Burma 39**

**Medical Stores Management, Rangoon (July 1956 - )**

**Aim of the project.** To study the system of purchase, store-keeping and distribution of drugs and medical supplies; to reorganize the central medical stores; to plan better distribution of medical supplies and drugs to hospitals and other medical institutions.

**Assistance provided by WHO during the year.** A specialist in medical stores management.

**Probable duration of assistance.** Until mid-1958.

**Work during the year.** Slow but steady progress was made in the different aspects of this project, such as purchase, store-keeping and distribution of drugs and medical supplies. A number of improvements were effected. New purchase procedures were proposed.

**Burma 42**

**School of Nursing, Mandalay (March 1955 - Jan. 1957)**

**Aim of the project.** To improve nursing and midwifery training at the General Hospital, Mandalay, correlating theoretical and practical teaching and including public-health nursing in the curriculum.

**Assistance provided by WHO during the year.** A midwife tutor, a general nurse tutor and a public-health nurse tutor.

**Work done.** A preliminary training school for general nursing was established; the course at the preliminary training school for midwives was revised to ensure satisfactory covering of all subjects, and training in public health was included in the nursing and midwifery curricula. Demonstrations and tutorials were introduced to prepare midwifery students for domiciliary midwifery, and the period of training in this branch was increased from four to six weeks.

With equipment supplied by WHO, a general isolation unit, maternity isolation unit, sick infant section and premature infant section were set up in the hospital wards, and used for demonstration work. All wards have been equipped to meet basic requirements. In-service training courses have been given in ante-natal care, post-natal nursing care, health education in connexion with maternal and child welfare.

**Burma 45**

**Strengthening of Laboratory Services, Rangoon, Mandalay, and Provincial Centres (First phase: Jan. 1955 - Dec. 1956)**

**Aim of the project.** To set up public-health laboratories in Rangoon and Mandalay; to train technicians for the eight existing provincial laboratories and for other laboratories to be set up; to integrate the provincial laboratory services into the programme for expanding the district health services.

**Assistance provided by WHO during the year.** A laboratory specialist (microbiologist).

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The first phase of the project finished in December 1956, when the WHO laboratory specialist, after training seven laboratory technicians, completed her assignment and submitted a report with recommendations.

Lack of trained personnel, both medical and auxiliary, prevented the establishment of the four divisional laboratories that were planned, so that the four sets of laboratory equipment supplied by WHO have not yet been used.
### Burma 46

**Post-Graduate Courses in Public Health for District Medical Officers, Rangoon** (22 Oct. 1956 - 15 Jan. 1957; 1 June 1957 - )

**Aim of the project.** To train district medical officers in public-health practice, and to improve preventive services in district health centres.

**Assistance provided by WHO during the year.** Half the cost of travel and maintenance expenses of one participant from outside Rangoon. The WHO staff in Rangoon assisted with teaching.

**Probable duration of assistance.** Until 1959 (courses in 1958 and 1959).

**Work during the year.** The first three-month course was held from 22 October 1956 to 15 January 1957; there were eleven participants and an ad hoc faculty that included members of WHO staff in Rangoon.

A second course, without financial assistance from WHO, started on 1 June 1957.

### Burma 54

**Fellowships**

**Maternal and child health.** Three three-month regional fellowships for study in India.

**Mental health.** A two-year regional fellowship for study in India.

### Burma

**Participation in Regional Meetings**

See SEARO 20.

### Ceylon 4

**Rural Health Development, Kalutara** (Sept. 1955 - )

**Aim of the project.** To upgrade the children's department at the Kalutara Health Unit Hospital; to integrate the preventive and curative sides of child care at the hospital and in the field; to improve public-health nursing in the health unit and to train various categories of health personnel.

**Assistance provided by WHO during the year.** (a) A paediatrician and a public-health nurse; (b) one thirteen-month international fellowship and one three-month regional fellowship.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The initial aims of the project were achieved in the first half of 1957. The paediatric team has subsequently assisted with the upgrading of children's departments in other provincial hospitals, to form an integrated service for prevention and treatment.

### Ceylon 15

**Nurses' Training Schools, Kandy and Galle** (Jan. 1952 - Dec. 1956)

**Aim of the project.** To establish schools of nursing at Kandy and Galle with training programmes in curative and preventive nursing.

**Assistance provided by WHO during the year.** (a) A nursing arts tutor and a public-health nurse (until December 1956); (b) a twelve-month international fellowship.

**Work done.** The new school of nursing at Kandy was firmly established; a curriculum suited to the country's needs was introduced, training in public health was included in the course, and a programme of field experience was developed. Nursing procedures were revised and translated into Sinhalese. At the end of the three-year course in 1955 the first group of twenty-six students graduated and became state-registered nurses. The school had about eighty students at the end of 1957.

An in-service training programme for all hospital nursing personnel was developed, and Ceylonese counterpart tutors were trained. In-service training was given to the tutors to be assigned to the four new schools of nursing to be opened in other parts of the country.

The senior WHO nurse helped to organize the school opened in Galle in April 1956, and also advised on equipment and staff for a school to be opened in Kurunegala.
Project No. | Source of Funds | Co-operating Agencies | Description
---|---|---|---
Ceylon 18 | | TA (FAO) | Nutrition Adviser (Sept. - Nov. 1957)

**Aim of the project.** To study the medical aspects of the nutrition situation in the country and to review and evaluate the nutrition programme.

**Assistance provided by WHO and work done.** A consultant for three months, who worked in conjunction with a short-term consultant from FAO. Their report covers several aspects of the nutrition problem in Ceylon.

Ceylon 25 | TA UNICEF | | Tuberculosis Control and Training Centre, Colombo (Walisara) (May 1953 - )

**Aim of the project.** To survey the extent of the tuberculosis problem; to establish a model tuberculosis service; to train medical and para-medical personnel in diagnosis and prevention.

**Assistance provided by WHO during the year.** A radiographer, a laboratory technician, a public-health nurse and a statistician; and a consultant for three months (from November), to review the position following recommendations for expansion of the service.

**Probable duration of assistance.** Until mid-1958.

**Work during the year.** The field work on the tuberculosis prevalence survey was completed in the last quarter of 1956, and a report was sent to the Government.

At the same time as the survey, a morbidity study was undertaken.

Ceylon 26 | R | | Leprosy Control (July 1954 - June 1957)

**Aim of the project.** To modernize the leprosy-control programme by improving the work of the present institutions and developing a system of case-finding, domiciliary treatment and contact surveillance.

**Assistance provided by WHO during the year.** (a) A leprologist; (b) a three-month regional fellowship; (c) laboratory equipment and drugs.

**Work done.** Surveys were carried out. One of these, limited to examinations of contacts of registered cases and of persons from four or five neighbouring houses, was found to yield the best results commensurate with the time and money spent. The national leprosy register was brought up to date; medical workers were given training; domiciliary treatment was carried out (of 2145 cases, 1337 are now receiving treatment). Laboratory facilities were improved, and the construction of a central laboratory was sanctioned and equipment provided. Health education work was done. Recommendations were made for improvement of institutional care, and for occupational therapy.

Ceylon 35 | TA UNICEF | | Environmental Sanitation, Kurunegala (March 1955 - )

**Aim of the project.** To set up two pilot projects in rural areas for improving water supplies and excreta disposal, and to train personnel in environmental sanitation; to develop a health education programme to obtain the co-operation of the people, and prepare the community for the sanitation programme; to apply the experience so gained in the future national programme.

**Assistance provided by WHO during the year.** A sanitary engineer and a sanitarian; a consultant for two months.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Further progress was made with the construction of latrines and wells in the pilot area. Over 2000 latrines have been constructed and about 140 protected wells provided. Additional personnel were assigned to the project by the Government.

Refresher courses were held for sanitary inspectors and officers in charge of health units.

Ceylon 38 | TA | | Assistance in Epidemiology to Health Directorate (Feb. 1956 - )

**Aim of the project.** To establish an epidemiological unit at the Central Fever Hospital, Colombo, to make epidemiological surveys of the disease pattern in Ceylon; to train undergraduate and post-graduate students and a counterpart.
### Assistance provided by WHO during the year.

(a) An epidemiologist; (b) a twelve-month international fellowship.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** An epidemiological unit was formed, consisting of two epidemiologists, four laboratory technicians and one public-health inspector, and a base laboratory at the Angoda mental hospital and a field laboratory at Panadura were established.

The epidemiologist initiated research work on *Keratitis superficialis tropica*, purulent conjunctivitis, rabies, influenza virus, etc. He started a project in Panadura for studying the incidence and the serological diagnosis of typhoid fever. Outbreaks of various communicable diseases were investigated.

A training programme was started for medical personnel concerned with the handling of cases of communicable disease.

### Assistance to Health Directorate, Colombo (Nursing Adviser) (July 1957 - )

**Ceylon 39**

**R**

**Aim of the project.** To provide the Directorate of Health Services with advisory services in connexion with nursing organization, education, administration and legislation, and with the development of co-ordinated supervisory services, to ensure uniformly high nursing standards within the national health programme.

**Assistance provided by WHO during the year.** A nursing adviser.

**Probable duration of assistance.** Until 1960.

**Work during the year.** In July the nursing adviser visited services at the four schools of nursing and at the two hospitals which plan to open new schools in the near future.

A study of nursing service administration and nursing education in Ceylon was started.

### Expansion of Hospital Services (Dec. 1956 - )

**Ceylon 44**

**TA**

**Aim of the project.** To provide essential equipment and supplies required for the programme for extending hospital services in Ceylon.

**Assistance provided by WHO during the year.** Supplies and equipment to meet most of the requirements of the Government for the expansion of hospital services envisaged under the next six-year plan.

**Probable duration of assistance.** Until mid-1958.

### Health Statistics (April 1957 - )

**Ceylon 45**

**TA**

**Aim of the project.** To revise the system of records and reports in the health services; to train personnel in the design of statistical forms, the conduct of surveys and other statistical techniques; to set up a permanent statistical service in the Ministry of Health.

**Assistance provided by WHO during the year.** (a) A health statistician; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1960.

**Work during the year.** Examination of the records and reports used in the health services began. Numerous discussions took place with officers in the Ministry and in the field; local practice was studied.

The statistician was co-opted to a committee for the reorganization of maternity and child health services and participated in the work of the National Committee on Vital and Health Statistics and its Sub-Committee. He and his counterpart gave lectures to medical students and to student public-health inspectors.

### Fellowships

**Ceylon 50**

**R**

**Nursing.** A twelve-month international fellowship for study in the United Kingdom.

### Fellowships

**Ceylon 51**

**TA**

**Public-health administration.** A twelve-month international fellowship for study in the United Kingdom.
Project List: South-East Asia

85

Ceylon

**Description**

**Participation in Regional Meetings**

*See SEARO 20.*

**India 2**

Maternal and Child Health Department, All-India Institute of Hygiene and Public Health, Calcutta (June 1953 -)

**Aim of the project.** To develop the maternal and child welfare section of the All-India Institute of Hygiene and Public Health into a full Department of Maternal and Child Health, which will provide training for students from India and other Asian countries.

**Assistance provided by WHO during the year.** (a) An administrative officer, a midwife tutor, a public-health nurse and a health educator; (b) health education books, supplies and equipment.

**Probable duration of assistance.** Until the end of 1957. The health education aspects of the programme will continue from 1958 under India 118.

**Work done.** The WHO nurses helped with the organizational work of the department, including that connected with field training and staff education programmes. The nursing aspects of all courses at the Institute are now taught by nursing staff.

Health education work has considerably increased since 1955, and some training in health education is now included in nearly all the Institute's courses. A three-month certificate course in health education was established in 1956, and sixty-nine students have graduated. Consideration is being given to the possibility of introducing a ten-month certificate course for medical and non-medical health educators. The Institute's health education staff helped with health education at the Chetla urban health centre and the Singur rural health centre.

The Maternal and Child Welfare Section of the Institute has been expanded and upgraded. The Children's Department of the Chitteranjan Seva Sadan Hospital, associated with the Institute, has also been upgraded, and now forms part of a post-graduate college of obstetrics and paediatrics.

Students trained in the various courses at the Institute are as follows:

<table>
<thead>
<tr>
<th>Course</th>
<th>Indian</th>
<th>Non-Indian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diploma in Maternal and Child Welfare</td>
<td>31</td>
<td>1</td>
</tr>
<tr>
<td>Certificate in Maternal and Child Health</td>
<td>23</td>
<td>3</td>
</tr>
<tr>
<td>Certificate in Public-Health Nursing</td>
<td>38</td>
<td>12</td>
</tr>
</tbody>
</table>

**India 31**

**Plague Control, Dehra Dun, Uttar Pradesh** (July 1952 - Nov. 1957)

**Aim of the project.** To carry out research on the epidemiological factors causing recurrent outbreaks of plague in Northern India and to plan control measures.

**Assistance provided by WHO during the year.** A statistical assistant, and a short-term consultant.

**Work done.** This project was described in the Annual Report for 1956 (see Official Records No. 75, page 67). All WHO staff were withdrawn by January 1957.

In April and November 1957 a consultant reviewed the work of the national team and made recommendations.

The work on this project has revealed that DDT-spraying for malaria control, when adequately applied in a mass campaign, will also control the plague vector to some extent. The residual effect of insecticides administered by patch-dusting was found to be superior to that obtained by spraying.

**India 38**

**Nursing, Ludhiana** (June 1954 - June 1956; Jan. 1957 -)

**Aim of the project.** To survey the training facilities for nurses and midwives in Ludhiana and selected villages; to adapt and expand training programmes to meet the nursing needs of the community.

**Assistance provided by WHO during the year.** A public-health nurse educator.

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** Some progress was made in strengthening the field training of both nursing and midwifery students, especially as regards experience in rural areas. Special attention was given to health education, particularly to the use of visual aids. The possibility of establishing a follow-up home visiting service based on the out-patient department was studied.
India 40

R

Nursing, Bombay (Sept. 1953 - Dec. 1956)

Aim of the project. To extend the nursing training programme in the J.J. group of hospitals; to develop there nursing techniques and procedures suited to local conditions; to correlate theoretical teaching with teaching in the wards, and to include public-health nursing in the curriculum.

Assistance provided by WHO during the year. A nurse educator, a public-health nurse tutor and a midwife tutor.

Work done. The curriculum has been revised to include all courses recommended by the Indian Nursing Council; ward procedures have been drawn up and a staff education programme established. A programme of teaching has been introduced in six representative wards; a midwifery nursing service and a domiciliary nursing service have been set up, and a public-health nursing service has started in the hospital compound, to give student nurses experience in this branch.

From 1955 most of the classroom teaching has been done by Indian tutors.

India 42

TA

Tuberculosis Control and Training Centre, Nagpur (Nov. 1955 - )

Aim of the project. To establish a model tuberculosis service, particularly to do preventive work; to train personnel in modern methods of diagnosis and control, including domiciliary chemotherapy; to carry out epidemiological surveys.

Assistance provided by WHO during the year. (a) A medical officer, a laboratory technician, an x-ray technician and a public-health nurse; (b) radiological and laboratory equipment and supplies.

Probable duration of assistance. Until the end of 1959.

Work during the year. The laboratory was set up, and routine training of laboratory technicians started. There was delay in setting up the radiological department on account of illness, late arrival of equipment, and the time required for obtaining sanction for structural alterations to the buildings. Meanwhile the medical officer did public-relations work and teaching, and the nurse proceeded with the training of the first group of tuberculosis health visitors.

India 43

TA

Tuberculosis Control and Training Centre, Hyderabad (Dec. 1956 - )

Aim of the project. (a) To train personnel in diagnosis and control (particularly preventive work) for the district centres in the state; (b) to put into practice special mass techniques of diagnosis and control evolved by the pilot mobile units established under the Indian national tuberculosis control plan.

Assistance provided by WHO during the year. (a) Two international fellowships—one of twelve months and one of four months; (b) laboratory equipment.

Probable duration of assistance. Until 1960.

India 49

R

UNICEF
(Colombo Plan)

Maternal and Child Health/Nursing, Hyderabad (March 1954 - March 1957)

Aim of the project. To develop the maternal and child health services of the state, with special attention to the training of nursing personnel.

Assistance provided by WHO during the year. Two midwife tutors and a public-health nurse.

Work done. Work has been primarily concentrated on the training of nursing personnel, which has progressed satisfactorily. Particular attention was given to (i) the training of dais (auxiliary midwives), who it is expected will for some time assist most of the deliveries in rural areas, and (ii) the improvement of nursing practices and procedures in paediatric departments, especially that of the Niloufer Hospital for women and children. This hospital has now become one of the best in India.

An urban training area was developed, but some difficulty was encountered in introducing improvements in the rural training centre. It was found unsatisfactory to use the English language for giving training to auxiliary nurse-midwives; it was also shown that better results are obtained after graduation if students are trained in hospitals near their home, in the districts where they will eventually be appointed.

Maternal and child health centres in the city, and throughout the state, were upgraded.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>India 53 and 102</td>
<td>Tuberculosis Chemotherapy Centre, Madras (Dec. 1955 - )</td>
<td>TA</td>
<td>(British Medical Research Council) (Indian Council of Medical Research)</td>
</tr>
<tr>
<td>India 56</td>
<td>Maternal and Child Health/Nursing, Bihar (Nov. 1954 - )</td>
<td>R</td>
<td>(Colombo Plan)</td>
</tr>
<tr>
<td>India 57</td>
<td>Maternal and Child Health/Nursing, Uttar Pradesh (Feb. 1955 - )</td>
<td>R</td>
<td>(Colombo Plan)</td>
</tr>
</tbody>
</table>

### Aim of the project

(a) To determine what proportion of infective cases living in crowded urban areas can be rendered non-infective by treatment with drugs suitable for self-administration at home; (b) to determine how long these patients can be kept non-infective; (c) to compare the results of drug treatment of domiciliary patients with those of treatment of hospital patients; (d) later, to study the effects in the community of widespread chemotherapy on ambulant patients; (e) to provide facilities for training in research techniques.

### Assistance provided by WHO during the year

(a) A senior medical officer, an assistant medical officer—a bacteriologist, an administrative officer, an x-ray technician, and two public health nurses; a consultant for three weeks; (b) one twelve-month international fellowship; (c) supplies and equipment.

### Probable duration of assistance

Until 1961.

### Work during the year

A comparative study, lasting a year, was made of sanatorium and domiciliary treatment with a combination of PAS and INH. Some patients have completed a year of treatment and observation, and more than half have completed six months or more. Contacts are examined and followed up regularly.

A second investigation was started to compare results in domiciliary patients of different forms of chemotherapy. Contacts of these patients also are followed up.

With the collaboration of the Nutritional Research Unit of the Indian Council of Medical Research, Coonoor, a dietary investigation was undertaken to compare the diet of the patients in the sanatorium with that of patients treated at home, and to study changes in diet over the period of treatment.

Animal breeding-stock was built up, with the principal aim of studying the virulence of pre-treatment bacillary strains.

A sensitive and reliable test for the presence of INH in urine was developed; it will be used with the test for PAS to compare PAS and INH in domiciliary chemotherapy.

### Maternal and Child Health/Nursing, West Bengal

**Aim of the project.** To strengthen the public-health services in the state and to train nursing and midwifery personnel.

**Assistance provided by WHO and work done during the year.** A public-health nurse, from June. She organized public-health orientation courses for graduate-nurse midwives and made preliminary studies in teaching hospitals with a view to including public health in the basic nursing curriculum.

**Probable duration of assistance.** Until the end of 1957, when the project will be redefined.

### Maternal and Child Health/Nursing, Bihar

**Aim of the project.** To develop the maternal and child health services of the state; to train nursing personnel.

**Assistance provided by WHO during the year.** A maternal and child health officer, two public-health nurses and three midwife tutors.

Two nursing arts instructors were provided under the Colombo Plan.

**Probable duration of assistance.** Until the end of 1957, when the project will be redefined.

### Maternal and Child Health/Nursing, Uttar Pradesh

**Aim of the project.** To develop the maternal and child health services of the state; to train nursing personnel; to establish a paediatric training hospital at the Medical College, Lucknow.

**Assistance provided by WHO during the year.** A paediatrician, two public-health nurses and a paediatric nurse.

**Probable duration of assistance.** Until February 1958, when the project will be redefined.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
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<td>Work during the year. The paediatrician and the paediatric nurse introduced adequate ward routine in the children's hospital. The teaching of paediatrics to undergraduates was reorganized to include the preventive and promotional aspects of child care. The public-health nurses completed their assignments at the end of 1956.</td>
</tr>
<tr>
<td>India 62</td>
<td>R</td>
<td>UNICEF (Colombo Plan)</td>
<td>Maternal and Child Health/Nursing, Kerala (formerly Travancore-Cochin) (Feb. 1955 - ) Aim of the project. To develop the maternal and child health services of the state; to train nursing personnel; to establish a rural health teaching centre for the Medical College, Trivandrum. Assistance provided by WHO during the year. A public-health nurse and a midwife tutor. Probable duration of assistance. Until the end of 1957, when the project will be redefined. Work during the year. Seven schools for midwives were upgraded. Public-health and health education work was done in all primary health centres and sub-centres of the state.</td>
</tr>
<tr>
<td>India 63</td>
<td>R</td>
<td></td>
<td>Post-Graduate Course for Midwife Tutors, College of Nursing, New Delhi (Feb. 1956 - ) Aim of the project. To develop a post-graduate course for training midwife tutors. Assistance provided by WHO during the year. A midwife tutor. Probable duration of assistance. Until mid-1958. Work during the year. The first group of student midwife tutors graduated in April and a second group was enrolled in June. The curriculum was revised to bring about closer co-ordination with that of the sister tutors' course, and some lectures are now attended by both groups of students.</td>
</tr>
<tr>
<td>India 71</td>
<td>R</td>
<td></td>
<td>Assistance to All-India Institute of Mental Health, Bangalore (March 1955 - ) Aim of the project. To establish, at the All-India Institute of Mental Health, Bangalore: (a) a post-graduate training programme in psychiatry and psychiatric nursing, and (b) a programme of research in psychiatry, neurology, and neuro-surgery; to train national counterparts to take over from the WHO personnel. Assistance provided by WHO during the year. (a) Two psychiatric nurses, a professor of psychiatry for three months, and a neuro-psychiatrist; (b) equipment. Probable duration of assistance. Until the end of 1959. Work during the year. The courses for the Diploma in Psychological Medicine and the Diploma in Medical Psychology were continued, with twenty-three and eighteen students respectively. At the end of December 1956, thirteen out of fifteen candidates passed the final examination of the first psychiatric nursing course. In March 1957, a new course was started with eighteen students. The professor of psychiatry helped to formulate long-term and short-term programmes for the Institute. The neuro-psychiatrist joined the project in June. A new shock-treatment centre was established, and a beginning was made with the establishment of a neurological department. The new academic wing at the Institute and a fourth pavilion at the hospital were opened; the outpatients' department was reorganized and facilities for occupational and recreation therapy were increased.</td>
</tr>
<tr>
<td>India 73</td>
<td>TA</td>
<td></td>
<td>Domiciliary Nursing and Midwifery, Lady Hardinge Medical College, New Delhi (July 1956 - ) Aim of the project. To provide, in association with the Lady Hardinge Medical College Hospital, training in domiciliary nursing and midwifery services. Assistance provided by WHO during the year. (a) A domiciliary midwife tutor; (b) a twelve-month international fellowship. Probable duration of assistance. Until the end of 1957.</td>
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<tr>
<td>Project No.</td>
<td>Description</td>
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<tr>
<td>India 76</td>
<td>Maternal and Child Health/Nursing Education, Mysore (Oct. 1956 - )</td>
<td></td>
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<tr>
<td></td>
<td><strong>Aim of the project.</strong> To improve the preventive and curative services, particularly maternal and child health services, of primary and secondary health units throughout the state; to provide training in maternal and child health in the cities of Bangalore and Mysore; to establish three district diagnostic laboratories; to train all categories of health personnel for work in rural areas at the health training centre at Ramanagaram; to expand health education programmes and training programmes for doctors, midwives, nurses and health inspectors.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A maternal and child health officer and a public-health nurse; (b) a twelve-month international fellowship.</td>
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<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1957, when the project will be redefined.</td>
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<tr>
<td></td>
<td><strong>Work during the year.</strong> Maternal and child health services in primary and secondary health centres were improved. A study of nursing education work in the state was completed, and recommendations for improvements were submitted to the Government. Recommendations for upgrading the Vanivilas Children’s Hospital were submitted, and accepted by the Government. A plan for upgrading and reorganizing maternal and child health services in Bangalore city was prepared.</td>
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<tr>
<td>India 77</td>
<td>Public-Health Engineering, University of Madras (Aug. 1955 - )</td>
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<tr>
<td></td>
<td><strong>Aim of the project.</strong> To establish a department of public-health engineering at the University of Madras and to organize post-graduate courses and field training in public-health engineering at the University. To train a national counterpart to take over from the professor provided by WHO.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A professor of public-health engineering; (b) two twelve-month international fellowships; (c) a transport vehicle, and laboratory equipment.</td>
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<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1958.</td>
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<td></td>
<td><strong>Work during the year.</strong> The project made steady progress, and the third post-graduate course in public-health engineering began, with fifteen students. New lecture and drawing halls and a public-health engineering laboratory have been constructed. The staff of the post-graduate course was increased; only the post of assistant professor in chemistry, bacteriology and biology remaining vacant. Short courses for engineers and engineering subordinates were organized as supplements to the post-graduate course.</td>
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<tr>
<td>India 78</td>
<td>Maternal and Child Health/Nursing, Nagpur (May 1955 - )</td>
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<tr>
<td></td>
<td><strong>Aim of the project.</strong> To develop integrated rural health services, particularly maternal and child health services; to improve the teaching of paediatrics at the Nagpur Medical College; to establish a rural-health teaching unit for the College. As a result of the reorganization of the Indian states, the city of Nagpur, formerly the capital of the State of Madhya Pradesh, became part of the State of Bombay. As there is already a WHO assisted maternal and child health/nursing programme for Bombay State (India 79), the work under this project was concentrated on the city of Nagpur.</td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A paediatrician, a public-health nurse and a domiciliary midwifery tutor.</td>
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<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1957, when the project will be redefined.</td>
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<tr>
<td></td>
<td><strong>Work during the year.</strong> The Paediatric Department of the Nagpur Medical College was developed into an independent department, and teaching in paediatrics was reorganized to include the promotional and preventive aspects of child care.</td>
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<td></td>
</tr>
</tbody>
</table>
Project No.  Description
Source of Funds Co-operating Agencies

India 79

TA UNICEF

Maternal and Child Health/Nursing, Bombay (Aug. 1955 - )

Aim of the project. To develop integrated rural health services, particularly maternal and child services; to improve the teaching of paediatrics at the Poona Medical College; to establish a rural health training unit for the College.

Assistance provided by WHO during the year. (a) A maternal and child health officer and three public-health nurse educators; (b) a twelve-month international fellowship.

Probable duration of assistance. Until the end of 1957, when the project will be redefined.

Work during the year. Training of all categories of personnel in the Sirur and Baroda areas was improved and extended.

The nurses attending the public-health orientation course at Sirur were sent to Poona to gain urban experience.

Progress was made with plans for improving the supervision of the nurses and midwives in the centres to which they are assigned after completion of the course.

India 82

R

Short-Term Refresher Courses for Nurses (Hyderabad: 3 Sept. - 3 Nov. 1956; New Delhi: 6 Nov. 1956 - 5 Jan. 1957)

Aim of the project. To plan and conduct two short-term refresher courses for ward sisters, incorporating theoretical and practical instruction adapted to local conditions.

Assistance provided by WHO and work done. The first course, held in Hyderabad from 3 September to 3 November 1956, was described in the Annual Report for 1956.

The second course was held from 6 November 1956 to 5 January 1957 at the Lady Hardinge Medical College Hospital, New Delhi, in conjunction with the domiciliary nursing and midwifery project (India 73). Nineteen nurses from various states in India participated, and half the cost of travel and maintenance expenses was paid by the Organization.

The course consisted of lectures, practical ward assignments, visits to institutions and group discussions.

Emphasis was placed on the need for better ward administration and supervision.

It has been found that employing agencies now readily arrange leave for selected personnel to attend courses of this nature, in spite of shortage of staff and heavy service demands, and that the courses are valuable to the tutors and ward sisters who are responsible for the development of nursing in the Region.

India 87

TA UNICEF

Maternal and Child Health/Public-Health Training, Saurashtra (March 1956 - )

Aim of the project. To extend public-health services in rural areas, particularly maternal and child health services, by means of primary and secondary health units; to improve and increase the services given by maternal and child health centres in urban areas; to improve the standard of training of nurses, midwives, auxiliary nurse-midwives and dais (auxiliary midwives).

Assistance provided by WHO during the year. A maternal and child health officer and a public-health nurse.

Probable duration of assistance. Until February 1958.

Work during the year. Primary centres and sub-centres were established in the first half of 1957 in accordance with schedule. Training facilities for various categories of nursing personnel were extended and improved. Three new children's departments were established. A school for health visitors was established in Rajkot.

India 90

TA

Vital and Health Statistics, Nagpur (March 1956 - )

Aim of the project. To establish in an urban area a demonstration and training unit to serve as a model health statistical service; to train local personnel in health statistics.

Assistance provided by WHO during the year. (a) A health statistician; (b) supplies and equipment.

Probable duration of assistance. Until the end of 1959.
Project No. | Source of Funds | Co-operating Agencies | Description
---|---|---|---

**India 91**

Professors of Preventive and Social Medicine (Feb. 1956 - )

**Aim of the project.** To develop the Departments of Preventive and Social Medicine in four selected medical colleges, integrating preventive medicine into the general curriculum and developing courses of instruction in preventive and social medicine for undergraduates; to establish centres for practical training; to give special training to selected students for teaching and research; to train national counterparts to take over from the WHO professors.

**Assistance provided by WHO during the year.** (a) Two professors in preventive and social medicine—-one for the Assam Medical College and one for the Nagpur Medical College; (b) three two-year international fellowships.

**Probable duration of assistance.** Until 1961.

**Work during the year.** The visiting professor of preventive and social medicine at the Assam Medical College, Dibrugarh, completed his assignment in May. His final report has been forwarded to the Government. A Chair, and staff for a full department, were sanctioned, and a counterpart was appointed. Good co-operation exists between the Department of Preventive and Social Medicine and the local health services.

The professor at the Nagpur Medical College compiled a syllabus accepted by the Faculty, and developed field training and combined research with other Faculty departments. He visited two medical colleges in the state to advise on the development of their preventive and social medicine departments.

Four WHO fellows began their second year of the special course for training professors in preventive and social medicine at Harvard University, and three more started their two-year training in September.

**India 92**

Public Health/Nursing Education, Andhra (Nov. 1956 - )

**Aim of the project.** To improve the existing public-health services, particularly maternal and child health services, in rural areas; to expand them throughout the state and co-ordinate them with community development projects and national extension schemes; to improve and increase training facilities for all categories of health personnel.

**Assistance provided by WHO during the year.** A public-health officer, a paediatrician, a paediatric nurse, a public-health nurse, and a midwife tutor.

**Probable duration of assistance.** Until the end of 1957, when the project will be redefined.

**Work during the year.** Training for all categories of nursing personnel was extended and improved. A school for health visitors was established in Visakhapatnam. The new paediatric hospital was upgraded, and the teaching of paediatrics to undergraduate and post-graduate medical students was reorganized.

**India 93**

Rural Health/Nursing Education, Assam (Oct. 1956 - )

**Aim of the project.** To develop integrated rural health services, particularly maternal and child health services; to establish a rural health unit for training various categories of health personnel, such as sanitaritans and nurses.
**Project No.**

**Source of Funds**

**Co-operating Agencies**

<table>
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<tr>
<th>Description</th>
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</table>

**Assistance provided by WHO during the year.** Two public-health nurses and a sanitarian.

**Probable duration of assistance.** Until the end of 1957, when the project will be redefined.

**Work during the year.** Training for several categories of nursing personnel was extended and improved. A rural health training centre was established at Chabua in connexion with the Department of Preventive and Social Medicine of the Medical College, Dibrugarh.

**India 94**

**Health Education, Singur (Dec. 1956 - )**

**TA**

(For Foundation)

**Aim of the project.** To assist with field programmes in health education procedures for public-health and other personnel at the Singur Health Centre and at the All-India Institute of Hygiene and Public Health, Calcutta.

The Singur project is one of three “Research-cum-Action” projects in India being carried out by the Government with the assistance of the Ford Foundation. Special attention is being given to finding effective health education methods for helping to solve rural sanitation problems. Many students, differing considerably in experience, background, and educational level, come for varying periods to the Centre for training. Health education in Singur is being developed in connexion with health services for malaria, small-pox and tuberculosis prevention and control, and for maternal and child health.

**Assistance provided by WHO during the year.** (a) A health educator; (b) essential equipment.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** Health education classes were arranged for students taking various courses at the All-India Institute of Hygiene and Public Health at Calcutta, for community development health workers, for students from the Calcutta School of Tropical Medicine and the South Calcutta Girls School, and for village volunteers, assistant surgeons of West Bengal, and other groups.

In-service training of the Singur Health Centre staff in health education continued.

**India 95**

**Environmental Sanitation, Kerala (Nov. 1956 - )**

**TA**

**Aim of the project.** To set up a pilot project in a rural area for improving water supplies and excreta disposal; to plan and carry out a sanitation programme, including the design, operation and maintenance of simple, practical and cheap sanitary installations; to organize a programme of health education; to train technicians, sanitarians and other personnel.

**Assistance provided by WHO during the year.** (a) A sanitary engineer and a sanitarian; (b) four international fellowships—three of twelve months and one of six months; (c) equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** A sanitary survey was made of about 10 per cent. of the premises of the project area which includes nine villages with a population of nearly 100,000.

Sixty-five latrines were constructed, and experiments were made for improving them and devising the cheapest adequate type. Preparatory work on village water supplies proceeded.

With the help of the WHO public-health nurses working on project India 62, health education work was undertaken to stimulate the interest and participation of the people in the work.

A school sanitation programme was suggested to the school authorities, who agreed to provide some funds for the purpose.

The sanitary engineer and sanitarian gave lectures on environmental sanitation to health workers and at public meetings.

**India 98**

**Refresher Courses for Nurses, Patna and Delhi (July - Sept. 1957; Nov. 1957 - )**

**R**

**Aim of the project.** To plan and conduct two short-term refresher courses for nurses, incorporating theoretical and practical instruction adapted to local conditions.

**Assistance provided by WHO during the year.** Half the cost of travel and maintenance of twenty ward sisters; assistance from WHO nursing staff in Patna.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>India 99</td>
<td>TA</td>
<td>Nursing Education (Public-Health Integration) (Sept. 1957 - )</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To integrate training in public health in the basic training of nurses; to provide supervised practical observation and experience for student nurses in three selected undergraduate schools of nursing.</td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A public-health nurse for the General Hospital, Madras.</td>
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<td><strong>Work during the year.</strong> Preliminary meetings were held with the sister tutors and ward sisters on modification of the curriculum so as to include the public-health aspects of nursing.</td>
</tr>
<tr>
<td>India 101</td>
<td>R (Indian Council of Medical Research)</td>
<td>Trachoma Pilot Project, Uttar Pradesh (Feb. - May 1956; Oct. 1956 - )</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> (a) To make a survey of trachoma in parts of Uttar Pradesh; (b) to establish a pilot project to study (i) the incidence and pattern of trachoma and the factors favouring transmission, (ii) the minimum effective course of antibiotic treatment and the rate of relapse and reinfection, and (iii) the effect of repeated treatment on the epidemiology of associated conjunctivitis and on the clinical picture of trachoma; (c) to develop a mass control programme.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> A trachomatologist; a statistical consultant for two months.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td><strong>Work during the year.</strong> The general systematic survey and the monthly surveys were completed according to schedule, and the results were analysed. A statistical evaluation of the first year’s work was carried out by a short-term consultant and plans for the second year of the pilot project and for a subsequent mass campaign were formulated and submitted to the Government. A seminar on communicable eye diseases was held in November for national workers scheduled to take part in field work during the second year of operations. Participants from Burma and Thailand also attended the seminar and a training course. The trachomatologist helped in a study of the epidemiological and clinical aspects of trachoma in different parts of India.</td>
</tr>
<tr>
<td>India 102</td>
<td></td>
<td>See India 53.</td>
</tr>
<tr>
<td>India 104</td>
<td>TA</td>
<td>Assistance to Selected Paediatric and Obstetric Departments (Aug. 1957 - )</td>
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<tr>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To improve and upgrade the standard of service in paediatric and obstetric departments of medical schools and hospitals.</td>
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<td></td>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> Supplies and equipment for upgrading paediatric and obstetric departments in various medical schools and hospitals in India.</td>
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<td><strong>Probable duration of assistance.</strong> Until mid-1958.</td>
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<tr>
<td>India 115</td>
<td>R</td>
<td>Fellowships</td>
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<tr>
<td></td>
<td></td>
<td><strong>Anatomy.</strong> A twelve-month international fellowship for study in the United Kingdom.</td>
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<td></td>
<td><strong>Dental health.</strong> A twelve-month international fellowship for study in the United Kingdom.</td>
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<td><strong>Nursing.</strong> A six-month international fellowship for study in New Zealand.</td>
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<td><strong>Pharmacology.</strong> A twelve-month international fellowship for study in the United Kingdom.</td>
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<td>Project No.</td>
<td>Description</td>
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<tr>
<td>India 116</td>
<td><strong>Fellowships</strong></td>
<td></td>
</tr>
<tr>
<td>TA</td>
<td><strong>Bacteriology.</strong> A ten-month international fellowship for study in the United Kingdom and continental Europe.</td>
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<td></td>
<td><strong>Health education.</strong> Two twelve-month international fellowships for study in the United States of America.</td>
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<td></td>
<td><strong>Leprosy.</strong> Two four-month international travel fellowships for study in Nigeria and Ceylon.</td>
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<td></td>
<td><strong>Paediatrics.</strong> Two international fellowships—one of twelve months and one of six months—for study in the United States of America.</td>
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<tr>
<td>India 117</td>
<td><strong>Malaria Institute of India, Delhi (Nov. 1957 - )</strong></td>
<td></td>
</tr>
<tr>
<td>TA</td>
<td><strong>Aim of the project.</strong> To establish a regular exchange of scientific information between the Istituto Superiore di Sanità, Rome, and the Malaria Institute of India, and to provide for the exchange of scientific personnel.</td>
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<td></td>
<td><strong>Assistance provided by WHO and work done during the year.</strong> A short-term consultant was assigned to the Malaria Institute of India, Delhi, for a month in November 1957, to advise on studies on genetics in relation to the problem of resistance of insects to residual insecticides. The Institute is already engaged in long-term research important for current and future programmes for the control and eradication of malaria and filariasis.</td>
<td></td>
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<tr>
<td>India 130</td>
<td><strong>Visiting Paediatrician (Jan. - Feb. 1957)</strong></td>
<td></td>
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<tr>
<td>R</td>
<td><strong>Aim of the project.</strong> To survey and assess the paediatric education programme in India.</td>
<td></td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO and work done.</strong> A paediatrician for six weeks. He visited several medical colleges and maternal and child health centres, holding meetings with administrative medical officers, paediatricians and other staff members. Suggestions were made for improvements in undergraduate and post-graduate teaching in paediatrics. His report has been submitted to the Government.</td>
<td></td>
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<tr>
<td>India 134</td>
<td><strong>Assistance to the Upgraded Department of Paediatrics, Madras Medical College (Nov. 1957 - )</strong></td>
<td></td>
</tr>
<tr>
<td>R</td>
<td><strong>Aim of the project.</strong> To expand, upgrade and re-orient the teaching of paediatrics at the Madras Medical College.</td>
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<tr>
<td>UNICEF</td>
<td><strong>Assistance provided by WHO during the year.</strong> A paediatrician.</td>
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<tr>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1958.</td>
<td></td>
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<tr>
<td>India 140</td>
<td><strong>Tuberculosis National Training Courses (First course: 28 Oct. - 6 Dec. 1957; second course: 11 Nov. - 20 Dec. 1957)</strong></td>
<td></td>
</tr>
<tr>
<td>R</td>
<td><strong>Aim of the project.</strong> To hold two orientation courses on the national tuberculosis control plan and the special techniques which are to be employed.</td>
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<tr>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) Lectures and field demonstrations by WHO field personnel; (b) half the cost of travel and maintenance of forty participants for six weeks.</td>
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<td></td>
<td><strong>Work done.</strong> The orientation courses (each of six weeks) consisted of lectures, field trips and demonstrations. They were given at the three tuberculosis centres at Madanapalle, Delhi and Calcutta. Each had twenty participants, from various states in India, including Assistant Directors of state health services, tuberculosis specialists who will be in charge of state or district centres, and some other tuberculosis and public-health specialists.</td>
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<tr>
<td>India 141</td>
<td><strong>Central Drug Research Institute, Lucknow (May - Aug. 1957)</strong></td>
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</tr>
<tr>
<td>R</td>
<td><strong>Aim of the project.</strong> To provide specialized assistance to the Central Drug Research Institute, Lucknow, in planning and carrying out research in pharmacology, especially with respect to indigenous drugs.</td>
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</tr>
</tbody>
</table>
PROJECT LIST: SOUTH-EAST ASIA

Source of Funds
Co-operating Agencies

Project No.

Description

Assistance provided by WHO. (a) A consultant in pharmacology for three months; (b) drugs.

Work done. The consultant held discussions with the heads of various sections of the Institute on certain of the research projects being conducted.

India

Participation in Regional Meetings

See SEARO 20; SEARO 37.

Indonesia 1

Treponematosis Control (May 1950 - )

Aim of the project. To extend the yaws control programme, and establish a system, appropriate to local conditions, for continuing the work after international assistance has been withdrawn; to integrate yaws control into the public-health services after termination of the mass campaign; later, in connexion with surveillance operations, to develop rural health services.

Assistance provided by WHO during the year. A three-month international travel fellowship.

Probable duration of assistance. Until the end of 1959 (present phase).

Work during the year. The yaws programme has been operated entirely by Indonesian workers since December 1955. Work for the programme was done by the project laboratory at Jogjakarta and by the Venereal-Disease Research Institute at Surabaya. Yaws control work was integrated into the public-health services.

Indonesia 4

Malaria Control Demonstration, Tjilatjap and Semarang (Aug. 1951 - )

Aim of the project. To demonstrate malaria control (in three phases—survey; control operations; resurvey); to set up a research and demonstration centre; to train medical officers, entomologists and auxiliary personnel.

Assistance provided by WHO during the year. A malariologist, five assistant malariologists, an entomologist and a public-health engineer.

Probable duration of assistance. Until the end of 1957, when the project will be amalgamated with Indonesia 32.

Work during the year. Dieldrin was used for spraying instead of DDT; the change-over proved of value in areas where the vector (Anopheles sundaicus) has developed true physiological resistance, but did not appear to give better results where the vector species shows altered behaviour and avoids contact with sprayed surfaces.

The campaign in central Java was reorganized according to the national plan, to afford protection to 2,400,000 people.

The Government assigned paramedical staff to the project as "controllers"; WHO provided five consultant malariologists to supplement this staff and to take charge of malaria surveys and control at the residency level. The senior WHO officers gave advice on the conduct of the provincial programme.

The situation as regards malaria in Indonesia is still difficult, and no data exist for determining accurately the population at risk.

Indonesia 5

Institute of Nutrition, Jakarta (Jan. 1952 - Jan. 1955; July 1957 - )

Aim of the project. Second phase: To study the protein malnutrition problem and to assist the Institute of Nutrition in developing a national nutrition programme.

Assistance provided by WHO and work done during the year. A medical nutritionist for one month. He studied the work of the Institute of Nutrition and the national nutrition programmes, particularly as regards protein malnutrition. He was accompanied by a WHO specialist in eye diseases related to protein malnutrition.

Probable duration of assistance. Until 1959.
### Project No. Source of Funds Co-operating Agencies

#### Indonesia 8A

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Aim of the project.</strong></td>
<td>To expand a previous BCG pilot scheme (part of the original plan of operations) into a nation-wide mass campaign, with forty trained teams in operation by the end of 1956.</td>
</tr>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong></td>
<td>Two BCG nurses (until December 1956).</td>
</tr>
<tr>
<td><strong>Work done.</strong></td>
<td>The BCG campaign began as a pilot project in October 1952. The mass campaign started in November 1953; although WHO participation terminated at the end of 1956, the campaign is being continued with UNICEF assistance. Between November 1953 and December 1956 the WHO team trained 62 mantris (auxiliary health workers) and 143 vaccinators; 6 more mantris and 23 vaccinators were trained by Indonesian doctors. Apart from project staff, 19 doctors have been given theoretical and field training and are now working as supervisors. The forty teams in operation are being maintained until the end of 1957. By the end of March 1957, 11 700 000 tests had been carried out and 3 185 000 vaccinations given. A consolidation plan is under consideration for the use at the regency level (approximately one to one and a half million people) of part-time teams, each consisting of a mantri and a vaccinator. Two pilot areas of this kind are being set up.</td>
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#### Indonesia 8B

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<tr>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Aim of the project.</strong></td>
<td>(a) To survey the extent of the tuberculosis problem; to establish a model tuberculosis service; to train medical and paramedical personnel in diagnosis and prevention; (b) to establish a domiciliary chemotherapy scheme.</td>
</tr>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong></td>
<td>(a) A public-health nurse and a laboratory technician; (b) some essential drugs.</td>
</tr>
<tr>
<td><strong>Work done.</strong></td>
<td>When the project started, a high percentage of tuberculosis (one to two per cent. active cases) was believed to exist among the population of Bandung. There was a small clinic in operation, but it was inadequately staffed and equipped. By the time WHO assistance terminated, a well-planned tuberculosis centre had been set up, where modern diagnostic and control methods can be demonstrated and taught and which provides a good service, including domiciliary chemotherapy and BCG vaccination, for the area of operations. A team of Indonesian doctors, home visitors and technicians has been trained for taking charge of the centre and training further workers. So far, however, little use has been made of the training facilities and it has not been possible to develop survey work or mobile units for case-finding and treatment based on the centre.</td>
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#### Indonesia 9

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<tr>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Aim of the project.</strong></td>
<td>To survey the leprosy situation (1955); to plan and carry out a long-term control programme (1956).</td>
</tr>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong></td>
<td>(a) A leprologist; (b) drugs.</td>
</tr>
<tr>
<td><strong>Probable duration of assistance.</strong></td>
<td>Until the end of 1959.</td>
</tr>
<tr>
<td><strong>Work during the year.</strong></td>
<td>In accordance with recommendations made by the leprologist in 1956, preliminary case-finding and treatment programmes were undertaken in the two pilot areas at Blora and Bekasi, transport and equipment being provided by UNICEF.</td>
</tr>
</tbody>
</table>

#### Indonesia 12

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<tr>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Aim of the project.</strong></td>
<td>To survey the plague situation; to carry out a programme of research to determine the conditions responsible for the persistence of plague; to develop a long-term control programme.</td>
</tr>
<tr>
<td><strong>Assistance provided by WHO during the year.</strong></td>
<td>(a) A consultant; (b) supplies and equipment.</td>
</tr>
<tr>
<td><strong>Probable duration of assistance.</strong></td>
<td>Until the end of 1959.</td>
</tr>
<tr>
<td><strong>Work during the year.</strong></td>
<td>The consultant carried out research into the conditions responsible for the persistence of plague in the country; preliminary findings indicate that wild rodents may maintain the plague reservoir between epidemics. Plans for a control programme were under study at the end of the year.</td>
</tr>
</tbody>
</table>
**PROJECT LIST: SOUTH-EAST ASIA**

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Cooperating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indonesia 13</td>
<td>R</td>
<td></td>
<td>Assistance to Faculty of Medicine, Gadjah Mada University, Jogjakarta and Semarang (Sept. 1953 - )</td>
</tr>
<tr>
<td></td>
<td>(ICA)</td>
<td></td>
<td><strong>Aim of the project.</strong> To develop the Departments of Biochemistry, Pharmacy and Paediatrics on sound lines; to train national counterparts to take over from the professors provided by WHO.</td>
</tr>
<tr>
<td>Indonesia 15</td>
<td>TA</td>
<td></td>
<td>Post-Graduate School of Nursing, Bandung (Jan. 1954 - Sept. 1957)</td>
</tr>
<tr>
<td>Indoneisa 20</td>
<td>TA</td>
<td></td>
<td>Environmental Sanitation (June 1956 - )</td>
</tr>
<tr>
<td>Indonesia 25</td>
<td>TA</td>
<td></td>
<td>Vital and Health Statistics (Aug. 1955 - )</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.**
(a) A professor of pharmacy and pharmaceutical chemistry; (b) an eighteen-month international fellowship; (c) laboratory equipment.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** Six students passed the final examination in pharmacy in February. A six-month course in drug control and analysis was given by the WHO professor.

**Post-Graduate School of Nursing, Bandung (Jan. 1954 - Sept. 1957)**

**Aim of the project.** To organize post-graduate courses in teaching of midwifery and in public-health nursing at the Post-Graduate School of Nursing, Bandung, and at the Rantjabadak City Hospital.

**Assistance provided by WHO during the year.** Two public-health nurses and a midwife tutor.

**Work done.** The courses for training public-health nurses and midwife tutors have been firmly established. The curricula have been revised from time to time to ensure that the training given is adequate, and classes for both courses have been taken together where practicable. Special attention has been given to health education. Areas for field practice have been established in Bandung and in some other centres. Since 1954 thirty public-health nurses and forty-three midwife tutors have graduated, and all are suitably employed. The teaching programmes are being continued by the Indonesian staff.

**Environmental Sanitation (June 1956 - )**

**Aim of the project.** To prepare a co-ordinated plan for environmental sanitation, particularly in rural areas; to devise and construct simple, practical and economical sanitary facilities; to organize a programme of health education on the nature and causes of diseases resulting from faulty environment; to train sanitation personnel.

**Assistance provided by WHO during the year.** (a) A sanitary engineer, a sanitarian and a port-health sanitarian; (b) a twelve-month international fellowship.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** A pilot area was selected, and the site was surveyed. Progress has been made with the construction of simple sanitary facilities.

The WHO team assisted in the preparation of a curriculum for the training of sanitary inspectors. Work on rodent control was started at Tanjok Priok, and preparations were made for training sanitarians in port health work. Draft quarantine rules and regulations were prepared. Improvements in port sanitation were suggested for various ports in the country.

**Vital and Health Statistics (Aug. 1955 - )**

**Aim of the project.** To expand the statistical organization in the Ministry of Health and train key members of the statistical staff; to develop a long-range statistical programme with a sound system of reporting for notifiable diseases, hospital services, and general vital and health statistics; to develop an up-to-date service of vital and health statistics for planning and evaluation of health programmes.

**Assistance provided by WHO during the year.** (a) A health statistician; (b) a twelve-month international fellowship; (c) supplies and equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Another training course for statistical assistants was held and the statistician continued to assist with the teaching of health statistics to medical students in the University of Jakarta. A revised translation of the International Classification of Diseases was issued. Parts of the country were visited with a view to improving vital registration and extending the area of birth and death registration.
Rural health surveys were carried out in several areas, and progress was made in the production of improved schedules and instructions in Bahasa Indonesia. The project staff also assisted the Public Health and Public Works Departments of the city of Jakarta in a population survey of the city. The statistician advised the Venereal Disease Research Institute, the Division of Malaria Control, the Institute of Nutrition and other government bodies on their statistical problems.

Indonesia 27

**Strengthening of Health Services (Health Education) (Feb. 1957 - )**

*Description*

Aim of the project. To extend the health education programme, and to give more training in health education to all categories of health workers; to develop health education materials, including audio-visual aids.

Assistance provided by WHO during the year. (a) A consultant in health education for six months, followed by a health educator; (b) two regional fellowships—one of six months and one of three months; (c) supplies and equipment.

Probable duration of assistance. Until the end of 1959.

Work during the year. The consultant was assigned to the Sub-Division of Health Education in the Ministry of Health; she made a study of health education and submitted recommendations.

The health educator helped to plan and took part in a home economics seminar for workers and teachers in the subject, and also helped to plan the health education aspects of courses for malaria workers, public-health inspectors, and sanitary inspectors. Some assistance was given to a committee on school health set up to organize in-service training of teachers connected with a pilot project in Jakarta.

Indonesia 31

**Trachoma Control (Nov. - Dec. 1954; Nov. 1955 - June 1956; April 1957 - )**

*Description*

Aim of the project. To study in a rural population the incidence and pattern of trachoma and the underlying factors favouring transmission of infection (1954); to ascertain the minimum effective course of antibacterial treatment of the Indonesian type of trachoma and the rate of relapse or reinfection during the follow-up period (1955-1956); to set up a mass control programme based on the experience gained in the pilot project (1957-59).

Assistance provided by WHO during the year. A trachomatologist and a consultant for three weeks.

Probable duration of assistance. Until the end of 1959.

Work during the year. The second phase of the pilot project began in April. The consultant made an evaluation of the results of the first phase of the project.

The preliminary epidemiological survey, consisting of a general systematic survey and repeated monthly surveys, proceeded according to schedule. Treatment of schoolchildren was started in all the treatment areas.

Under the supervision of the Nutrition Institute, a dietary survey was started by two teams, each consisting of a student and two helpers.

A two-week training course was held for twenty-five workers, including medical and paramedical personnel.

Indonesia 32

**Strengthening of Malaria Section, Ministry of Health (May 1955 - )**

*Description*

Aim of the project. To improve and intensify the national malaria programme, which is under the direction of the Malaria Section of the Ministry of Health; to extend the facilities of the Malaria Institute, Jakarta.

Assistance provided by WHO during the year. (a) A malariologist, three assistant malariologists and an entomologist; (b) a six-month regional fellowship.

Probable duration of assistance. Until the end of 1959.

Work during the year. The WHO staff gave advice on the conduct of the provincial campaign and assisted in training personnel. The malariologist acted as adviser for the national programme, which is being carried out in collaboration with the United States International Co-operation Administration (ICA). In September the three assistant malariologists were assigned to take charge of malaria surveys and control work, and assist the Indonesian "controllers".

During the year about nine million people were protected, including seven and a half million in the three provinces of Java.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indonesia 34</td>
<td>R</td>
<td></td>
<td><strong>Assistance to Medan Medical School (Sept. 1956 - )</strong></td>
</tr>
<tr>
<td></td>
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<td></td>
<td><em>Aim of the project.</em> To upgrade the Departments of Anatomy, Physiology and Pharmacology at the Medan Medical School and to develop curricula in these subjects; to improve the pre-clinical training programme; to train national counterparts.</td>
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<td></td>
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<td></td>
<td><em>Assistance provided by WHO during the year.</em> (a) A professor of anatomy and a professor of physiology; (b) supplies and equipment.</td>
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<td></td>
<td><em>Probable duration of assistance.</em> Until the end of 1959.</td>
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<td></td>
<td><em>Work during the year.</em> The professors of anatomy and physiology continued assistance to the training programme. There is still a lack of suitable counterparts. It has been arranged to supply a number of text-books in English.</td>
</tr>
<tr>
<td>Indonesia 35</td>
<td>TA</td>
<td></td>
<td><strong>Paediatric Nursing, Gadjah Mada University, Jogjakarta (Oct. 1956 - )</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Aim of the project.</em> To improve the nursing care of children by better training of students in paediatrics and paediatric nursing at the Gadjah Mada University Hospital.</td>
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<td></td>
<td><em>Assistance provided by WHO during the year.</em> A paediatric nurse tutor.</td>
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<td></td>
<td><em>Probable duration of assistance.</em> Until mid-1958.</td>
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<td></td>
<td><em>Work during the year.</em> Lectures in paediatric nursing were given to medical and nursing students and to graduate nurses attached to the paediatric ward. Nursing procedures were set up, and an in-service training programme established. Plans were made for a follow-up service, based on the maternal and child health centres.</td>
</tr>
<tr>
<td>Indonesia 36</td>
<td>TA UNICEF</td>
<td></td>
<td><strong>Strengthening of Maternal and Child Health Services (Oct. 1956 - )</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Aim of the project.</em> To evaluate the maternal and child health services and training facilities in the country and to plan their extension.</td>
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<td></td>
<td><em>Assistance provided by WHO during the year.</em> A six-month international fellowship.</td>
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<td><em>Probable duration of assistance.</em> Until the end of 1959.</td>
</tr>
<tr>
<td>Indonesia 41</td>
<td>TA</td>
<td></td>
<td><strong>Nursing Adviser (Oct. 1957 - )</strong></td>
</tr>
<tr>
<td></td>
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<td></td>
<td><em>Aim of the project.</em> To assist in strengthening, expanding and co-ordinating programmes for training all categories of nursing and midwifery personnel, and in establishing a Division of Nursing.</td>
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<td></td>
<td><em>Assistance provided by WHO during the year.</em> A nursing adviser.</td>
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<td></td>
<td><em>Probable duration of assistance.</em> Until the end of 1958.</td>
</tr>
<tr>
<td>Indonesia 45</td>
<td>R</td>
<td></td>
<td><strong>Assistance to Faculty of Medicine, Surabaya (Pharmacology) (Sept. 1957 - )</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Aim of the project.</em> To upgrade the Department of Pharmacology at the University of Surabaya and to improve teaching and training facilities.</td>
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<td></td>
<td><em>Assistance provided by WHO during the year.</em> (a) A professor of pharmacology; (b) laboratory equipment and chemicals.</td>
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<td></td>
<td><em>Probable duration of assistance.</em> Until the end of 1959.</td>
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<tr>
<td></td>
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<td></td>
<td><em>Work during the year.</em> Two senior students were appointed as assistant counterparts. Teaching equipment was ordered.</td>
</tr>
<tr>
<td>Indonesia 46</td>
<td>TA</td>
<td></td>
<td><strong>Drug Investigation (Oct. 1956 - May 1957)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Aim of the project.</em> To assist the Institute of Pharmacology to exchange staff and information with other institutions, and to train staff for its pharmacological investigation programme.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><em>Assistance provided by WHO and work done.</em> The professor of Pharmacology assigned to Indonesia 45 assisted with this project. The two fellowships awarded were completed in May 1957.</td>
</tr>
</tbody>
</table>
THE WORK OF WHO, 1957

Indonesia 48

R

Fellowships

Dental health. A twelve-month international fellowship for study in the United States of America.

Health education. Two twelve-month international fellowships for study in the United States of America and Lebanon respectively.

Production of biologicals. A four-month international travel fellowship for study in the United Kingdom, continental Europe and the United States of America.

Radiology and radioisotopes. A twelve-month international fellowship for study in the United Kingdom.

Indonesia 49

TA

Fellowships

Dental health. A twelve-month international fellowship for study in Australia and New Zealand.

Preventive and social medicine. A two-year international fellowship for study in the United States of America.

Indonesia 53

R

National Health-Education Training Course, Bandung (14-24 July 1957)

Aim of the project. To provide further orientation in health education to selected health workers from the various provinces and to persons responsible for teaching health education in the schools and training centres operated by the Ministry of Public Health.

Assistance provided by WHO during the year. Half the cost of board, lodging and travel of thirty-six participants from outside Bandung.

Work done. This first national health education training course was attended by about forty participants from fifteen provincial areas and from the training schools operating under the Ministry of Public Health. It included demonstrations, group discussions, and lectures. Housing and lecture rooms were provided in the basic medical training school in Bandung.

Indonesia

Participation in Regional Meetings

See SEARO 20.

Nepal 1

R

Malaria Control, Rapti Valley (June 1954 - )

Aim of the project. To study the malaria situation and determine suitable control techniques; to carry out indoor spraying with DDT in areas not covered by the United States International Co-operation Administration (ICA); to train personnel in malaria prevention.

Assistance provided by WHO during the year. (a) A malariologist, an entomologist and three auxiliary personnel; (b) a ten-month regional fellowship; (c) a transport vehicle, laboratory equipment and supplies. Probable duration of assistance. Until the end of 1959.

Work during the year. A detailed malariometric survey was carried out and a post-spraying appraisal survey was begun. Training of personnel continued.

Recommendations were made for the expansion of the nation-wide programme being developed by the Government with assistance from the United States International Co-operation Administration.

Nepal 2

TA

Training of Nurses, Kathmandu (Nov. 1954 - )

Aim of the project. To train nurses for institutional, domiciliary and public-health work.

Assistance provided by WHO during the year. (a) Two nurse tutors and a public-health nurse; (b) a two-year regional fellowship. Probable duration of assistance. Until 1961.

Work during the year. Twelve students started their second year of training. Inadequate transportation facilities and other problems reduced the time which the students could spend on the wards, but these difficulties are being gradually overcome.
<table>
<thead>
<tr>
<th>No.</th>
<th>Project Description</th>
</tr>
</thead>
</table>
| 3   | **Training of Health Assistants, Kathmandu (June 1955 -)**  
  *Aim of the project.* To establish a school for health assistants in Kathmandu to give theoretical and practical training; to plan a programme of rural health services which will make the best use of the health assistants.  
  *Assistance provided by WHO during the year.* (a) A medical officer (public-health specialist) and a sanitarian; (b) equipment.  
  *Probable duration of assistance.* Until 1960.  
  *Work during the year.* The first-year students passed the examination admitting them to second-year studies, and twenty more students were enrolled. The second-year students received regular training in hospital and outpatient department clinical work in addition to their public-health subjects. The WHO nurses assigned to the nursing project in Kathmandu helped to train the students in nursing procedures and techniques. |
| 4   | **Assistance to Central Health Directorate (Aug. 1957 -)**  
  *Aim of the project.* To organize the work of the Central Health Directorate and to develop short-term and long-term health plans to meet the country's basic public-health and medical problems.  
  *Assistance provided by WHO and work done during the year.* A public-health adviser, who surveyed the situation and made plans for future work.  
  *Probable duration of assistance.* Until the end of 1959. |
| 5   | **Fellowships**  
  *Public-health administration.* A ten-month regional fellowship for study in India. |
| 13  | **Rural Health Unit, Chiangmai (Nov. 1951 - Dec. 1956)**  
  *Aim of the project.* To establish a rural health service with emphasis on environmental sanitation, maternal and child health, and training of various categories of health personnel. |
### Assistance provided by WHO during the year.

**Aim of the project.** To develop the psychological aspects of psychiatry both as a specialty and as part of general medical practice; to introduce psychology into public-health courses for graduate physicians, medical students and auxiliary workers; to develop modern clinical facilities and practices; to train an understudy to continue the work after WHO assistance is withdrawn.

**Work done.**
- The project was started at the Mental Hospital in Dhonburi, when there was no department of psychology at the University, and training in social work had just begun. A team of three national workers had started a child guidance service in the new mental health clinic in 1953; two of them have been awarded WHO fellowships, and will resume their duties at the clinic on their return.
- The main accomplishments of the project were the further development of the child guidance clinic as part of the mental health clinic; the preparation of psychological tests suitable to conditions in Thailand; the outlining of a programme of further research for future years; and in-service training of the staff of the mental hospital. A six-month post-graduate course in psychiatry, attended by twenty-four students, was held. The psychologist provided by WHO served throughout the project.

### Thailand 21

**Post-Graduate School of Nursing, Bangkok** (April 1954 - )

**Aim of the project.** To establish a post-graduate school for nurses; to organize post-graduate training in public-health nursing and courses in nursing education.

**Assistance provided by WHO during the year.** A public-health nurse tutor and a general nurse tutor.

**Probable duration of assistance.** Until 1961.

**Work during the year.** Twenty-two public-health nursing students and twenty-five nurse tutors graduated in March. Certain administrative and other improvements were made in the nursing service and in the school at the Women's Hospital, where the nurse tutor students receive most of their practical training. To provide adequate facilities for training the public-health nursing students for work in rural areas, a rural centre near Bangkok is being upgraded as a training centre.

### Thailand 24

**Rural Health Programme (Nursing Supervision)** (May 1954 - )

**Aim of the project.** To develop the nursing and midwifery aspects of rural health services, to provide adequate guidance and supervision of nursing and midwifery services.

**Assistance provided by WHO during the year.** A public-health nurse midwife.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** A country-wide scheme for training indigenous midwives was started, and staff in the field were assisted in carrying out their teaching responsibilities. A committee worked on the preparation of uniform record forms and work guides for the nursing and midwifery staff in the rural areas.
Thailand 30

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thailand 30</td>
<td>R UNICEF</td>
<td>Fundamental Education, Ubol (Dec. 1954 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To integrate health education into the fundamental education programme.

**Assistance provided by WHO during the year.** A public-health nurse with experience in health education.

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** The two-year training programme continued, particular attention being given to practical training in the villages. The staff of the school visited a number of the first group of graduates at their duty stations.

Thailand 26

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thailand 26</td>
<td>R (UNESCO)</td>
<td>Leprosy Control, Khon Kaen Province (Oct. 1955 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To organize a pilot project in Khon Kaen Province for demonstrating modern methods of leprosy control, with emphasis on case-finding, domiciliary treatment and surveillance of contacts; to train personnel; to extend the control programme to other parts of the country.

**Assistance provided by WHO during the year.** A leprologist.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The pilot project in Khon Kaen was well received.

There were 5,208 registered leprosy patients under treatment at the end of June. In the centres treatment was administered orally; mobile teams gave treatment by injection in more distant villages. Plans for a rehabilitation project were begun.

A plan was developed for a national leprosy control programme intended to serve, during the next few years, the north-eastern provinces of the country, in which nearly half the total leprosy cases in Thailand are concentrated.

Besides helping with the pilot project, the leprologist gave training to Thai workers.

Thailand 31

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thailand 31</td>
<td>TA</td>
<td>Schools of Nursing, Korat and Pitsanulok (July 1955 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To plan and carry out nursing education programmes; to improve nursing services to meet local needs; to correlate theoretical teaching and teaching in hospital wards, and to give training in public-health nursing, at the schools of nursing in Korat and Pitsanulok.

**Assistance provided by WHO during the year.** Two nurse tutors.

**Probable duration of assistance.** Until April 1958.

**Work during the year.** Assistance to both schools continued. The theoretical teaching of public-health nursing advanced, but progress with practical training was slow. The shortage of graduate staff at both hospitals hampered the training programme, but the position is improving.

Thailand 32

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Thailand 32</td>
<td>TA</td>
<td>School of Nursing, Vajira (Aug. 1957 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To upgrade the education programme of the School of Nursing and the nursing services at the Vajira Hospital.

**Assistance provided by WHO during the year.** Equipment.

**Probable duration of assistance.** Until the end of 1959.

Thailand 34

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thailand 34</td>
<td>TA UNICEF</td>
<td>Maternal and Child Health: Strengthening of Central Health Organization (June 1956 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To evaluate the standard of maternal and child health and school health and the facilities for training maternal and child health personnel; to develop techniques and procedures for maternal and child health work integrated into urban and rural health services.

**Assistance provided by WHO during the year.** A maternal and child health officer.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
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<td></td>
<td><strong>Aim of the project.</strong> To survey the nutritional situation; to investigate the prevalence of endemic goitre and beriberi and carry out a control programme.</td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> A medical nutritionist.</td>
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<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td></td>
<td><strong>Work during the year.</strong> Several studies were made to evaluate rural and urban maternal and child health practices.</td>
</tr>
<tr>
<td><strong>Thailand 37</strong></td>
<td>R</td>
<td></td>
<td><strong>Vital and Health Statistics</strong> (Aug. 1957 - )</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To strengthen the Division of Vital Statistics by developing health statistics and improving the system of reports from rural services.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A health statistician; (b) supplies and equipment.</td>
</tr>
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<td></td>
<td></td>
<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td></td>
<td><strong>Work during the year.</strong> The statistician advised the Director of the Division of Vital Statistics on the use of the punching machinery. A committee, with which he will co-operate, was formed to improve the reporting system from local health services.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Aim of the project.</strong> To strengthen the School of Public Health, Bangkok, by advice on various aspects of public health and teaching of certain subjects.</td>
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<td><strong>Assistance provided by WHO and work done during the year.</strong> A specialist in public health for four months. He assisted in preparing plans for the early establishment of a practical training field for students of the DPH course.</td>
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<td><strong>Probable duration of assistance.</strong> Until 1960.</td>
</tr>
<tr>
<td><strong>Thailand 40</strong></td>
<td>TA</td>
<td></td>
<td><strong>Midwifery Training School, Chiengmai</strong> (Jan. 1956 - Dec. 1956)</td>
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<td><strong>Aim of the project.</strong> To establish a training school for second-class midwives in Chiengmai.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> A midwife tutor.</td>
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<td><strong>Work done.</strong> The curriculum was developed and revised within the limitations laid down by the authorities in Bangkok, and recommendations were made for reducing the number of lectures. Administrative and nursing techniques in all the departments were improved, and standard nursing techniques laid down. Ward routines were worked out and translated. Practical training in domiciliary midwifery was given at the maternal and child health centres in the province.</td>
</tr>
<tr>
<td><strong>Thailand 44</strong></td>
<td>TA</td>
<td></td>
<td><strong>Hospital Statistics</strong> (Nov. 1957 - )</td>
</tr>
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<td><strong>Aim of the project.</strong> To improve the collection of statistical data from hospitals, by training programmes for medical records officers and statistical clerks in hospitals.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> A twelve-month international fellowship.</td>
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<td><strong>Probable duration of assistance.</strong> Until 1961.</td>
</tr>
<tr>
<td>Project No.</td>
<td>Source of Funds</td>
<td>Co-operating Agencies</td>
<td>Description</td>
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</tbody>
</table>
| Thailand 45 | R              |                        | Dental Health (Nov. 1957 - )  
Aim of the project. To organize dental health services and to expand training facilities.  
Assistance provided by WHO during the year. A short-term consultant.  
Probable duration of assistance. Until February 1958. |
| Thailand 46 | R              |                        | Fellowships  
Health education. A twelve-month international fellowship for study in the United States of America.  
Physiotherapy. A twelve-month regional fellowship for study in India.  
Trachoma. Two one-month regional fellowships for study in India.  
Virology (Poliomyelitis laboratory techniques). Two six-month regional fellowships for study in Singapore. |
| Thailand 47 | TA             |                        | Fellowships  
Hospital administration. A fifteen-month international fellowship for study in Lebanon.  
Malaria. A six-month regional fellowship for study in India.  
Production of biologicals. An eleven-month regional fellowship for study in India.  
Public-health administration. A twelve-month international fellowship for study in the United States of America.  
Surgery. Two six-month international fellowships for study in Australia. |
| Thailand   |                |                        | Participation in Regional Meetings  
See SEARO 20. |
EUROPE

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>EURO 25.2</td>
<td>R</td>
<td></td>
<td>Conference on Health Education of the Public, Wiesbaden (27 June - 5 July 1957)</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Aim of the project.</strong> To consider the training in health education needed by physicians, nurses and other health workers, and its place in the basic curriculum, in-service training and refresher courses.</td>
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<td><strong>Assistance provided by WHO and work done.</strong> Thirty-four persons from Austria, Belgium, Denmark, Federal Republic of Germany, Finland, France, Greece, Iceland, Italy, Luxembourg, Morocco, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland, Turkey, United Kingdom of Great Britain and Northern Ireland, and Yugoslavia attended the conference. The main topic discussed was “How should the health worker learn to become a good health teacher.” Eleven WHO temporary advisers gave lectures and led discussions. The meeting was also attended by representatives from UNESCO, the League of Red Cross Societies and the International Union for Health Education of the Public.</td>
</tr>
<tr>
<td>EURO 27.4</td>
<td>R</td>
<td></td>
<td>Postgraduate Training Course in Thoracic Clinical Science and Surgery, Groningen (27 May - 15 June 1957)</td>
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<td><strong>Aim of the project.</strong> To give training in thoracic surgery to medical personnel.</td>
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<td><strong>Assistance provided by WHO.</strong> A lecturer for four days and a fellowship to a student from Yugoslavia.</td>
</tr>
<tr>
<td>EURO 34.2</td>
<td>R (UN)</td>
<td></td>
<td>Training Course on the Rehabilitation of the Physically Handicapped Adult, Nancy (15 Nov. - 7 Dec. 1957)</td>
</tr>
<tr>
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<td><strong>Aim of the project.</strong> To enable medical personnel concerned with rehabilitation services to visit a recently established centre, to attend lectures and to discuss the principles and practices of rehabilitation services with the lecturers and other participants.</td>
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<td><strong>Assistance provided by WHO.</strong> Three lecturers—from Belgium, Poland and Yugoslavia—and eight fellowships for students from Belgium, Greece, Italy, Poland, Romania, Spain, Union of Soviet Socialist Republics, and Yugoslavia.</td>
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<td>The course was organized in collaboration with the Nancy Rehabilitation Centre of the French Social Security; the United Nations Technical Assistance Administration provided a lecturer on the social aspects of rehabilitation.</td>
</tr>
<tr>
<td>EURO 52</td>
<td>TA</td>
<td></td>
<td>Seventh Anaesthesiology Training Course, Copenhagen (Jan. - Dec. 1957)</td>
</tr>
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<td><strong>Aim of the project.</strong> To stimulate the development and to improve the standards of national anaesthesiology services by training courses for medical personnel.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> (a) A temporary adviser for two weeks in September-October; (b) fellowships for ten trainees from Austria, Greece, Spain, Yugoslavia, Egypt, Iran, Iraq, and Portuguese territories in Africa.</td>
</tr>
<tr>
<td>EURO 56</td>
<td>TA</td>
<td></td>
<td>Tuberculosis Training Courses, Istanbul (7 - 26 Oct. 1957)</td>
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<td></td>
<td><strong>Aim of the project.</strong> To provide physicians and nurses with post-graduate training in tuberculosis control and in the public-health and social aspects of tuberculosis, by two training courses at the International Tuberculosis Training and Demonstration Centre in Istanbul.</td>
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<td><strong>Assistance provided by WHO.</strong> (a) A consultant for two and a half months; (b) three lecturers; (c) fellowships for nine trainees from Bulgaria, Israel, Poland, Spain, Syria and Yugoslavia.</td>
</tr>
<tr>
<td>EURO 58.2</td>
<td>R</td>
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<td>Training Course on Occupational Health, Milan (25 Nov. - 21 Dec. 1957)</td>
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<td><strong>Aim of the project.</strong> To provide training for occupational health workers and enable them to visit occupational health services in Milan and other towns of Northern Italy, by means of a course at the Occupational Health Institute Luigi Devoto, Milan, organized in collaboration with the University of Milan.</td>
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<td><strong>Assistance provided by WHO.</strong> (a) Two lecturers; (b) eight fellowships to trainees from Austria, Belgium, Bulgaria, Federal Republic of Germany, France, Poland, Spain, and Yugoslavia.</td>
</tr>
</tbody>
</table>
**Fifth Scandinavian Public-Health Training Course, Göteborg (1 Aug. - 30 Sept. 1957)**

*Assistance provided by WHO and work done.* The programme of the course was similar to that held in 1956 and included maternal and child health, health services for various groups of the population, and health education. WHO provided twenty-two fellowships to health officers from Denmark, Finland, Iceland, Norway and Sweden. Two WHO lecturers taught in the course.

**Rural Public-Health Training Centre, Soissons (1950 - )**

*Aim of the project.* To assist in establishing a rural public-health demonstration centre and to provide training facilities for trainees from France and elsewhere.

*Assistance provided by WHO and work done during the year.* The financial contribution to the statistical and documentary services of the Centre was continued. The Centre was extensively used for field training by the School of Public Health in Paris, both for participants in its rural course and for individual fellows.

**Assistance to Post-Basic Nursing Educational Institutions (1954 - )**

Two twelve-month fellowships for study in the United States of America were awarded to nurses from Denmark and Switzerland.

**Seminar on Veterinary Public Health, Warsaw (25 Nov. - 4 Dec. 1957)**

*Aim of the project.* (a) To develop veterinary public health further in European countries and to establish closer relationship between medical and veterinary services in the control of meat, milk and other animal food products and in work against the zoonoses; (b) to discuss some aspects of the control of zoonoses which had not been dealt with in previous WHO seminars on zoonoses.

*Assistance provided by WHO.* (a) A consultant for three and a half months; (b) eleven lecturers and discussion leaders; (c) grants to thirty-eight participants from Austria, Belgium, Bulgaria, Denmark, Federal Republic of Germany, Finland, France, Greece, Iceland, Ireland, Italy, Morocco, Netherlands, Norway, Poland, Portugal, Romania, Spain, Sweden, Switzerland, Turkey, Union of Soviet Socialist Republics, and Yugoslavia.

*Work done.* This seminar is a follow-up of the seminars on zoonoses and meat hygiene that were held in 1952 and 1954 in Vienna and Copenhagen respectively. Subjects for discussion included the co-ordination of medical and veterinary public-health services in various fields, and various aspects of veterinary public-health programmes aiming at the development of country and inter-country work. The part of the seminar devoted to the discussion of certain zoonoses and their control was attended by numerous Polish veterinarians and doctors. Representatives from FAO and the Office International des Epizooties also attended.

**Study on Child Development (1956 - )**

*Assistance provided by WHO and work done during the year.* A grant for a study of the extent and effects of the problem of maternal deprivation, which was made in the Soissons public-health area under the direction of a French psychiatrist and with the collaboration of the Soissons rural public-health centre (see EURO 61). The study was completed in June 1957. The Regional Officer for Mental Health collaborated in the planning of a comparative survey in West Berlin of the development of children deprived of maternal care and of normal children, this survey was made under the auspices of the Ministry of Health and the Ministry of Youth and Sport in the city.

**Second Training Course for Scandinavian Municipal Engineers, Göteborg and Copenhagen (1 - 31 Aug. 1957)**

*Assistance provided by WHO and work done.* This course was a repetition of the one held in 1956 and covered substantially the same subjects: elements of bacteriology and epidemiology, principles of public-health administration, the chemistry of water and sewage, sewage and water treatment, and refuse disposal. Lecturers from Northern European countries assisted in the teaching, and WHO provided fellowships for twenty municipal engineers from Denmark, Finland, Norway, and Sweden.

**Advisory Group on Human Relations and Mental Health in Industrial Units, Geneva (17 - 19 Dec. 1956)**

*Aim of the project.* To discuss the general problems of mental health in industrial units and the part to be played by members of the occupational health team and professional health workers in this connexion.
<table>
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<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
<tr>
<td></td>
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<td>Assistance provided by WHO. Five temporary advisers. Representatives from the ILO Labour Management Relations Division and the Occupational Safety and Health Division attended the meeting.</td>
</tr>
<tr>
<td>EURO 100.3</td>
<td></td>
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<td><strong>Training Course on Radiation Protection, Mol, Belgium (30 Sept. - 31 Oct. 1957)</strong></td>
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<td><strong>Aim of the project.</strong> To provide training for health physicists and health personnel responsible for the protection of workers in atomic energy establishments.</td>
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<td>Assistance provided by WHO. (a) Five lecturers (three from the United States of America, one from the United Kingdom of Great Britain and Northern Ireland, and one from Norway); (b) fellowships for twenty-two persons from Austria, Belgium, Bulgaria, Public Republic of Germany, France, Greece, Italy, Netherlands, Poland, Portugal, Switzerland, Turkey, Union of Soviet Socialist Republics, and Yugoslavia, and to four from the Eastern Mediterranean Region (Egypt, Iran, Iraq and Lebanon).</td>
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<td><strong>Work done.</strong> This course was organized in collaboration with the Belgian Government and the Atomic Energy Commission of the United States of America. Instruction was given on the general principles of health physics, on supervision at reactors and radiochemical laboratories, and on monitoring methods and dosimetry. The course also dealt with safety problems in uranium and plutonium factories, environmental hazards and reactor site selection, waste disposal and safety factors in laboratory design. It was conducted by a faculty composed of teachers from the Health Physics Division of the Oak Ridge National Laboratory, United States of America, and from European centres.</td>
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<tr>
<td>EURO 106</td>
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<td><strong>Seminar on the Nurse in Industry, London (25 April - 4 May 1957)</strong></td>
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<tr>
<td></td>
<td>(ILO)</td>
<td></td>
<td><strong>Aim of the project.</strong> To collect information on occupational health nursing in European countries; to define the role of the nurse in the occupational health team and the professional education she requires; to exchange views and consider what is required for the development of services.</td>
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<td>This seminar, the third of a series, was organized jointly with the International Labour Organisation, and was held at the Ministry of Labour, London.</td>
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<td>Assistance provided by WHO. (a) A consultant organizer for six weeks; (b) six lecturers; (c) grants to thirty-one industrial medical officers, public-health officers, medical inspectors of factories, industrial nurses and social workers, from Belgium, Bulgaria, Federal Republic of Germany, Finland, France, Italy, Luxembourg, Netherlands, Norway, Poland, Sweden, Switzerland, United Kingdom of Great Britain and Northern Ireland, and Yugoslavia.</td>
</tr>
<tr>
<td>EURO 107.2</td>
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<td></td>
<td><strong>Malaria Conference, Belgrade (for Eastern and South-Eastern European Countries) (26 - 29 March 1957)</strong></td>
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<td><strong>Aim of the project.</strong> To co-ordinate programmes for the eradication of malaria in the countries of eastern and south-eastern Europe, and to accelerate eradication in that area.</td>
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<td>Assistance provided by WHO. Grants to fifteen participants from Albania, Bulgaria, Greece, Romania, Turkey, the Union of Soviet Socialist Republics, and Yugoslavia.</td>
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<td><strong>Work done.</strong> The conference, which was the second malaria conference for the eastern and south-eastern European countries, was organized in collaboration with the Yugoslav Government. Statements made and documents provided by participants showed that the malaria programmes are progressing well in this part of Europe and that in all the participating countries the objective is eradication of the disease. It was also noted that the resistance of vectors to insecticides has been found only in Greece and that, even there, it has not up to the present proved an insurmountable obstacle to eradication. The report of the conference was distributed to all participants and governments concerned.</td>
</tr>
<tr>
<td>EURO 108.1</td>
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<td><strong>Seminar on the Mental Health of the Subnormal Child, Oslo (25 April - 3 May 1957)</strong></td>
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<tr>
<td></td>
<td>(UN)</td>
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<td><strong>Aim of the project.</strong> To discuss the mental health problems of subnormal children and their families, and the help needed for such children to find their place in society.</td>
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<td>Assistance provided by WHO. (a) A consultant for three weeks; (b) five lecturers and discussion leaders; (c) grants to thirty-four participants from Austria, Denmark, Federal Republic of Germany, Finland, Iceland, Ireland, Netherlands, Norway, Poland, Sweden, Switzerland, United Kingdom of Great Britain and Northern Ireland, and Yugoslavia.</td>
</tr>
</tbody>
</table>
EURO 109

**Description**

**Neonatal Problems**

WHO provided three lecturers for the Study Meeting on Neonatal Problems, organized by the School of Puericulture of the Faculty of Medicine, Paris, and held in Paris from 13 to 16 October 1957.

EURO 110

**Description**

**European Schools and Training Centres of Public Health (Jan. 1956 - )**

*Aim of the project.* To establish closer co-operation between European training institutions through a programme of exchange of teaching personnel and study visits.

*Assistance provided by WHO during the year.* (a) Two visiting lecturers for teaching courses in Leyden and Madrid; (b) seven fellowships to members of the teaching staff at Vienna, Paris, Nancy, Hamburg, and Zagreb.

EURO 111.1

**Symposium on the Public-Health Aspects of Chronic Diseases, Amsterdam (30 Sept. - 5 Oct. 1957)**

*Aim of the project.* To make a preliminary evaluation of the problem of chronic diseases, particularly in persons between 40 and 64 years of age; to discuss the general public-health aspects of chronic diseases and certain particular aspects such as epidemiology, early detection, prevention, care, and rehabilitation, in certain chronic diseases taken as examples of the whole group; to prepare a list of priorities for possible future action against chronic diseases.

*Assistance provided by WHO and work done.* (a) A consultant for fourteen weeks for the preparation of an introductory paper on the public-health problem of chronic diseases and for drafting the report on the symposium; (b) seven lecturers; (c) grants to thirteen participants from Austria, Belgium, Federal Republic of Germany, Finland, France, Italy, Luxembourg, Netherlands, Norway, Poland, Sweden, and the United Kingdom of Great Britain and Northern Ireland. Two observers from the Leyden Institute for Preventive Medicine and the Amsterdam Institute of Bacteriology and Hygiene also attended.

EURO 113

**Seminar on the Nurse in the Psychiatric Team, Noordwijk (4 - 15 Nov. 1957)**

*Aim of the project.* To discuss the training of the psychiatric nurse and her place in hospital and community mental health programmes.

*Assistance provided by WHO.* (a) A consultant for eleven weeks; (b) five lecturers and discussion leaders; (c) grants to forty-two participants from Belgium, Bulgaria, Denmark, Federal Republic of Germany, Finland, France, Greece, Italy, Netherlands, Norway, Poland, Portugal, Spain, Sweden, Switzerland, Union of Soviet Socialist Republics, United Kingdom of Great Britain and Northern Ireland, and Yugoslavia.

*Work done.* The seminar dealt with the role of the psychiatric nurse in all types of mental health work, and the psychiatric services current in European countries. The mental health services in the Netherlands were examined in greater detail, in order to provide material for discussion. The role of each professional worker in the psychiatric team was considered; the functions of the psychiatric nurse were given particular attention and certain conclusions drawn with regard to the basic and post-basic training of psychiatric nurses.

Nine representatives from the Netherlands Mental Health Services took part in the seminar.

EURO 114

**Conference on Air Pollution, Milan (6 - 14 Nov. 1957)**

*Aim of the project.* To survey the nature, causes and effects of air pollution in European countries and to suggest means for its prevention and control, including legislation, engineering methods, appropriate training in control work for public-health personnel and education of the public.

*Assistance provided by WHO.* Thirty-three participants from Austria, Belgium, Bulgaria, Denmark, Federal Republic of Germany, Finland, France, Greece, Ireland, Luxembourg, Netherlands, Norway, Poland, Portugal, Spain, Switzerland, Turkey, United Kingdom of Great Britain and Northern Ireland, Yugoslavia and Italy (the host country), and an observer from the European Coal and Steel Community took part in the conference. WHO provided three lecturers, a consultant for six weeks to draft the report on the conference, and grants to participants.
**THE WORK OF WHO, 1957**

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
<tr>
<td>EURO 115 R</td>
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<td></td>
<td>Assistance to Training Institutions for Sanitary Engineers (1956 - )</td>
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<td><strong>Aim of the project.</strong> To strengthen the teaching of sanitary engineering by providing lecturers, and awarding fellowships to members of the teaching staff; to organize and promote training courses for sanitary engineers.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> (a) Two lecturers who taught in a course, given at the Institut Pasteur in Lille from 13 to 29 May, on the bacteriological analysis of milk; (b) four fellowships to Italian civil engineers for attendance at a course in sanitary engineering organized by the University of Naples for the academic year 1956-57, and a fellowship of seven weeks to an Italian engineer for study in Switzerland, Germany and the Netherlands.</td>
</tr>
<tr>
<td>EURO 118.2 R (UN)</td>
<td></td>
<td></td>
<td>Prevention of Crime and Treatment of Offenders</td>
</tr>
<tr>
<td>EURO 124 R</td>
<td></td>
<td></td>
<td>Maternal and Child Health</td>
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<tr>
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<td>Grants were made to four participants from Greece, Morocco, Turkey and Yugoslavia in the Seminar on Maternal and Child Health held in Cairo from 25 November to 6 December 1957 (see EMRO 13).</td>
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<tr>
<td>EURO 126 TA (ILO)</td>
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<td></td>
<td>Industrial Hygiene</td>
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<td>WHO provided, for four months starting in September 1957, a consultant to assist in staffing the Industrial Hygiene Laboratory of the Institute of Labour established in Istanbul with the collaboration of ILO.</td>
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<td><strong>Aim of the project.</strong> To train junior laboratory workers in virus diagnostic methods and their application.</td>
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<td><strong>Assistance provided by WHO and work done.</strong> In order to increase the number of participants and facilitate their practical work, two courses were held—one in English at the London School of Hygiene and Tropical Medicine, the other in French at the Institut Pasteur in Paris. The course in London was attended by twelve laboratory workers from Austria, Federal Republic of Germany, Iceland, Ireland, Italy, Norway, Poland, Switzerland, Turkey and Yugoslavia. Eleven trainees, from Austria, Bulgaria, Italy, Luxembourg, Poland, Portugal, Romania, Spain, Turkey, and Yugoslavia attended the course held in Paris. WHO contributed two lecturers to each course, and fellowships for the trainees.</td>
</tr>
<tr>
<td>EURO 128 R</td>
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<td>Advisory Group on Public-Health Laboratory Services, Moscow (14 - 19 Oct. 1957)</td>
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<td><strong>Aim of the Project.</strong> To discuss the organization and work of various types of public-health laboratory services in European countries; to study how they might be further developed and the ways in which WHO might promote international collaboration for their benefit.</td>
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<td><strong>Assistance provided by WHO.</strong> (a) A consultant for one month to help to prepare the meeting; (b) grants to the six participants, who were selected from persons responsible for the administration of public-health laboratory services in the following countries; Denmark, Netherlands, Poland, Portugal, Union of Soviet Socialist Republics, United Kingdom of Great Britain and Northern Ireland.</td>
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<tr>
<td>EURO 141.1 R (International Children’s Centre)</td>
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<td></td>
<td>School Health</td>
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<td>WHO provided fellowships to two Yugoslav nurses to attend the training course in School Health Problems which was organized by the International Children’s Centre, and held in Paris from 15 January to 10 February 1957.</td>
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<tr>
<td>EURO 141.2 R (International Children’s Centre)</td>
<td></td>
<td></td>
<td>Social Paediatrics</td>
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<td>WHO provided fellowships to five physicians from Greece, Portugal, Spain, Turkey and Yugoslavia to attend the Training Course on Social Paediatrics organized by the International Children’s Centre. The course, which lasted from 8 April to 1 July 1957, was held in Paris but included visits to Poland and Czechoslovakia.</td>
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<td>Project No.</td>
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</tbody>
</table>
| EURO 141.3  | Care of Premature Infants  
WHO provided a three-month fellowship to a paediatric nurse from Austria to attend the Training Course on the Care of Premature Infants, organized by the International Children's Centre and held in Paris from 1 October to 31 December 1957. |
| EURO 141.4  | Maternal and Child Health  
WHO provided fellowships to five public-health nurses from Bulgaria, Poland, Portugal, Turkey and Yugoslavia for attendance at the Training Course on Maternal and Child Health Problems, organized by the International Children's Centre and held in Paris from 7 October to 14 December 1957. |
| EURO 141.5  | Rehabilitation of Handicapped Children  
WHO provided fellowships to two persons, from Spain and Yugoslavia, for attendance at the training course for Health Administrators and Directors of Rehabilitation Centres for Children, organized by the International Children's Centre and held in Paris from 14 October to 3 November 1957. |
| EURO 144    | Training in Child Psychotherapy (1957 - )  
*Aim of the project.* To strengthen child psychotherapeutic services in certain European countries by providing fellowships and training courses.  
*Assistance provided by WHO during the year.* (a) A temporary adviser to pay regular visits to Barcelona for training a group in that city; (b) a twelve-month fellowship to a child-psychotherapist from Italy. |
| EURO 149    | Training Course for Industrial Nurses, London (1 Oct. 1957 - )  
*Aim of the project.* To promote the training of nurses for occupational health work in Europe.  
*Assistance provided by WHO and work done during the year.* This course, to last until 31 March 1958, was organized as a follow-up of the Seminar on the Nurse in Industry, which took place in London from 25 April to 4 May 1957 (see EURO 106). The programme, which included theoretical and practical work, was specially arranged for an international group of students. The Royal College of Nursing, London, was responsible for running the course and the teaching was given by members of the Faculty of the College with the assistance of two WHO lecturers who conducted a seminar at the end of the course. WHO provided fellowships for nine trainees from Belgium, Denmark, Federal Republic of Germany, Italy, Netherlands, Norway, Poland, Switzerland, and Yugoslavia. |
| EURO 150    | Social Medicine  
WHO provided a lecturer in social medicine for the Seminar on The Relation between Social Research Planning and Policy, organized by the United Nations and held at The Hague from 27 October to 3 November 1957. |
| EURO 152    | Assistance to Refugees  
WHO provided a discussion leader for the Seminar on the Application of Basic Casework Principles to Work with Refugees, held in Feldafing, Bavaria, from 8 to 21 September 1957. |
| EURO 154    | Tuberculosis Survey Team (Nov. 1957 - )  
*Aim of the project.* To assist various countries in Europe in making tuberculosis surveys and in evaluating their tuberculosis programmes, so as to develop national tuberculosis services and increase international co-operation in the inter-country tuberculosis control programme in Europe.  
*Possible duration of assistance.* Until the end of 1959. |
| EURO 159    | Water Pollution  
WHO provided a temporary adviser to prepare a report on water pollution for a meeting of experts to be convened by the Economic Commission for Europe early in 1958. |
Albania  
**Participation in Regional Courses and Meetings**  
See EURO 107.2.

Algeria 1  
**Communicable Eye Disease Control (1956 - )**  
*Aim of the project.* To establish a pilot sector for the training of personnel and the development of effective control measures against seasonal epidemic conjunctivitis and trachoma.  
*Assistance provided by WHO during the year.* A follow-up visit by a short term consultant.  
*Work done during the year.* The plan of operations previously signed was revised, but the start of the project was again postponed owing to unfavourable conditions.

Austria 4.5  
**Rehabilitation of Handicapped Children (Nov. 1952 - )**  
*Assistance provided by WHO and work done during the year.* A WHO consultant and experts from the United Nations Technical Assistance Administration and ILO, made a survey and submitted recommendations to the Government.

Austria 4.6  
**Child Psychiatry (Nov. 1952 - )**  
*Assistance provided by WHO during the year.* Three fellowships—two of three months for study in the United Kingdom, and one of two weeks for study in Switzerland.

Austria 4.10  
**Sera and Vaccine Production (Sept. 1954 - )**  
*Assistance provided by WHO during the year.* A one-month fellowship to study the production of BCG and dried smallpox vaccine in France.

Austria 11  
**Fellowships**  
*Bacteriology and serology.* A three-month fellowship for study in Denmark and Germany.  
*Hospital administration.* Ten one-month fellowships to a group of hospital administrators for a study tour in Germany, Denmark and Switzerland.  
*Public-health laboratory services.* Two fellowships—one of three months for study in Switzerland; the other of four months for study in Germany.  
*Rehabilitation.* A three-month fellowship for study in the United States of America.

Austria 12  
**Maternal and Child Health: Premature Infants (Oct. 1957 - )**  
*Assistance provided by WHO and work done during the year.* A consultant for one month, to discuss plans, including requirements for equipment, with the Government.

Belgium 9  
**Fellowships**  
*Diabetes.* A three-month fellowship for study in the United States of America.  
*Endocrinology.* A three-month fellowship for study in the United States of America.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Functioning of the artificial heart. A two-month fellowship for study in the United States of America.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Maternal and child health. A three-month fellowship to study paediatrics in the United States of America.</td>
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<td></td>
<td></td>
<td></td>
<td>Mental health. A three-month fellowship to study psychiatry and psychotherapy in Switzerland.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Nursing. Two fellowships—one of three months for study in Norway, Sweden, Finland and the United Kingdom; the other of three weeks for study in Denmark and Finland.</td>
</tr>
<tr>
<td>Belgium</td>
<td>Participation in Regional Courses and Meetings</td>
<td>See EURO 25.2; EURO 34.2; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 113; EURO 114; EURO 149.</td>
<td></td>
</tr>
<tr>
<td>Bulgaria</td>
<td>Participation in Regional Courses and Meetings</td>
<td>See EURO 56; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 107.2; EURO 113; EURO 114; EURO 127.2; EURO 141.4.</td>
<td></td>
</tr>
<tr>
<td>Denmark 8</td>
<td></td>
<td>National Training Course in Psychiatry, Copenhagen (1953 - )&lt;br&gt;Aim of the project. To strengthen national psychiatric services through fellowships and refresher courses for Danish psychiatrists.</td>
<td>Assistance provided by WHO during the year. A four-month fellowship to the Deputy Superintendent of a mental hospital for study in the United Kingdom, the Netherlands, Germany and Switzerland.</td>
</tr>
<tr>
<td>Denmark 11</td>
<td>Fellowships</td>
<td>See EURO 77.</td>
<td></td>
</tr>
<tr>
<td>Denmark</td>
<td>Participation in Regional Courses and Meetings</td>
<td>See EURO 25.2; EURO 60; EURO 85.2; EURO 93; EURO 108.1; EURO 113; EURO 114; EURO 128; EURO 149.</td>
<td></td>
</tr>
<tr>
<td>Finland 12</td>
<td>Fellowships</td>
<td>See EURO 25.2; EURO 60; EURO 85.2; EURO 93; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114.</td>
<td></td>
</tr>
<tr>
<td>Finland</td>
<td></td>
<td></td>
<td>Child psychology. A six-month fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Clinical and nuclear chemistry. Three fellowships—one of three months and two of six months, for study in Germany, the United Kingdom, and Switzerland respectively.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Hospital administration. A one-month fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Poliomyelitis. A two-month fellowship for study in the United States of America.</td>
</tr>
<tr>
<td>France 28</td>
<td>Fellowships</td>
<td>See EURO 25.2; EURO 60; EURO 85.2; EURO 93; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114.</td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Alcoholism. Two three-week fellowships for study in Denmark and Sweden.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Blood transfusion. A four-week fellowship for study in Sweden and Denmark.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Child psychiatry. A three-week fellowship for study in Belgium and the Netherlands.</td>
</tr>
</tbody>
</table>
### Project No.

<table>
<thead>
<tr>
<th>Description</th>
<th>Co-operating Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Drug control.</strong></td>
<td>A three-week fellowship for study in Denmark, Sweden and Norway.</td>
</tr>
<tr>
<td><strong>Endemico-epidemic diseases.</strong></td>
<td>Two fellowships—one of two weeks for study in Switzerland, the other of three weeks for study in Denmark and Sweden.</td>
</tr>
<tr>
<td><strong>Hospital organization and construction.</strong></td>
<td>Five fellowships of two to four weeks for study respectively in Finland and Germany; Germany; Norway, Sweden and Denmark; Belgium and the Netherlands; Switzerland.</td>
</tr>
<tr>
<td><strong>Housing.</strong></td>
<td>A three-week fellowship for study in Italy.</td>
</tr>
<tr>
<td><strong>Infectious diseases.</strong></td>
<td>A two-week fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td><strong>Malaria.</strong></td>
<td>A one-month fellowship for study in Italy.</td>
</tr>
<tr>
<td><strong>Maternal and child health.</strong></td>
<td>A two-week fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td><strong>Mental health.</strong></td>
<td>Two fellowships—one of three weeks for study in the Netherlands, the other of nine weeks for study in the United States of America.</td>
</tr>
<tr>
<td><strong>Nutrition.</strong></td>
<td>Two two-week fellowships (one to a candidate from Algeria) for study in France and Switzerland respectively.</td>
</tr>
<tr>
<td><strong>Poliomyelitis.</strong></td>
<td>Three fellowships, one of three weeks, one of six weeks, one of two months, for study in Italy; Switzerland and Denmark; and the United States of America, and Canada respectively.</td>
</tr>
<tr>
<td><strong>Radiography.</strong></td>
<td>A one-month fellowship for the study of radio-photography in Sweden and Denmark.</td>
</tr>
<tr>
<td><strong>Rehabilitation.</strong></td>
<td>A three-week fellowship for study in Italy.</td>
</tr>
</tbody>
</table>

### France

**Participation in Regional Courses and Meetings**

*See EURO 25.2; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 111.1; EURO 113; EURO 114*

### Germany 16

**Fellowships**

*Communicable diseases.** A six-month fellowship for study in the United States of America.

*Drug control.** A five-week fellowship for study in Sweden, the United Kingdom, and France.

*Health statistics.** A two-month fellowship for study in Denmark, the United Kingdom, and the Netherlands.

*Mental health.** Two fellowships—one of four months for study in the United States of America; the other, of two months, for the study of neuropsychiatry in France.

*Poliomyelitis.** A two-month fellowship for study in the United States of America and Canada.

*Public-health administration.** A nine-month fellowship for study in the United Kingdom.

*Tuberculosis.** Two four-week fellowships for study in France and Belgium.

### Germany 17

**Assistance to Training Institutions for Occupational Health (Oct. 1957)**

*Aim of the project.** To promote occupational health services, and to further the training of industrial medical officers.

*Assistance provided by WHO.** Three lecturers for two days for a national study group on occupational health services, held in Cologne on 15 and 16 October.

### Germany

**Participation in Regional Courses and Meetings**

*See EURO 25.2; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 127.1; EURO 149.*

### Greece 3

**Rehabilitation of Handicapped Children (Sept. 1952 - )**

*Aim of the project.** To establish a national rehabilitation plan including improvement of facilities for diagnosis and treatment, particularly of handicapped children.
### Project List: Europe

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Greece 6.1** | TA | **Tuberculosis Control** (June 1952 - Nov. 1957)  
*Assistance provided by WHO during the year.*  
X-ray equipment.  
*Work done.* A number of dispensaries have been equipped, reorganized and improved and a national tuberculosis centre has been established. The control of tuberculosis in Greece is now carried out entirely from national resources and the standard is considerably higher than before the project. |
| **Greece 13** | TA | **Rural Sanitation in Maternal and Child Health Projects** (1955 - )  
*Assistance provided by WHO during the year.*  
(a) A consultant in environmental sanitation for five weeks;  
(b) two fellowships, one of three months and the other of five months.  
*Work during the year.* Steady and satisfactory progress was made in the construction of water supply systems and latrines. The consultant assisted in initiating an evaluation of the results, based on the data collected by the governmental authorities supervising the project. |
| **Greece 17** | TA | **Training of Nursing Instructors** (1956 - )  
*Assistance provided by WHO during the year.*  
Extension, by six and ten months respectively, of two fellowships awarded in 1956 to enable the holders to obtain bachelor degrees in nursing, to qualify them for responsibilities, on their return, in connexion with the future post-basic school of nursing. |
| **Greece 18** | TA | **Hospital Administration and Management** (1957)  
*Assistance provided by WHO.* A short-term consultant to advise the Government on hospital administration and management. |
| **Greece 20** | R | **Mental Health** (1956 - )  
*Assistance provided by WHO and work done during the year.* To follow up a visit made in 1956, a consultant visited other mental hospitals and psychiatric services in Greece and held discussions with the representatives of the Government concerning their proposed new legislation in this field. He also gave several lectures. His report was sent to the Government.  
*Probable duration of assistance.* 1958 (further visit by consultant). |
| **Greece 21** | R | **Fellowships**  
*Drug control.* A twelve-month fellowship for study in the United States of America, Canada, and various places in Europe. |

### Participation in Regional Courses and Meetings

*See* EURO 25.2; EURO 34.2; EURO 52; EURO 85.2; EURO 100.3; EURO 107.2; EURO 113; EURO 114; EURO 124; EURO 141.2; EMRO 13.

### Iceland 7

**Fellowships**  
*Neurosurgery.* A twelve-month fellowship for study in Denmark and Germany.  
*Poliomyelitis.* A four-and-a-half-month fellowship for study in the United States of America and the United Kingdom.
Iceland

Participation in Regional Courses and Meetings
See EURO 25.2; EURO 60; EURO 85.2; EURO 108.1; EURO 127.1.

Ireland

Fellowships

Dental health. A one-month fellowship for study in Sweden, Norway, and Denmark.

Medical education. A six-week fellowship for study in the United States of America.

Mental health. Two one-month fellowships for study in the United Kingdom.

Nursing. A three-month fellowship for study in Denmark, Sweden, Finland and Norway.

Public-health services. Three one-month fellowships for study in the United Kingdom.


Port sanitation. A one-month fellowship for study in the Netherlands, Belgium and the United Kingdom.

Surgery. Two six-week fellowships for study in the United States of America.

Tuberculosis. A one-month fellowship for study in Italy.

Participation in Regional Courses and Meetings
See EURO 85.2; EURO 108.1; EURO 114; EURO 127.1.

Italy

Rehabilitation of Handicapped Children (1954 -

Aim of the project. To establish a national rehabilitation plan, particularly for handicapped children, and to strengthen and expand facilities for rehabilitation throughout the country.

Assistance provided by WHO and work done during the year. A consultant visited Italy for four weeks in June to advise on the further development of the project. He helped with a two-month training course for physiotherapists, held at the Rome centre of the Fondazione Pro Juventute di Don Carlo Gnocchi, on the rehabilitation of children suffering from the effects of poliomyelitis.

Fellowships

Bacteriology. A six-week fellowship for study in France and a three-month fellowship for study in the United Kingdom.

Health education. A one-month fellowship for study in France.

Malacology. A three-month fellowship for study in France, the United Kingdom and Denmark.

Mental health. A twelve-month fellowship for study in the United Kingdom.

Public-health administration. A ten-month fellowship for study in the United Kingdom.

Rehabilitation. Two fellowships—one of three months and one of one month, for study in the United Kingdom and France respectively.

Tuberculosis. A three-month fellowship for study in France.

Participation in Regional Courses and Meetings
See EURO 115; EURO 144.

Luxembourg

Participation in Regional Courses and Meetings
See EURO 25.2; EURO 106; EURO 111.1; EURO 114; EURO 127.2.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
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</thead>
<tbody>
<tr>
<td>Morocco 1</td>
<td>TA UNICEF</td>
<td><strong>Communicable Eye Disease Control</strong> (March 1953 - )&lt;br&gt;&lt;br&gt;<strong>Aim of the project.</strong> To develop a nation-wide campaign for the control of trachoma and seasonal conjunctivitis using the following methods: mass antibiotic treatment and prophylaxis of the population in hyperendemic areas; systematic case-finding, treatment and follow-up of trachomatous children in schools throughout the country; health education; a programme of epidemiological, therapeutic and laboratory studies designed to develop more effective, simpler, or more economical methods of control.&lt;br&gt;&lt;br&gt;<strong>Assistance provided by WHO during the year.</strong> (a) An ophthalmologist and a statistician; (b) a short-term consultant in communicable eye diseases; (c) a two-week fellowship for study in the United Kingdom.&lt;br&gt;&lt;br&gt;<strong>Work during the year.</strong> The school treatment programme was extended to cover 170,000 children. The different operations comprising the summer mass campaign against seasonal epidemic conjunctivitis and trachoma covered a population of more than a million. A comprehensive report on the work was prepared for publication.</td>
</tr>
<tr>
<td>Morocco 2</td>
<td>TA UNICEF</td>
<td><strong>Syphilis Control</strong> (Aug. 1954 - )&lt;br&gt;&lt;br&gt;<strong>Aim of the project.</strong> To reduce the high incidence of syphilis, especially among mothers and children.&lt;br&gt;&lt;br&gt;<strong>Assistance provided by WHO during the year.</strong> (a) A statistician for six months; (b) a consultant for six weeks.&lt;br&gt;&lt;br&gt;<strong>Work during the year.</strong> The campaign, which in previous years covered in the main the southern parts of the country, was extended to the areas situated south-east of the Atlas where serological testing of the population was carried out. The consultant visited the project in November to draw up a plan of operations for further control and mass campaigns during the next two years.</td>
</tr>
<tr>
<td>Morocco 9</td>
<td>TA UNICEF</td>
<td><strong>Training of Public-Health Personnel</strong> (Oct. 1957 - )&lt;br&gt;&lt;br&gt;<strong>Aim of the project.</strong> To train various categories of personnel, principally professional and auxiliary nursing personnel, for the maternal and child health services.&lt;br&gt;&lt;br&gt;<strong>Assistance provided by WHO during the year.</strong> A nursing adviser to assist the responsible nurse in the Ministry of Health at Rabat in planning, organizing and teaching intensive short courses designed to prepare nurses for teaching responsibilities and administrative functions in schools of nursing and in training programmes for auxiliaries.</td>
</tr>
<tr>
<td>Morocco 15</td>
<td>R</td>
<td><strong>Fellowships</strong>&lt;br&gt;&lt;br&gt;<em>Cardiac and thoracic surgery.</em> A three-month fellowship for study in Sweden.&lt;br&gt;&lt;br&gt;<em>Public-health administration.</em> A two-month fellowship for study in Sweden, Denmark and Yugoslavia.&lt;br&gt;&lt;br&gt;<em>Rural health nursing.</em> Two two-month fellowships for study in France.</td>
</tr>
<tr>
<td>Morocco</td>
<td></td>
<td><strong>Participation in Regional Courses and Meetings</strong>&lt;br&gt;&lt;br&gt;See EURO 25.2; EURO 85.2; EURO 124; EMRO 13.</td>
</tr>
</tbody>
</table>
| Netherlands 15 | R | **Fellowships**<br><br>*Audiology.* A one-month fellowship for study in the United States of America.<br><br>*Biology and biochemistry.* Two fellowships—one of six months for study in the United Kingdom, and the other of two months for study in Switzerland.<br><br>*Cancer research.* A four-month fellowship for study in the United Kingdom.<br><br>*Food control.* A one-month fellowship for study in Switzerland.<br><br>*Radioisotopes.* Two six-week fellowships for study in the United Kingdom.<br><br>*School psychology.* A two-month fellowship for study in the United Kingdom, Denmark, Sweden and Switzerland.<br><br>*Social medicine.* A one-month fellowship for study in Sweden and Finland.
<table>
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<tr>
<th>Project No.</th>
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<tbody>
<tr>
<td></td>
<td>Water purification. Two fellowships—one of six weeks for study in the United Kingdom and Germany; the other of three months for study in Germany, Switzerland and France.</td>
</tr>
<tr>
<td></td>
<td>Zoonoses control. A six-week fellowship for study in Denmark, Germany, Switzerland and Israel.</td>
</tr>
<tr>
<td>Netherlands</td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td></td>
<td>See EURO 25.2; EURO 85.2; EURO 100.3; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114; EURO 128; EURO 149.</td>
</tr>
<tr>
<td>Norway 10</td>
<td>Fellowships</td>
</tr>
<tr>
<td></td>
<td>Alcoholism. A ten-week fellowship for study in the United Kingdom, the Netherlands and Switzerland.</td>
</tr>
<tr>
<td></td>
<td>Environmental sanitation. A ten-week fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td>Public-health administration. A twelve-month fellowship for study in the United States of America.</td>
</tr>
<tr>
<td></td>
<td>Radiation protection. A four-month fellowship for study in the United States of America and the United Kingdom.</td>
</tr>
<tr>
<td>Norway 11</td>
<td>Mental Health</td>
</tr>
<tr>
<td></td>
<td>WHO provided two lecturers—one for the Annual Seminar of the Norwegian Association for Child Psychiatry and Clinical Psychology, which was held in Oslo on 18 and 19 August under the sponsorship of the Nic Waals Institute; the other to give a lecture on 22 November at the same Institute on the psychotherapeutic approach in working with disturbed children.</td>
</tr>
<tr>
<td>Norway</td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td></td>
<td>See EURO 25.2; EURO 60; EURO 85.2; EURO 93; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114; EURO 127.1; EURO 149.</td>
</tr>
<tr>
<td>Poland 9</td>
<td>Gamma Globulin Production (July 1957 - )</td>
</tr>
<tr>
<td></td>
<td>Aim of the project. To strengthen and expand production and distribution of gamma globulin, to prevent certain infectious diseases, particularly in children.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO during the year. A consultant for one week who, with a member of the WHO staff, visited Poland in July to study the national plans and determine the details of international assistance.</td>
</tr>
<tr>
<td>Poland 12</td>
<td>Maternal and Child Health (18 - 31 March 1957)</td>
</tr>
<tr>
<td></td>
<td>Aim of the project. To give training courses for paediatricians as part of the maternal and child health programme.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO. A consultant who visited Warsaw to advise the University on the establishment of courses in paediatrics.</td>
</tr>
<tr>
<td>Poland 13</td>
<td>Fellowships</td>
</tr>
<tr>
<td></td>
<td>Autoradiography. A two-month fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td>Biochemistry. A nine-month fellowship for study in France and Germany.</td>
</tr>
<tr>
<td></td>
<td>Communicable diseases. A four-month fellowship for study in Switzerland.</td>
</tr>
<tr>
<td></td>
<td>Epidemiology. A twelve-month fellowship for study in the United States of America and the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td>Immunology and immunochemistry. Two fellowships—one of nine months for study in Denmark, France and the United Kingdom; the other of six months for study in the United States of America.</td>
</tr>
<tr>
<td></td>
<td>Microbiology. A ten-month fellowship for study in the United Kingdom, the United States of America, and Denmark.</td>
</tr>
</tbody>
</table>
**Nutrition.** Two fellowships—one of six months and the other of twelve months—for study in the United Kingdom.

**Obstetrics and gynaecology.** A nine-month fellowship for study in the United States of America.

**Paediatrics and social paediatrics.** Four fellowships—two of nine months for study in Switzerland and the United States of America respectively; and two of two weeks to attend the socio-paediatric week in Belgrade.

**Tuberculosis control and vaccine.** Two fellowships—one of five months for study in the United States of America and Denmark; the other of three months for study in France.

**Poland**

Participation in Regional Courses and Meetings

See EURO 25.2; EURO 34; EURO 56; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114; EURO 127.1 and 2; EURO 128; EURO 141.4; EURO 149.

**Portugal 12**

National Courses in Sanitary Engineering (4-9 Nov. 1957)

WHO provided two lecturers for the 1957 sanitary engineering course, which dealt with water sanitation, refuse disposal and utilization.

**Portugal 17**

Fellowships

**Leprosy control.** Two fellowships—one of one month and the other of three months—for study in France.

**Maternal and child health.** Two fellowships—one of one month for study in Sweden and the Netherlands; the other of five weeks for study in Italy, Yugoslavia, and Belgium.

**Public-health administration.** Two fellowships—one of twelve months for study in the United States of America; the other of one month for study in France.

**Public-health nursing.** A twelve-month fellowship for study in the United States of America.

**Trachoma.** Two one-month fellowships for study in Italy.

**Virology.** A two-month fellowship for study in France.

**Portugal 21**

Sera and Vaccine Production (Oct.-Nov. 1957)

**Aim of the project.** To develop the production and control of sera and vaccines.

**Assistance provided by WHO.** A consultant for one month.

**Portugal**

Participation in Regional Courses and Meetings

See EURO 25.2; EURO 85.2; EURO 100.3; EURO 113; EURO 114; EURO 127.2; EURO 128; EURO 141.2; EURO 141.4.

**Romania 1**

Fellowships

**Orthopaedics.** An eight-month fellowship for study in Italy, Austria, and Belgium.

**Rehabilitation.** An eight-month fellowship for study in Italy, Austria, and Belgium.

**Romania**

Participation in Regional Courses and Meetings

See EURO 34.2; EURO 85.2; EURO 107.2; EURO 127.2.

**Spain 1.2**

Brucellosis Control (1957 - )

**Aim of the project.** To strengthen the control of human and animal brucellosis; to control caprine brucellosis in a selected area by use of an improved vaccine; to start the production of vaccine in the provincial public-health laboratory in Córdoba.

**Assistance provided by WHO during the year.** (a) A consultant; (b) equipment for vaccine production.
Work during the year. The consultant assisted in the production of a new vaccine against brucellosis. The laboratory in Córdoba was equipped and the production of vaccine started; the vaccine was tested on goats.

**Rehabilitation of Handicapped Children (1956 - )**

*Aim of the project.* To develop a national programme for the rehabilitation of handicapped children; to establish training centres and expand the services for handicapped children throughout the country.

*Assistance provided by WHO and work done during the year.* (a) A consultant for ten days to assist in developing a national programme and in organizing a new school for physiotherapy; (b) a two-month fellowship for study in Puerto Rico to a medical staff member of one of the centres.

**Venereal-Disease Control (First phase: 1955 - 1957)**

*Aim of the project.* To organize systematic examination and treatment of infants, children and pregnant women as part of the maternal and child health services; to organize active case-finding and diagnosis of syphilis in various population groups; to improve facilities and methods for the diagnosis of syphilis.

*Assistance provided by WHO during the year.* (a) A consultant for one month in November; (b) a six-week fellowship for study in Denmark and France.

*Work done.* The initial part of the control programme has been completed. Three laboratories are now able to perform the Nelson test and ensure the exact diagnosis of syphilis. A first serological testing was made in the pilot sectors which were established in the areas of Madrid and Seville; serological testing of the population has been increased in order to determine the exact prevalence of syphilis in the country.

**Maternal and Child Health (1955 - )**

*Aim of the project.* To expand the maternal and child health services; to establish a number of pilot centres to serve as training centres and models for a country-wide system of centres for the care of infants, especially those born prematurely.

*Assistance provided by WHO and work done during the year.* After completion of the first phase of the project by the establishment of centres for premature infant care in Madrid, Bilbao and Valencia, a consultant visited Spain for three weeks in November to advise on the second phase.

**Communicable Eye Disease Control (1955 - )**

*Aim of the project.* To learn more of the local epidemiology of trachoma and associated infections in Spain; to develop and apply throughout the endemic area effective methods of case-finding and treatment, family supervision and health education; to train personnel.

*Assistance provided by WHO during the year.* (a) Short-term consultants in communicable eye diseases, health education and statistics; (b) two fellowships, of one and two months respectively, in rural health, and health education and ophthalmology.

*Work during the year.* The campaign, which began in pilot sectors in the province of Granada, was extended to the provinces of Almeria and Málaga. A second seminar for dispensary ophthalmologists and general physicians, and a third training course for auxiliary workers were held. Follow-up examinations in the first pilot sectors, where collective treatment was carried out, confirmed that results were favourable. A detailed plan of operations for 1958 and 1959 was established; this will extend the campaign over the greater part of the area in Spain where trachoma is endemic.

**Fellowships**

*Helminthiasis.* A three-month fellowship for study in Italy, Portugal and Germany.

*Occupational health.* A two-month fellowship for study in Finland, Sweden, and France.

*Rehabilitation.* Two fellowships—one of two months, for study in the United Kingdom, the Netherlands and France; the other of six months, for study in France, Belgium, and Italy.

*Polioymelitis.* A two-month fellowship for study in the United States of America.

*Public-health administration.* A two-month fellowship for study in Italy, France, and Belgium.

*Vaccine production.* A six-week fellowship for study in France.
Project List: Europe

Spain

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>See EURO 25.2; EURO 34.2; EURO 52; EURO 56; EURO 58.2; EURO 85.2; EURO 113; EURO 114; EURO 127.2; EURO 141.2; EURO 141.5.</td>
</tr>
</tbody>
</table>

Sweden 12

- **Fellowships**

  - **Child guidance.** A three-month fellowship for study in the United States of America.
  
  - **Hospital equipment.** A six-week fellowship for study in Germany, Switzerland, Italy, France, and the United Kingdom.
  
  - **Public-health administration.** A nine-month fellowship for study in the United Kingdom.
  
  - **Rehabilitation.** Two fellowships—one of three months for study in the United States of America, and Canada; the other of two months for study in the United Kingdom, Netherlands, France, Italy, Austria, and Germany.
  
  - **Tropical hygiene.** A two-and-a-half-month fellowship for study in Germany.
  
  - **Veterinary public health.** A nine-month fellowship for study in the United States of America.

Sweden

- **Participation in Regional Courses and Meetings**

  See EURO 25.2; EURO 60; EURO 85.2; EURO 93; EURO 106; EURO 108.1; EURO 111.1; EURO 113.

Switzerland 15

- **Fellowships**

  - **Child psychotherapy.** A study grant to the Chief Medical Officer at the “Office médico-pédagogique vaudois” for visits to France.
  
  - **Meat hygiene.** Three two-month fellowships for study in Germany and Denmark.
  
  - **Nursing education.** A three-month fellowship for study in Norway, Sweden, and Finland.
  
  - **Rehabilitation.** A three-month fellowship for study in the United Kingdom.

Switzerland

- **Fellowships**

  See EURO 77.

Switzerland

- **Participation in Regional Courses and Meetings**

  See EURO 25.2; EURO 85.2; EURO 100.3; EURO 106; EURO 108.1; EURO 113; EURO 114; EURO 127.1; EURO 149.

Turkey 6

- **Maternal and Child Health Training Centres (Sept. 1952 - )**

  **Aim of the project.** To develop maternal and child health services as part of the general public-health service; to establish a maternal and child health section in the Ministry of Health; to establish a demonstration and teaching centre in Ankara, and a rural demonstration area nearby.

  **Assistance provided by WHO during the year.** (a) A social paediatrician and a public-health nurse midwife; (b) a consultant in social paediatrics for three months; (c) five fellowships.

  **Work during the year.** Demonstration and teaching work in Ankara was continued in connexion with the rural health and maternal and child health programmes. Assistance was given with a training course for rural medical officers, a course in social nursing held at the Erenköy school, and a course in obstetrics and social paediatrics, as well as with the preparation of a programme for the emergency course in obstetric nursing (see Turkey 29). In the rural demonstration area, courses of instruction were given to rural midwives, and the organization of the maternal and child health services of the area was continued.

Turkey 11

- **Leprosy Control (1956 - 1957)**

  **Aim of the project.** To control leprosy and establish a long-term eradication programme.

  **Assistance provided by WHO.** (a) A consultant; (b) a five-month fellowship for study in French West Africa, Spain, and France.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<tbody>
<tr>
<td>Turkey 15</td>
<td>TA</td>
<td></td>
<td>Health Education of the Public (1957)</td>
</tr>
<tr>
<td>Turkey 16</td>
<td>TA</td>
<td></td>
<td>Assistance to School of Public Health, Ankara (July 1953 - )</td>
</tr>
<tr>
<td>Turkey 29</td>
<td>TA</td>
<td></td>
<td>Nursing Advisory Programme (Oct. 1955 - )</td>
</tr>
<tr>
<td>Turkey 31</td>
<td>TA UNICEF</td>
<td></td>
<td>Communicable Eye Disease Control (1955 - )</td>
</tr>
<tr>
<td>Turkey 33</td>
<td>TA</td>
<td></td>
<td>Sera and Vaccine Production (1956 - )</td>
</tr>
<tr>
<td>Turkey 36</td>
<td>R</td>
<td></td>
<td>Fellowships</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO and work done.** A consultant for three months who advised the responsible authorities on health education problems and took part in the teaching at the School of Public Health in Ankara (see Turkey 16).

**Aim of the project.** To give post-graduate training at the School of Public Health.

**Assistance provided by WHO during the year.** Two consultants, one for four weeks, and the other for ten weeks, to lecture in parasitology and sanitary engineering.

**Work during the year.** As in previous years, courses were held in the School of Public Health, Ankara, from 16 August to 26 October. Besides the two lecturers provided for in this project, a health educator and a paediatrician (see Turkey 6 and Turkey 15) also took part in the teaching.

**Aim of the project.** To improve vital and health statistics.

**Assistance provided by WHO during the year.** The WHO consultant who helped with the project in previous years visited Turkey for a month in September and October.

**Aim of the project.** To organize the nursing division in the Ministry of Health, plan general nursing services for the country, reorganize post-basic and basic nursing education programmes, and train auxiliary nursing personnel for public-health and institutional services.

**Assistance provided by WHO during the year.** (a) Three nursing advisers; (b) three fellowships.

**Work during the year.** The functions of the nursing division were defined and its work organized. An advisory nursing council was constituted, with special committees which prepared a new basic nursing programme that has been tried out since the middle of October in three schools of nursing, one in Ankara and two in Istanbul. The new programme, of four years’ duration, includes courses in general and professional education, and prepares nurse midwives with public-health qualifications. The post-basic programmes in nursing education and administration were revised and will be given in close co-ordination with a first emergency course, in operation since the beginning of October, for the preparation of instructors and supervisors for auxiliary nursing and midwifery personnel.

**Aim of the project.** To learn more of the local epidemiology of trachoma and associated infections in Turkey; to develop and apply throughout the endemic area effective methods of case-finding and treatment, family supervision and health education; to train personnel.

**Assistance provided by WHO during the year.** (a) A short-term consultant in communicable eye diseases; (b) three six-week fellowships.

**Work during the year.** An operational headquarters and project laboratory were established at Gaziantep. Preliminary epidemiological studies were carried out. Therapeutic trials with newer and more economical methods of treatment were begun. A plan of operations was prepared for continuation and extension of the project in 1958 and 1959.

**Aim of the project.** To strengthen the production of sera and vaccine.

**Assistance provided by WHO.** Two two-month fellowships were awarded—one for study in Denmark, and the other for study in Switzerland and Germany.

**Aim of the project.** Anaesthesiology. A twelve-month fellowship for study in France.

**Public-health administration.** Eight fellowships for the training of a group in France, Switzerland and Italy.

**Serology and syphilis.** A three-week fellowship for study in Sweden and Denmark.
PROJECT LIST: EUROPE

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| Turkey 38   | TA              |                       | **Endemo-epidemic Diseases; Epidemiology** (1957 - )  
A two-month fellowship for the study of brucellosis vaccine in the United Kingdom. |

Turkey

**Participation in Regional Courses and Meetings**  
See EURO 25.2; EURO 85.2; EURO 100.3; EURO 107.2; EURO 114; EURO 124; EURO 127.1 and 2; EURO 141.2; EURO 141.4; EMRO 13.

United Kingdom 13

**Fellowships**  
**Biochemistry.** A one-month fellowship for study in Denmark, the Netherlands, Germany, Switzerland and France.  
**Mental health.** An eight-week fellowship for study in Denmark, Sweden, Norway and Switzerland.  
**Nursing administration and education.** Three two-month fellowships for study respectively in Finland, Sweden, Denmark; Finland, Sweden, Norway and Denmark; Sweden, Finland, and the Netherlands.  
**Paediatrics.** Two fellowships—one of ten weeks for study in Sweden, Finland, Norway, and France; the other of six weeks for study in Norway, Sweden, Finland, the Netherlands, and Germany.  
**Public-health administration.** A two-month fellowship for study in the Netherlands, Sweden, Finland, Norway, and Denmark.  
**Rheumatism.** A one-month fellowship for study in Sweden, Denmark, the Netherlands, and France.  
**School dental health.** A two-month fellowship for study in Norway, Sweden, and Denmark.

United Kingdom

**Participation in Regional Courses and Meetings**  
See EURO 25.2; EURO 106; EURO 108.1; EURO 111.1; EURO 113; EURO 114; EURO 128.

USSR 1

**Fellowships**  
**Biochemistry.** A two-month fellowship for study in the United Kingdom.  
**Environmental sanitation.** A three-month fellowship for study in France and Italy.  
**Histopathology.** A three-month fellowship for study in the United Kingdom.  
**Metabolic diseases.** A two-month fellowship for study in Sweden.  
**Neuropathology.** Two fellowships of three months—one for study in the United States of America, the other for study in the United Kingdom.  
**Oncology.** A three-month fellowship for study in the United Kingdom.  
**Pharmacology.** Two three-month fellowships for study in the United Kingdom.  
**Physiology.** A three-month fellowship for study in the United Kingdom.  
**Sera and vaccine production.** A three-month fellowship for study in Denmark.  
**Tuberculosis.** A three-month fellowship for study in France.  
**Virology.** A three-month fellowship for study in the United Kingdom.

USSR

**Participation in Regional Courses and Meetings**  
See EURO 34.2; EURO 85.2; EURO 100.3; EURO 107.2; EURO 113; EURO 128.

Yugoslavia 7

**Rehabilitation of Handicapped Children (Nov. 1955 - )**  
**Aim of the project.** To improve and extend rehabilitation facilities for the handicapped, particularly children, and to train staff.  
**Assistance provided by WHO during the year.** A consultant, who visited the country for one week and made recommendations for the continuation of the project.
**Yugoslavia 12**

**Description**

**Mental Health (1957 - )**

**Aim of the project.** To strengthen mental health services.

**Assistance provided by WHO during the year.** Four fellowships—three of three months and one of six months—for study in the following countries: France and Switzerland; Germany and Switzerland; the United Kingdom and Germany; France.

**Yugoslavia 16.1**

**Description**

**Endemo-epidemic Diseases (1953 - )**

**Aim of the project.** To reduce the prevalence of certain endemo-epidemic diseases which are still a serious problem in Yugoslavia.

**Assistance provided by WHO during the year.** (a) Four fellowships, of four to six months' duration, for the study of epidemiology, parasitology and bacteriology in the following countries: United Kingdom and Denmark; United Kingdom, Sweden and France; France; Germany; (b) a deep freezer for the Institute of Virology in Sarajevo.

**Yugoslavia 16.4**

**Description**

**Tuberculosis Control (1953 - )**

**Aim of the project.** To extend national antituberculosis services.

**Assistance provided by WHO during the year.** (a) A six-month fellowship for study of BCG production in France, Denmark, Norway and Sweden; (b) laboratory equipment for the Institute of Hygiene in Belgrade.

**Yugoslavia 16.5**

**Description**

**Communicable Eye Disease Control (1954 - )**

**Aim of the project.** To learn more of the epidemiology of trachoma and associated infections in Yugoslavia; to develop and apply throughout the endemic areas effective methods of case-finding and treatment, family supervision and health education; to train personnel.

**Assistance provided by WHO during the year.** (a) Two visits by a consultant in communicable eye diseases; (b) two six-week fellowships for study in Italy and Spain.

**Work during the year.** The plan of action was revised in the light of a new appraisal of the problem, greater emphasis was placed on epidemiological, social and health educational aspects and on integrating the programme into the general public-health services of the country. Arrangements were made for a closer statistical follow-up and evaluation of the project. The revised plan of operations covers the period from 1 January 1957 to 31 December 1958.

**Yugoslavia 16.9**

**Description**

**Maternal and Child Health (1953 - )**

**Aim of the project.** To expand the maternal and child health services as part of the general public-health services; to establish in each Republic a demonstration centre supervising and staffing a number of sub-centres.

**Assistance provided by WHO and work done during the year.** A lecturer was provided for a seminar on poliomyelitis held in Ljubljana from 15 to 29 May and two lecturers participated in a study tour in Yugoslavia from 24 to 30 September and lectured on paediatric rheumatology during the socio-paediatric week held in Belgrade from 1 to 6 October. Twenty-four fellowships were awarded: two of six months for the study of school health in various European countries; seven, of three and six months, for study of rehabilitation of handicapped children in the United States of America or Europe; one of six months for the study of prematurity in France; fourteen of one month, to enable chiefs of clinics to make a study tour in France, Belgium and the Netherlands.

**Yugoslavia 16.11**

**Description**

**Vital and Health Statistics (1954 - )**

**Assistance provided by WHO during the year.** (a) A ten-month fellowship for study in the United States of America and the United Kingdom; (b) electric calculators for the Federal Institute of Public Health in Belgrade.

**Yugoslavia 16.12**

**Description**

**Social and Occupational Health**

**Assistance provided by WHO during the year.** (a) Seven six-month fellowships for study in the following countries: United Kingdom (two); United Kingdom, Finland, Sweden and Germany (three); Germany and Italy (one); United Kingdom, Finland and Sweden (one); (b) laboratory equipment for the School of Public Health in Zagreb.
<table>
<thead>
<tr>
<th>Yugoslavia 21</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>TA</td>
<td>Dental Protection (Dec. 1956)</td>
</tr>
<tr>
<td></td>
<td>A four-month fellowship was awarded to a dental health officer for study in Switzerland, Germany, Sweden, and Norway.</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Yugoslavia 23</th>
<th>Fellowships</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>Endocrinology. A six-month fellowship for study in France.</td>
</tr>
<tr>
<td></td>
<td>Forensic medicine. A six-month fellowship for study in Sweden, Germany, and Italy.</td>
</tr>
<tr>
<td></td>
<td>Pharmacology. A one-year fellowship for study in the United Kingdom.</td>
</tr>
<tr>
<td></td>
<td>Vaccine production. Two six-month fellowships for study in Denmark.</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Yugoslavia</th>
<th>Participation in Regional Courses and Meetings</th>
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<tbody>
<tr>
<td></td>
<td>See EURO 25.2; EURO 27.4; EURO 34.2; EURO 52; EURO 56; EURO 58.2; EURO 85.2; EURO 100.3; EURO 106; EURO 107.2; EURO 108.1; EURO 113; EURO 114; EURO 124; EURO 127.1 and 2; EURO 141.1; EURO 141.2; EURO 141.4; EURO 141.5; EURO 149; EMRO 13.</td>
</tr>
</tbody>
</table>
EASTERN MEDITERRANEAN

**EMRO 5**

**Higher Institute of Nursing, Alexandria (Oct. 1953 - )**

**Aim of the project.** To raise the standard of nursing education in Egypt and other countries of the Region by training, in a collegiate school, young women of high educational standard in a four-year course leading to a bachelor's degree in basic nursing; to provide post-basic courses for nurses of proven ability and to promote study and research on nursing within the Region.

**Assistance provided by WHO during the year.** (a) A senior nurse educator, four nurse educators and an administrative assistant (a fifth nurse educator from project Iran 37 was assigned temporarily for two and a half months); (b) teaching equipment and supplies.

**Probable duration of assistance.** Beyond 1962.

**Work during the year.** The students at the Higher Institute of Nursing—which is a part of the University of Alexandria—moved to the residence for university women, which made space at the Institute available for a physics laboratory, conference and class rooms.

The curriculum has been broadly and tentatively outlined and is under constant revision to ensure an educationally sound academic programme in basic nursing education at a university level. Plans were considered for setting up demonstration units for students' clinical practice in various service areas. A study of professional regulations and statutes of the Institute was begun.

Progress was made with remediying the lack of qualified Egyptian nurses on the faculty; five were appointed as counterparts and are participating in programmes of in-service education.

The third class of thirty students began the 1957-58 academic year in October. The student body comprises fifty-six: forty-eight from Egypt, five from Sudan, one from Syria, one from Iraq and one from Jordan. Countries of the Region have shown considerable interest in the Institute, and there has been a gradual increase in the number of young women attending its courses.

**EMRO 7**

**Arab States Fundamental Education Centre, Sirs-el-Layyan (May 1953 - )**

**Aim of the project.** To train national staff from all Arab States in the principles of fundamental education. This is primarily a UNESCO-assisted project, in which WHO helps with health aspects.

**Assistance provided by WHO during the year.** (a) A public-health adviser and a health educator; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** After an interruption of almost four months, the two WHO experts resumed their work, which included teaching of public health and particularly health education to the students of the fourth, fifth and sixth courses, production of health education material, and other practical work.

The fifty-four trainees of the fourth course concluded their examinations satisfactorily; nine of them majored in public health.

**EMRO 13**

**Maternal and Child Health Seminar, Cairo (25 Nov. - 7 Dec. 1957)**

**Aim of the project.** To exchange information on matters affecting maternal and child health, including the main child health problems, and to study methods of assessing needs.

**Assistance provided by WHO.** (a) Four short-term consultants to lecture and act as discussion leaders; (b) costs of attendance of thirty-nine participants from Aden, Cyprus, Egypt, Ethiopia, Iran, Iraq, Lebanon, Libya, Pakistan, Somalia, Sudan, Syria and Tunisia, and from Greece, Morocco, Turkey and Yugoslavia (European Region).

WHO staff members helped with the seminar, in which representatives of various agencies concerned with child welfare, including UNICEF and the International Children's Centre, Paris, also took part.

**EMRO 23**

**Dental Health Survey (3 - 12 April 1957)**

**Aim of the project.** To advise countries and the Regional Office on the future development of dental health services in various countries.

**Assistance provided by WHO and work done.** A dental health officer carried out surveys in Sudan and Egypt.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
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<tbody>
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<td>Aden</td>
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<td>Participation in Regional Courses and Meetings</td>
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<td>See EMRO 13.</td>
</tr>
<tr>
<td>Cyprus 1</td>
<td>TA</td>
<td>Nursing Education, Nicosia (Sept. 1954 - )</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To develop a school of modern nursing education and training adapted to local needs and resources, so as to provide graduate and auxiliary nursing personnel for health services.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A nurse educator; (b) teaching equipment.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1958.</td>
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<td><strong>Work during the year.</strong> The requirements for admission to the three-year programme of the school were raised to full secondary education for student nurses and to two years' secondary education for assistant nurses. A Nurse Examiners' Committee was established. A manual of public health and nursing procedures in three different languages was drawn up and is being used by all government hospitals. The WHO nurse worked with the Cypriot sister tutor in planning the programmes for the different groups in the school. She taught the nursing aspects of public health and shared in the teaching of other complementary subjects.</td>
</tr>
<tr>
<td>Cyprus</td>
<td></td>
<td>Participation in Regional Courses and Meetings</td>
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<td>See EMRO 13.</td>
</tr>
<tr>
<td>Egypt 5</td>
<td>TA (UN) (ILO) (FAO) (UNESCO)</td>
<td>Demonstration and Training Area, Calioub (Jan. 1953 - )</td>
</tr>
<tr>
<td></td>
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<td><strong>Aim of the project.</strong> To demonstrate methods of co-ordinating the work of the several ministries responsible for health; to develop in a selected area a scheme of health and welfare services which could be extended to the whole country; to provide field training in rural health for technical personnel from Egypt and other countries.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A public-health engineer administrator and a short-term consultant in entomology; (b) supplies and equipment.</td>
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<td><strong>Work during the year.</strong> The rural health demonstration unit at Tana'an was further developed and minor revisions and additions, based upon the experience of the last two years, were made. Special studies were started on recording of vital statistics, bilharziasis, sanitation organization, fly control, heart diseases and tuberculosis. The village health sub-centres attached to the general hospital were also developed further. A number of schools were contacted about training teachers in health education. Doctors in the rural health centres and their auxiliary staff were given in-service training; and various categories of health personnel from countries of the Region were trained. Field training was provided for students from the Egyptian High Institute of Public Health. Co-operation with the Arab States Fundamental Education Centre (EMRO 7) continued, and some bulletins and visual aids for environmental sanitation work were prepared jointly.</td>
</tr>
<tr>
<td>Egypt 10</td>
<td>TA</td>
<td>Bilharziasis Control (Nov. 1952 - )</td>
</tr>
<tr>
<td></td>
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<td><strong>Aim of the project.</strong> Originally, to demonstrate joint action for the control of bilharziasis, in a selected community in the south-west part of Calioub Province, by health education, sanitation, snail destruction and treatment of cases. The project is to be revised to give more attention to pilot studies of methods of killing snails and to the design and maintenance of irrigation systems.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Assistance provided by WHO during the year.</strong> (a) A short-term consultant (public-health engineer); (b) spraying equipment and supplies.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td></td>
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<td><strong>Work during the year.</strong> The national team carried out regular ecological and environmental sanitation surveys and control measures in the Calioub and Mena areas.</td>
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<tr>
<td>Egypt 18</td>
<td>R</td>
<td>Industrial Health and Occupational Diseases (1956 - )</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To establish a department of occupational health in the High Institute of Public Health, Alexandria; to train technical personnel for occupational health services in Egypt and other countries in the Region; to carry out surveys and applied and basic research in occupational health.</td>
</tr>
</tbody>
</table>
Assistance provided by WHO during the year. (a) An industrial health chemist, and a short-term consultant in industrial medicine; (b) a one-year extension of a fellowship for post-graduate studies in the United States of America; (c) supplies and equipment.

Probable duration of assistance. Until the end of 1958.

Work during the year. The plan of operations was signed. A department of industrial health with several laboratories was established in the High Institute of Public Health, Alexandria; the industrial health chemist and the consultant took part in the teaching.

Egypt 23

Malaria Eradication (Oct. 1957 - )

Aim of the project. To prepare a plan of operation for a malaria eradication programme.

Assistance provided by WHO during the year. (a) A short-term consultant for planning; (b) grants to two participants in a technical meeting held in Baghdad.

Egypt 25

Communicable Eye Disease Control Pilot Project (Dec. 1954 - )

Aim of the project. To ascertain by field trials a practicable and effective method for the control of trachoma and other communicable eye diseases.

Assistance provided by WHO during the year. Supplies.

Administrative guidance was given by the WHO senior adviser on project Egypt 5.

Probable duration of assistance. Until the end of 1959.

Work during the year. Mass methods for application of aureomycin ointment to children by mothers and schoolchildren were tested. Emphasis was placed on carrying on the field operations with personnel normally employed in rural health centres of the type standard Egypt.

Egypt 27

Veterinary public health. A twelve-month fellowship for study in Canada and the United States of America.

Egypt 28

Sanitary Engineering, University of Alexandria (Sept. 1955 - )

Aim of the project. To strengthen the undergraduate teaching of sanitary engineering in the Faculty of Engineering of the University; to establish post-graduate and extension instruction and research and to relate them to post-graduate instruction in public health.

Assistance provided by WHO during the year. (a) A professor of sanitary engineering; (b) extension of a twelve-month fellowship; (c) laboratory and teaching supplies.

Pending recruitment of the professor, teaching was carried out by the regional environmental sanitation adviser and the senior WHO adviser of the Calioub project (Egypt 5).

Probable duration of assistance. Beyond 1958 (assistance in strengthening research facilities).

Egypt 30

Premature Infants' Unit (Second phase: Aug. 1957 - )

Aim of the project. To assess requirements and establish a specialized unit for the care of premature infants.

Assistance provided by WHO during the year. (a) A three-month fellowship to study infant care in Finland; (b) supplies and equipment.

Egypt 39

Fellowships

Epidemiology. A three-month fellowship for study in the United States of America.
Ophthalmology. A six-week fellowship for study in Europe.
Parasitology. A three-month fellowship for study in the United States of America.
Poliomyelitis. A three-month fellowship for study in the United States of America.
Radiation protection. A six-week fellowship for study in Belgium.
Statistics. Two nine-month fellowships for study in Lebanon.
Various (mostly public health). Seven twelve-month fellowships for study in the United States of America.

Virology. A four-month fellowship for study in Japan.

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**Egypt**

**Project No.**

**47**

**Source of Funds**

**Co-operating Agencies**

**Description**

School Health Services (Survey) (Nov. 1957)

**Aim of the project.** To reorganize school health services to meet the needs of the rapidly expanding educational system and to integrate them into the public-health services.

**Assistance provided by WHO.** A short-term consultant.

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**Ethiopia**

**3**

**Public-Health Administration** (Oct. 1952 - )

**Aim of the project.** To improve public-health administration generally, and incorporate the several services in a long-term basic health programme.

**Assistance provided by WHO during the year.** (a) A public-health administrator; (b) a transport vehicle.

**Probable duration of assistance.** Until the middle of 1958.

**Work during the year.** As adviser to the Government, the public-health administrator served on the General Advisory Board of the Ministry of Health, the Long-Term Policy Committee, the Technical Advisory Committee for the Gondar public-health training centre, and various sub-committees. His work included helping to establish a Malaria Board in the Ministry of Public Health and to improve regulations for the admission of emergency cases into hospitals.

---

**Ethiopia**

**4**

**Venerable-Disease Control, Addis Ababa** (June 1952 - )

**Aim of the project.** To demonstrate modern methods of venereal-disease control and to survey the problem in various parts of the country; to implement mass control programmes in areas of high prevalence.

**Assistance provided by WHO during the year.** (a) A senior medical adviser and a public-health nurse; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Work continued in the centre in Addis Ababa and the mass campaign was implemented in three field areas—Lekemti, Dessie and Gondar. The senior medical adviser prepared for the Government’s consideration a ten-year plan for venereal-disease control in Ethiopia.

---

**Ethiopia**

**9**

**Health Training Centre, Gondar** (March 1954 - )

**Aim of the project.** To train auxiliary personnel at a centre to be established at Gondar; to develop a model health service for the Province of Begemedir and the town of Gondar; to investigate local health conditions; to extend health services to the whole country; eventually to improve the teaching facilities at Gondar so that professional staff may be trained there.

**Assistance provided by WHO during the year.** A medical officer, a sanitary engineer, a maternal and child health officer, a public-health nurse, a public-health nurse midwife and two health officers.

**Probable duration of assistance.** Several years.

**Work during the year.** The teaching programme continued on schedule. By the middle of the year the first twenty health officers, fifteen community midwives and twelve sanitarians successfully completed their study periods (three years, two years and one year respectively). Training facilities were improved in the Gondar hospital, the maternal and child health centre, the Koladuba rural health centre, etc. A UNICEF-assisted sanitation programme was started. Opportunities were provided for the training of the students in the control of malaria, venereal disease and leprosy.

The teaching programme for the 1957-58 academic year began on 1 November 1957.

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**Ethiopia**

**13**

**Mobile Health Team** (May 1956 - )

**Aim of the project.** To determine the type of mobile health team best adapted to work in Ethiopia, by a pilot project in which a team will collect epidemiological data for planning health services, give assistance if epidemics occur and provide limited preventive and curative health care to the rural population.
**Ethiopia 14**

**TA UNICEF (ICA)**

**Malaria Pilot Project** (Second phase: Aug. 1956 - )

*Description*

*Assistance provided by WHO during the year.*  
(a) A malariologist and a sanitarian; (b) supplies and equipment.

*Probable duration of assistance.*  
Until the end of 1959.

*Work during the year.*  
Extensive survey work, as well as public-health and clinical work, was carried out in the following areas of Begemedir Province: Gondar, Adi Arkai, remote areas between Lake Tana and the Sudanese frontier, and Aikel. After a short visit to Addis Ababa, the team went to Awash, then to the Danakil plain and from there to the south-west part of Ethiopia. A considerable amount of material was collected, and a preliminary assessment report will be submitted by the end of 1957.

**Ethiopia 16**

**R**

**Communicable Eye Diseases** (Nov. 1957 - )

*Description*

*Assistance provided by WHO and work done during the year.*  
An ophthalmologist, who started the preliminary survey.

*Probable duration of assistance.*  
Until the end of 1959.

**Ethiopia 17**

**R**

**Medical Education** (Nov. - Dec. 1957)

*Description*

*Assistance provided by WHO.*  
A short-term consultant.

**Ethiopia 18**

**R**

**Fellowships**

*Public-health administration.*  
A four-month fellowship for study in Europe and the Middle East.

*Statistics.*  
A seven-month fellowship for study in Lebanon.

*Undergraduate medical studies.*  
Extensions for the academic year 1957-58 of eight fellowships for basic medical studies—six at the American University of Beirut, Lebanon, and two in France.

**Iran 1**

**R UNICEF**

**Malaria Eradication** (Fourth phase: Nov. - Dec. 1957)

*Description*

*Assistance provided by WHO.*  
To eliminate malaria by stages. Over a period of seven years it is hoped to eliminate the disease among twelve million people living in forty thousand villages.
### PROJECT LIST: EASTERN MEDITERRANEAN

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Assistance provided by WHO during 1957.</strong> Fellowships for two doctors to visit Thailand and India, where eradication programmes are being implemented.</td>
</tr>
</tbody>
</table>

**Work during the year.** Direct protection by residual spraying was afforded to 5,700,000 people living in 21,049 villages. The surveillance programme was extended. Investigations were carried out on the degree of resistance in malaria vectors and on methods of controlling malaria among nomads.

The malaria public-health engineer and the malaria adviser from the Regional Office each visited the project for a week. A WHO statistician held a four-week course in malaria statistics in November and December.

A revised plan of operations was prepared and received technical approval.

<table>
<thead>
<tr>
<th>Iran 2</th>
<th>TA</th>
<th>UNICEF</th>
<th><strong>Arthropod-borne Disease Control (Dec. 1952 - July 1957)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of project.</strong> To study the epidemiology of arthropod-borne diseases in Iran; to develop methods of control; to train staff in epidemiological and control methods.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) An entomologist and a public-health engineer; (b) a twelve-month fellowship to study public-health engineering in the United States of America and a three-month fellowship to study water analysis in Australia.

**Work during the year.** Final reports, containing information on the epidemiological, sanitary engineering and entomological aspects of control of insect-borne diseases in Iran, were submitted.

<table>
<thead>
<tr>
<th>Iran 4</th>
<th>TA</th>
<th>UNICEF</th>
<th><strong>Venereal-Disease Control, Teheran (Nov. 1952 - )</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> (a) To expand and improve the control of venereal diseases in Teheran and its neighbourhood; to set up a venereal-disease centre in Teheran with a laboratory for serological tests and to train serologists and technicians; to train professional and technical personnel (including a team to take over from the WHO team); (b) to provide venereal-disease centres in other parts of the country and improve control work; (c) eventually to control venereal disease throughout the country by a mass campaign.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) A senior medical adviser and a serologist; (b) a ten-month fellowship; (c) supplies and equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The Venereal-Disease Reference Centre with a serological laboratory was established in Teheran. Kahn and Kolmer antigens were prepared locally to be used by the centre. Mass campaigns were implemented in two provinces where there is a high prevalence of venereal disease.

<table>
<thead>
<tr>
<th>Iran 9</th>
<th>TA</th>
<th></th>
<th><strong>Tuberculosis Control Demonstration and Training Centre, Teheran (March 1954 - )</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To establish a tuberculosis control centre which will train personnel, demonstrate modern methods of control and serve as a central tuberculosis dispensary for Teheran, and a central diagnostic laboratory for tuberculosis, under the direction of the Institut Pasteur, Teheran; to organize a mobile epidemiological team for surveys among selected population groups; ultimately to develop a national programme of tuberculosis control.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) A senior tuberculosis adviser, and public-health nurse; (b) a twelve-month fellowship; (c) supplies and equipment.

**Probable duration of assistance.** Until mid-1959.

**Work during the year.** Satisfactory progress was made in the operation of the centre. A two-month training course was held for physicians, and training of nursing and auxiliary personnel continued. A survey on the prevalence of tuberculosis was carried out in Recht Province and plans for the development of tuberculosis control measures in that area progressed.

<table>
<thead>
<tr>
<th>Iran 10</th>
<th>TA</th>
<th>UNICEF</th>
<th><strong>Maternal and Child Health Demonstration and Training Centre, Teheran (Dec. 1954 - )</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Aim of the project.</strong> To demonstrate modern methods of prenatal, infant and child care, and domiciliary midwifery services, and to train medical and auxiliary personnel; ultimately to plan maternal and child health services for the whole country.</td>
</tr>
</tbody>
</table>

**Assistance provided by WHO during the year.** (a) A social paediatrician, a public-health nurse and a nurse educator in midwifery; (b) a six-month extension of a fellowship; (c) supplies and equipment.
Project No.:                      Description
Source of Funds                     Probable duration of assistance. Until mid-1939.
Co-operating Agencies

Work during the year. The demonstration and training centre moved to its final premises. It served as a main training centre for various groups of professional and auxiliary personnel in maternal and child health. The international staff assisted the Maternal and Child Health Section of the Ministry of Health to formulate a national maternal and child health programme and ensure the co-operation of voluntary agencies.

Iran 11

Tuberculosis Control (BCG Vaccination) (Second phase: Oct. 1957 - )

**Aim of the project.** To carry out a mass BCG vaccination campaign; to develop permanent BCG vaccination services.

**Assistance provided by WHO during the year.** A medical officer.

**Probable duration of assistance.** Until the end of 1957.

**Work during the year.** The national teams continued the mass campaign with UNICEF assistance. The medical officer provided by WHO assisted in the preparations for further expansion of the campaign.

Iran 21

Midwifery School, Teheran (Nov. 1954 - )

**Aim of the project.** To reopen the Midwifery School at the University Women's Hospital and provide a fifteen-month course in institutional and district midwifery for qualified nurses.

**Assistance provided by WHO during the year.** (a) Two nurse midwife tutors; (b) teaching and demonstration equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The first group of nine nurse midwives graduated in May; by the end of the year most of them were practising midwifery or assisting in training programmes. Twelve student nurse midwives were enrolled for the second course that began in October 1956. The programme was expanded to include teaching and supervised practice in obstetrical nursing for students from the school of nursing at Rey. Alterations in the hospital continued and the medical staff revised policies for maternal care. Regular meetings with the trained staff in the hospitals were initiated. Three Iranian nurse midwives trained abroad participated in the programme with the two WHO nurse midwives.

Iran 24

Visiting Team of Medical Scientists (Oct. 1957)

**Aim of the project.** To demonstrate modern techniques and new developments in various branches of medical science; to advise on curricula and methods of medical education.

**Assistance provided by WHO and work done.** An expert in each of the following subjects: physiology, pathology, medicine, surgery, preventive medicine, tuberculosis, dermatology, paediatrics, medical education, psychiatry and mental health, anaesthesiology, and cardiology. The team gave demonstrations and lectures and held seminars in the medical faculties of the Universities of Teheran, Tabriz and Shiraz, and held a conference on medical education. Particular attention was paid to the integration of training in public health in the teaching of the various subjects.

Iran 26

Public-Health Laboratory (March 1955 - )

**Aim of the project.** To set up a central public-health laboratory and organize a public-health laboratory service for the whole country.

**Assistance provided by WHO during the year.** (a) A laboratory director (scientist), a laboratory technician, and a bromatologist; (b) laboratory equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Reorganization of the central public-health laboratory began. A food and drug control section was established and co-ordination with special laboratories initiated.

Iran 29

Cancer (June 1955 - )

**Aim of the project.** To set up a Cancer Institute for diagnosis and treatment, to be equipped by the Red Lion and Sun Society; to survey the incidence and character of cancer in Iran; to train personnel in modern methods of cancer treatment; and to plan for future work.
Project List: Eastern Mediterranean

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>133</td>
<td></td>
<td></td>
<td>Assistance provided by WHO during the year. (a) A cancerologist for the Cancer Institute of the Red Lion and Sun Society; (b) a six-month fellowship for study in the United States of America.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Probable duration of assistance. Until the end of 1958.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Work during the year. The Institute continued to expand its diagnostic and treatment services within the limits of its capacity. Additional national personnel were trained and employed. A report was made giving statistical information on the types of cases diagnosed and treated.</td>
</tr>
</tbody>
</table>

Iran 35

Fellowships

Heart diseases. A six-month fellowship for study in Australia.

Hospital administration. Two fellowships—one of twelve months for study in the United States of America; the other of three months for study in Europe.

Hospital construction. A grant to study in Switzerland for ten days.

Public-health administration. Two fellowships of twelve months and one of ten months for study in France; a twelve-month fellowship for study in Canada, and two twelve-month fellowships for study in the United States of America.

Radiation protection. A five-week fellowship for study in Belgium.

Statistics. A three-month fellowship for study in Europe.

Iran 37

Nursing Education, Red Lion and Sun School of Nursing, Rey (June 1956 - )

Aim of the project. To reorganize the School of Nursing as an independent educational institution preparing professional nurses for the country’s expanding health services.

Assistance provided by WHO during the year. (a) Three nurse educators; (b) a twelve-month fellowship to one of the nurses of the School, for study in Canada; (c) teaching and demonstration equipment and supplies.

Probable duration of assistance. Beyond 1959.

Work during the year. Alterations to improve teaching conditions were made in the School. The curriculum was revised and educational policies were formulated. A number of service areas were reorganized. The educational standards for entrance were raised and the age limit for admission was raised to thirty years. Students graduating from the school will be assigned only to approved institutions, and graduates will remain under supervision for one year before they are assigned to the provinces.

Sixty-six students began the second or third year classes and the first group of twenty-three students under the reorganized programme was admitted in April. There were seven Iranian nurses in the faculty of the School during the year, who participated in all activities associated with the development of the School.

Iran 39

Narcotics Control (Sept. 1957 - )

Aim of the project. To develop and organize suitable diagnostic and treatment methods for the country-wide campaign against drug addiction.

Assistance provided by WHO and work done during the year. (a) A short-term consultant who began a survey of the problem and advised the Government on certain aspects of drug addiction; (b) supplies and equipment.

Iraq 6

Provincial Health Administration (Jan. 1957 - )

Aim of the project. To develop provincial health services.

Assistance provided by WHO during the year. (a) A medical officer, a sanitary engineer, a statistician, a public-health nurse, and a laboratory technician; (b) equipment.

Probable duration of assistance. Until the end of 1959.

Iran Participation in Regional Courses and Meetings

See EMRO 13; AFRO 24; EURO 52; EURO 100.3.
Work during the year. Several preliminary surveys were carried out, including special studies on environmental sanitation conditions and a pilot census. In-service training of staff was started. Preparations were made for a community development project in a group of villages.

Iraq 8

Maternal and Child Health Services (Oct. 1953 - )

Aim of the project. To provide for the whole country, as a part of the national health services, a comprehensive maternal and child health service; to demonstrate methods best suited to Iraq; to train auxiliary health visitors, community midwives and other categories of personnel. Priority is being given to the development of maternal and child health services in the provincial towns.

Assistance provided during the year. A senior medical officer, a nurse educator in midwifery, two public-health nurses and a public-health nurse midwife.

Probable duration of assistance. Until mid-1958.

Work during the year. Teaching at the national demonstration and training centre in Baghdad continued. Special attention was given to the establishment of maternal and child health centres in provincial towns, and such centres have been established in most of the fourteen provinces of Iraq.

Iraq 11

Malaria Eradication (1957 - )

Aim of the project. To carry out from 1957 a five year plan for eradication of malaria from the whole country, as an extension of the control programme with which WHO has assisted since 1952.

Assistance provided by WHO during the year. A senior malaria adviser and a sanitarian; an advisory team on malaria eradication, consisting of a malariologist, an entomologist and two technicians, from September to December 1957.

Probable duration of assistance. Five years.

Work during the year. The spraying programme carried out during 1957 afforded protection to the 3,800,000 inhabitants of the country who live in malarious areas. The advisory team investigated the situation and advised on the organization of the future surveillance programme.

Iraq 15

Bilharziasis Control (Nov. 1955 - )

Aim of the project. To assess the present local methods of bilharziasis control, with special reference to snail control, treatment of patients, environmental sanitation and health education; to evolve improved procedures designed to provide more satisfactory control.

Assistance provided by WHO during the year. A public-health engineer and an epidemiologist.

Probable duration of assistance. Until the end of 1959.

Work during the year. Work on sanitation and snail control was continued and epidemiological studies and treatment experiments were carried out.

Iraq 25

Blood Bank (1956 - )

Aim of the project. To establish a blood bank.

Assistance provided by WHO during the year. A consultant for two months. He prepared the outline of a programme for a blood transfusion service for Iraq and made recommendations as regards the blood bank which has been established in Baghdad.

Iraq 28

Fellowships

Anaesthesiology. Extension of a fellowship for study in Denmark and the United Kingdom.

Analytical chemistry. A seven to eight month fellowship for study in the United Kingdom.

Clinical pathology. A twelve-month fellowship for study in the United Kingdom.

Entomology. A twelve-month fellowship for study in the United Kingdom, Italy, Greece and Egypt.

Forensic chemistry. An eight-month fellowship for study in the United Kingdom.

Pharmaceutical course. A four to six month fellowship for study in the United States of America.
### Project List: Eastern Mediterranean

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Plague research.</strong> Two six-month fellowships for study in Iran.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Radiation protection.</strong> A six-week fellowship for study in Belgium.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Virology.</strong> A three to six month fellowship for study in the United States of America.</td>
</tr>
</tbody>
</table>

### Iraq

**Participation in Regional Courses and Meetings**

See EMRO 13; EURO 52; EURO 100.3.

### Israel 5

**Malaria Eradication (1957 - )**

**Aim of the project.** To prepare a plan of operation for implementation of a malaria eradication programme by the national authorities.

**Assistance provided by WHO during the year.** A consultant for one month.

### Israel 18

**Public-Health Laboratory (Sept. 1956 - July 1957)**

**Aim of the project.** To develop a public-health laboratory service adequate for the needs of the population; to establish a co-ordinated programme for public-health, hospital and other laboratories in the country; to establish a programme for in-service training of laboratory personnel.

**Assistance provided by WHO during the year.** (a) A bacteriologist; (b) laboratory supplies and equipment.

**Work done.** The bacteriologist made a general survey of the public-health laboratories in Israel. He gave a training course in venereal serology to bacteriologists from government laboratories, gave practical demonstrations in several laboratories, assisted in the establishment of a venereal-disease reference centre in the Abu Kabir laboratory in Tel Aviv, and advised the Government on a number of subjects.

### Israel 19

**Sanitary Engineering Lecturer, Haifa Technion (Feb. 1956 - )**

**Aim of the project.** To improve environmental sanitation in Israel; to train sanitary staff at the Haifa Technion and elsewhere in the country; to include sanitary engineering courses in the regular engineering curriculum at the Haifa Technion.

**Assistance provided by WHO during the year.** (a) A lecturer in sanitary engineering; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** The lecturer in sanitary engineering continued his participation in the teaching programme of the Haifa Technion. He gave advice on several technical problems, especially on research, and helped in the establishment of research and teaching laboratories at the Technion. He attended a series of committee meetings to draft regulations on environmental sanitation.

### Israel 25

**Assistance to Medical Schools (Sept. 1957 - )**

**Aim of the project.** To strengthen and develop the Department of Anatomy at the Hadassah Medical School of the Hebrew University in Jerusalem.

**Assistance provided by WHO during the year.** A professor of anatomy.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The teaching programme started at the end of October. Plans were made for the establishment of laboratories and for facilities for keeping animals needed for research work.

### Israel 27

**Fellowships**

**Hospital construction.** A grant for two weeks for study in Switzerland.

**Ionizing radiation.** A two-month fellowship for study in France and Italy.

**Mental health.** A three-month fellowship for study in the United Kingdom, Sweden and Switzerland.

**Public-health administration.** A ten-month fellowship for study in the United States of America.

**Public-health nursing.** A three-month fellowship for study in Italy, the United Kingdom and Sweden.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
</table>
| Israel     |                | Participation in Regional Courses and Meetings  
See EURO 56. |
| Jordan 2 TA (ICA) | Nursing Education, Amman (Sept. 1955 - )  
*Aim of the project.* To develop the Amman School of Nursing, started in 1953 with the assistance of the United States International Co-operation Administration, to provide professional nurses for the curative and preventive health services.  
*Assistance provided by WHO during the year.* (a) Extension of a fellowship for undergraduate studies at the Higher Institute of Nursing, Alexandria; (b) teaching and demonstration equipment and supplies. |
| Jordan 3 TA UNICEF | Maternal and Child Health Centre, Amman (June 1954 - )  
*Aim of the project.* To establish a demonstration and training centre in Amman, and to train auxiliary community health visitor midwives; to strengthen health centres throughout the country, and to establish new maternal and child health centres; to provide refresher courses for doctors, nurses and indigenous midwives.  
*Assistance provided by WHO during the year.* A social paediatrician, a public-health nursing instructor and a nurse educator in midwifery.  
*Probable duration of assistance.* Until the end of 1959.  
*Work during the year.* The WHO personnel returned to Jordan early in 1957 and from that time the clinical and teaching work was considerably developed. A new training course for “midwifery and mothercraft nurses” was started in September, and refresher courses for qualified midwives and for nurses practising in the maternal and child health centres of West Jordan were continued. A domiciliary midwifery service was established. |
| Jordan 5 TA | Tuberculosis Control (Jan. 1956 - )  
*Aim of the project.* To establish a tuberculosis control demonstration and training centre in Amman for diagnosis, treatment, home visiting, collection of epidemiological data, training of nursing students and qualified nurses, and health education of the public.  
*Assistance provided by WHO during the year.* (a) A senior adviser and a x-ray technician; (b) supplies and equipment.  
*Probable duration of assistance.* Until the end of 1959.  
*Work during the year.* The opening of the Amman tuberculosis training and demonstration centre was delayed until the end of 1957 because of damage to the x-ray equipment in transit, and delays in repairs. Recruitment of the national staff was completed and the building of the centre prepared. |
| Jordan 10 R ((UNRWA ICA)) | Mental Health, Bethlehem Hospital (Second phase: March 1954 - )  
*Aim of the project.* To improve and expand mental health services as part of the general public-health services; to increase facilities at the Bethlehem Mental Hospital; to establish out-patient clinics, especially in Amman and Jerusalem; to train psychiatric nurses and other mental health workers; to improve facilities for treating the criminally insane and prisoners suffering from minor psychiatric disorders.  
*Assistance provided by WHO during the year.* A mental health expert.  
*Probable duration of assistance.* Until the end of 1957.  
*Work during the year.* An UNRWA medical officer was temporarily attached to the hospital. The workload was again heavy, with an increased number of out-patients, and it was not possible for a counterpart doctor to be provided. The nurses’ home was completed and the training of nurses continued. |
| Jordan 14 TA (ICA) | Blood Bank (June 1956 - )  
*Aim of the project.* To establish a blood bank for the hospital services and to train personnel in its operation.  
*Assistance provided by WHO during the year.* (a) A blood bank expert; (b) supplies. |
Probable duration of assistance. Until the end of 1957.

Work during the year. After some delay, owing to the late arrival of essential equipment, the work of the blood bank was started in September 1957. At the opening ceremony held on 25 September, H.M. the King and the Minister of Health gave their blood as first donors. A mobile blood bank unit was set up.

Earlier in the year the expert carried out a survey in Syria in connexion with the development of a similar project in that country.

Jordan 18

Fellowships

Enteric bacteriology. A four-month fellowship for study in Denmark and the United Kingdom.

Health education. A ten-month fellowship for study in Lebanon.

Public-health administration. A twelve-month fellowship for study in the United Kingdom.

Statistics. A seven-month fellowship for study in Lebanon.

Lebanon 4

Rural Health Unit (Sept. 1957 - )

Aim of the project. To develop rural health services, beginning with a rural health unit, and later establishing a service and a health department for the district of South Lebanon.

Assistance provided by WHO during the year. (a) A public-health adviser; (b) supplies and equipment.

Probable duration of assistance. Until the end of 1959.

Work during the year. The public-health adviser established contacts with the authorities and started a survey of the proposed area and preliminary work for the development of the project.

Lebanon 13

Public-Health Laboratory (April 1957 - )

Aim of the project. To establish in Beirut a central public-health laboratory, as part of the national health services, to: (a) give diagnosis services in the public-health field; (b) carry out epidemiological studies and provide laboratory services in connexion with diseases found in Lebanon; (c) prepare and stock vaccines, sera, etc.; (d) train technicians.

Assistance provided by WHO during the year. (a) A laboratory technician; (b) two fellowships—for study of anatomical pathology, and parasitology and mycology respectively; (c) smallpox vaccine.

Probable duration of assistance. Until the end of 1958.

Work during the year. Work at the public-health laboratory began in October 1957.

Lebanon 14

Rehabilitation of Handicapped Children (May 1955 - July 1957)

Aim of the project. To provide a treatment, rehabilitation and training centre at the Cité des Apprentis for UNICEFchildren handicapped physically by accident or disease, and to establish a school of physiotherapy.

Assistance provided by WHO during the year. A physiotherapist and a prosthetic technician.

Work during the year. Six apprentices were trained by the prosthetic technician. The physiotherapist assisted in establishing a small physiotherapy centre at the American University Hospital.

Lebanon 16

Tuberculosis Control (Sept. 1955 - )

Aim of the project. To make an epidemiological survey of tuberculosis; to improve the services at the tuberculosis centre in Beirut, and later the tuberculosis control services throughout the country.

Assistance provided by WHO during the year. A ten-month fellowship for study in Italy.

Probable duration of assistance. Until the end of 1959.

Lebanon 19

Cancer (Nov. 1957 - )

Aim of the project. To compile information on the incidence of cancer and mortality from the disease, in order to improve the diagnosis and treatment in hospitals and institutions.

Assistance provided by WHO during the year. A short-term consultant, to make a preliminary survey as a basis for a national anti-cancer campaign.

Probable duration of assistance. Until the end of 1957.
Lebanon 25

TA

Social and Occupational Health (Nov. 1957 - )

Aim of the project. To improve and extend the industrial hygiene services in Lebanon.

Assistance provided by WHO during the year. A short-term consultant in industrial health for two months to make a survey.

Lebanon 26

Fellowships

Anaesthesiology. A three-month fellowship for study in France.

Poliomyelitis vaccine. A fellowship of two and a half months for study in the United States of America and Canada.

Psychiatric nursing. A twelve-month fellowship for study in the United Kingdom.

Public-health administration. A twelve-month fellowship for study in the United States of America and a one-month fellowship for study in Scandinavia.


Quarantine methods. A three-month fellowship for study in France, Italy and Egypt.

Radiation protection. A six-week fellowship for study in Belgium.

Social pediatrics. A seven-month fellowship for study in France.

Lebanon 27

TA

Fellowships

Public-health nursing. Two twelve-month fellowships for study in Belgium.

Libya 2

R

UNICEF

Maternal and Child Health Demonstration and Training Centre, Tripolitania (April 1954 - )

Aim of the project. To establish a demonstration and training centre which will train community midwives, demonstrate modern methods of mother and child care, and provide practical training under rural conditions.

Assistance provided by WHO during the year. A medical officer and a public-health nurse.

Probable duration of assistance. Until the end of 1959.

Work during the year. The development of the project continued on schedule. The premises of the Suk el Juma centre were enlarged. Maternal and child health centres were opened, in the old city of Tripoli, Zliten, and Yefren. Teaching programmes for health auxiliaries were carried out on a large scale.

Libya 3

TA

UNICEF

Nursing Education, Tripoli (Sept. 1955 - )

Aim of the project. To develop modern nursing education adapted to local needs and resources in order to provide professional nurses for the country’s health services.

Assistance provided by WHO during the year. (a) Three nurse educators; (b) teaching and demonstration equipment and supplies.

Probable duration of assistance. Beyond 1959.

Work during the year. The school building and residence were completed, furniture, teaching and demonstration equipment were installed, and clerical and domestic staff engaged. Clinical areas were selected for development, and a tentative plan of studies was formulated. Eleven assistant nurses and one student nurse were admitted to the school in August. Two Libyan nurses worked with the WHO nurse educators.
### Libya 7

**TA UNICEF**

**Project No.** 7  
**Source of Funds**  
**Co-operating Agencies**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Sanitary Officers and Sanitarians’ Institute, Benghazi (Dec. 1955 - )** | **Aim of the project.** To establish a school for training sanitary officers and sanitarians, to provide facilities for training auxiliary health personnel already working in Libya.  
**Assistance provided by WHO during the year.** (a) A public-health administrator as school director (until March), and a sanitary instructor; (b) teaching equipment.  
**Probable duration of assistance.** Until 1960.  
**Work during the year.** The training centre was completed and inaugurated in March. Students were recruited from the three provinces of Libya—twenty-five for a course for medical assistants and twenty-one for a course for sanitarians. Lectures started on 1 April. |

### Libya 12

**TA UNICEF**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Maternal and Child Health Demonstration and Training Centre, Benghazi (Sept. 1956 - )** | **Aim of the project.** To establish a centre for demonstrating modern methods of maternal and child care, and training community midwives to serve in rural and urban maternal and child health centres throughout Cyrenaica.  
**Assistance provided by WHO during the year.** A social paediatrician, two nurse midwife tutors, and a public-health nurse.  
**Probable duration of assistance.** Until 1960.  
**Work during the year.** The premises were completed and the centre officially inaugurated in March. The prenatal and child care service was started on 1 April. Twelve students (health auxiliaries) were selected and the training course began in August. |

### Libya

| **Fellowships** | **Undergraduate medical studies.** Five fellowships were awarded, and three were extended. |

### Pakistan 9

**R UNICEF**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Maternal and Child Health Centre, Karachi (Oct. 1953 - June 1957)** | **Aim of the project.** To establish a centre in which to demonstrate maternal and child health services, and to train community health visitors and dais (auxiliary midwives) for the provincial maternal and child health programme.  
**Assistance provided by WHO during the year.** A social paediatrician, two public-health nurse educators and two nurse educators in midwifery. |

### Pakistan 10

**TA UNICEF**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Maternal and Child Health Demonstration and Training Centre, Dacca (Feb. 1955 - Dec. 1956)** | **Aim of the project.** To establish a centre in which to demonstrate maternal and child health services; to train community health visitors for the provincial maternal and child health programme; to train doctors, medical undergraduates and graduate and undergraduate nurses in maternal and child health work.  
**Assistance provided by WHO during the year.** Two public-health nurse tutors and two midwife tutors. |

### Pakistan 12

**TA UNICEF**

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Tuberculosis Control Demonstration and Training Centre, Dacca (March 1953 - Jan. 1957)** | **Aim of the project.** (a) To establish a model tuberculosis control clinic, as a centre for training staff in tuberculosis control; (b) to develop a tuberculosis service for East Pakistan.  
**Assistance provided by WHO during the year.** (a) A senior tuberculosis adviser and a public-health nurse; (b) extension of a fellowship. |
### Tuberculosis Control (BCG Vaccination) (Nov. 1951 - )

**Aim of the project.** To continue the BCG vaccination programme and expand it into a mass campaign; to train personnel for a permanent BCG vaccination service.

**Assistance provided by WHO during the year.** A BCG medical officer and a BCG nurse.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** The first stage of the BCG mass campaign in West Pakistan ended in 1957, and plans were elaborated by the international team in cooperation with the national authorities for a second mass vaccination campaign in areas where tuberculin allergy levels had not proved satisfactory.

In East Pakistan a mass vaccination campaign was started, but progress was hampered by adverse weather conditions and floods. Intensive training and re-training of the campaign’s personnel was carried out.

Two national BCG assessment teams were created, one for each part of the country, to study post-vaccination allergy levels and to assist in the planning of future campaign activities.

### Venereal Disease Centre, Chittagong (July 1956 - )

**Aim of the project.** (a) To demonstrate modern methods of venereal-disease control; (b) to train local physicians, serologists and nurses; (c) to extend venereal-disease services to the inhabitants of Chittagong and to seafarers passing through its port.

**Assistance provided by WHO during the year.** (a) A senior medical adviser, a serologist and a public-health nurse; (b) supplies and equipment.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** After the completion of preliminary studies, the centre was opened for full work in June. Serological surveys were carried out amongst seamen working with shipping companies in the port of Chittagong.

### Nursing Education, Dacca (Oct. 1952 - Dec. 1957)

**Aim of the project.** To increase the number of professional nurses in East Pakistan by improving instruction and practice facilities at the Dacca Medical College Hospital and School of Nursing; to introduce public health and its nursing aspects into the basic curriculum and to organize ward services for clinical practice.

**Assistance provided by WHO during the year.** (a) A senior nurse educator, a nurse midwife and a public-health nurse; (b) supplies and equipment.

**Work done.** Despite shortage of staff and other difficulties, some progress has been made. A nucleus of qualified instructors and administrative staff has become available, and the curriculum has been revised, with public health and its nursing aspects introduced during the pre-clinical period. Teaching of paediatrics has been included in the programme. Clinical practice areas for students have been organized and teaching facilities improved. Quarters for students and nursing personnel have been improved. In the last three months of 1957, nurses from Dacca assumed major responsibility for the programme.

### Assistance to Medical Schools, West Pakistan (April 1952 - May 1957)

**Aim of the project.** To help improve the teaching facilities of the Department of Physiology of Dow Medical College, and to prepare local personnel for teaching positions.

**Assistance provided by WHO during the year.** A visiting Professor of Physiology.
### Pakistan 21

**Source of Funds:** TA  
**Co-operating Agencies:**  
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| 21          | TA              |                       | Nursing Adviser to Central Government, Karachi (July 1953 - )  
Aim of the project. To develop and improve nursing education and nursing services.  
Assistance provided by WHO during the year. A senior nurse adviser.  
Probable duration of assistance. Until the end of 1958.  
Work during the year. Assistance was given to the Central Government, the Trained Nurses Association and the Pakistan Nursing Council in formulating policies for nursing education and service in the country. Material for manuals on nursing and midwifery were compiled and reviewed for future publication. The revision of a guide on minimum essential hospital equipment was begun. The curricula for schools of nursing were studied with a view to strengthening the plan of studies. Courses for maternal and child health visitors were reduced from twenty-eight to twenty-four months. |

### Pakistan 22

**Source of Funds:** TA  
**Co-operating Agencies:**  
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| 22          | TA              |                       | Sanitary Engineer, West Pakistan (Feb. 1957 - )  
Aim of the project. To improve environmental conditions in West Pakistan, by providing basic sanitary facilities, including potable water supplies, and waste and excreta disposal and collection; to design, construct and operate sanitary engineering works in connexion with extensive programmes of social welfare, satellite town construction and rural improvements.  
Assistance provided by WHO during the year. (a) A sanitary engineer; (b) supplies and equipment.  
Probable duration of assistance. Until the end of 1958.  
Work during the year. After carrying out a survey in Karachi, the adviser helped to establish a public-health engineering section in the West Pakistan Ministry of Health in Lahore. |

### Pakistan 23

**Source of Funds:** R  
**Co-operating Agencies:** UNICEF  
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| 23          | R               | UNICEF                | Children's Hospital, Karachi (Oct. 1956 - )  
Aim of the project. To set up a children's hospital in Karachi, which will give full paediatric, medical, surgical and specialist services, and train medical students, doctors and student and graduate nurses in paediatrics and child health.  
Assistance provided by WHO during the year. A senior paediatrician and a paediatric nurse.  
Probable duration of assistance. Until 1961.  
Work during the year. The Children's Hospital moved to new premises in January and the paediatric nurse helped to establish nursing services. In June the senior paediatrician and the national staff started in-service training and reorganization of the services. |

### Pakistan 25

**Source of Funds:** R  
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| 25          | R               |                       | School of Physiotherapy, Karachi (Jan. 1956 - )  
Aim of the project. To establish a school of physiotherapy based on the former Physiotherapy Department at the Jinnah Hospital; to give a full diploma course in physiotherapy to men and women students.  
Assistance provided by WHO during the year. (a) A physiotherapist; (b) supplies and equipment.  
Probable duration of assistance. Until the end of 1959.  
Work during the year. Teaching continued and a second group of students was enrolled. |

### Pakistan 27

**Source of Funds:** R  
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
| 27          | R               |                       | Fellowships  
Poli-diagnostic methods. A three-month fellowship for study in the United States of America and Canada.  
Rehabilitation. A three-week fellowship for study in Indonesia. |

### Pakistan

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
</tr>
</thead>
</table>
|             |                 |                       | Participation in Regional Courses and Meetings  
See EMRO 13. |
**Description**

**Malaria Control** (March 1952 - )

**Aim of the project.** To extend malaria control work and to train local staff.

**Assistance provided by WHO during the year.** (a) A senior adviser (entomologist), a sanitarian and a junior malarialogist; (b) a twelve-month fellowship for study of parasitology and entomology; (c) supplies and equipment for training purposes.

**Probable duration of assistance.** Until mid-1959.

**Work during the year.** The international team continued larvicidal operations in Jeddah town and residual spraying operations in Wadi-Fatma villages, and in the villages scattered in the valleys of the Hedjaz escarpment. The team was also given the technical responsibility of the national antimalaria programme in the Eastern Province, which is protecting a population of 150 000.

Malaria has been practically eliminated from the project area and no anopheline larvae or adults were found in Jeddah. The area is, however, vulnerable to imported cases, and to Anopheles gambiae from foci in the neighbouring hills or brought by maritime traffic. Blood samples collected from 13 818 pilgrims arriving at Jeddah by sea showed a parasite rate of 0.2 per cent. and some positive cases among pilgrims were found.

An addendum to the plan of operations was prepared to define the future responsibilities of the international team during the expansion phase of the national antimalaria programme. The team will plan the work of the new antimalaria units, and intensify the training of the national auxiliary personnel needed by these units.

**Anaesthesiology, Riad** (Nov. 1956 - )

**Aim of the project.** To train Saudi Arabian physicians and technicians in modern methods of anaesthesia.

**Assistance provided by WHO during the year.** An anaesthesiologist.

**Probable duration of assistance.** Until late in 1958.

**Work during the year.** The anaesthesiologist established an anaesthesiology section at the Shemaisi Hospital in Riad. A permanent national counterpart was appointed and training of local personnel progressed satisfactorily. A considerable workload was dealt with successfully.

**Fellowships**

**Maternal and child health.** Two twelve-month fellowships for study in Italy.

**Maternal and child health.** Three twelve-month fellowships for study in Italy.

**Participation in Regional Courses and Meetings**

See EMRO 13.
**Project List: Eastern Mediterranean**

**Sudan 3**

**Project No.**

**Source of Funds**  
R  
**Co-operating Agencies**  
UNICEF

**Description**

**Tuberculosis Control (BCG) (Second phase: Oct. 1956 - )**

*Aim of the project.* To carry out a mass campaign in the southern and central provinces, based on the results of the survey carried out in the first phase.

*Assistance provided by WHO during the year.* A BCG medical officer and two BCG nurses.

*Probable duration of assistance.* Until mid-1959.

*Work during the year.* Mass vaccination was carried out in the Upper Nile, Bahr el Ghazal and Equatoria Provinces, but adverse weather conditions and logistic difficulties seriously hampered progress.

**Sudan 6**

**Project No.**

**Source of Funds**  
TA  
**Co-operating Agencies**  
UNICEF

**Description**

**Malaria Pilot Project (Nov. 1956 - )**

*Aim of the project.* To carry out a malaria control pilot project in the Northern Fung and Sennar districts of the Blue Nile Province.

*Assistance provided by WHO during the year.* (a) A malariologist, an entomologist, and a public-health sanitarian; (b) a two-month fellowship for study of tropical medicine; (c) laboratory equipment and supplies.

*Probable duration of assistance.* Until 1959.

*Work during the year.* The WHO team established its headquarters in Sennar town in January 1957. After completion of the pre-operational malariometric survey, the residual spraying operations with dieldrin started in May. They were completed by the end of June, giving protection to a population of 225,000 living in 620 villages. Post-operative entomological surveys showed absence of *Anopheles gambiae* in sprayed villages. Progress was made with training of national personnel. The entomologist made tests of the resistance of anopheline malaria vectors, and of the sorption of insecticides by wall surfaces.

**Sudan 7**

**Project No.**

**Source of Funds**  
R  
**Co-operating Agencies**  
TA (fellowships)

**Description**

**Nursing Education, Khartoum (Oct. 1955 - )**

*Aim of the project.* To establish a professional school of nursing which will prepare carefully selected young women to assume leadership in all nursing aspects of the health programme of the country.

*Assistance provided by WHO during the year.* (a) Three nurse educators; (b) teaching and demonstration and other equipment.

*Probable duration of assistance.* Beyond 1959.

*Work during the year.* Administrative and teaching units of the school were moved to the new permanent building; teaching equipment and furniture were installed. The master programme of studies for the school was formulated and the outlines of the first year courses were revised in the light of the previous year’s experience. The first class of six students, enrolled in 1956, continued without interruption and entered the second year. Despite a well planned publicity campaign only one student was enrolled in September for the first year.

Five Sudanese students were enrolled at the Higher Institute of Nursing, University of Alexandria (see EMRO 5) and upon graduation they will gradually assume teaching and administrative posts in the Khartoum school. The main responsibilities for planning and conducting the total programme were assumed by the three WHO nurse educators; two Sudanese nurses acted as counterparts and assisted in various phases of the programme.

**Sudan 8**

**Project No.**

**Source of Funds**  
R

**Description**

**Trypanosomiasis Control, Zande Area (Second phase: 1956 - Dec. 1957)**

*Aim of the project.* To organize emergency measures for trypanosomiasis control, by chemoprophylaxis in the first instance, especially in the Zande area, which has a population of about 30,000; to plan permanent trypanosomiasis control in that and other areas.

*Assistance provided by WHO during the year.* Supplies and equipment.


**Sudan 9**

**Project No.**

**Source of Funds**  
TA

**Description**

**Tuberculosis Control, Wadi Medani (Nov. 1956 - )**

*Aim of the project.* (a) To study epidemiology and prevalence of tuberculosis in the Gezira irrigation area; (b) to train staff for the tuberculosis control services; (c) to establish a school for tuberculosis health visitors;
(d) to demonstrate tuberculosis control at a centre at Wadi Medani and provide a tuberculosis control service for the town and surrounding area.

**Assistance provided by WHO during the year.** (a) A senior adviser, an x-ray technician, a laboratory technician and a public-health nurse; (b) a four-month fellowship for study of chest diseases and a two-month fellowship for study of chest surgery; (c) supplies and equipment, including two transport vehicles.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** Installation of the tuberculosis control centre in Wadi Medani was nearly completed and work was begun on a reduced scale. Progress was made with training tuberculosis health visitors and the staff of the centre.

### Sudan 11
- **Fellowships**

  **Health education.** Two four-month fellowships for study in the United Kingdom.

### Sudan 18
- **Public-Health Administration (Nov. 1957)**

  WHO provided a consultant for two weeks to assist the Government in planning and developing health services.

### Sudan 21
- **Chironomidae Control (Nov. - Dec. 1957)**

  **Aim of the project.** To control the green nemitti fly.

  **Assistance provided by WHO during the year.** Supply of DDT.

  **Work during the year.** A WHO specialist went twice to Sudan to assist in the technical aspects of the control of the green nemitti fly.

### Sudan 24
- **Fellowships**

  **Chest surgery (cancer).** A two-month fellowship for study in the United Kingdom and Germany.

  **Industrial health.** A two-month fellowship for study in Europe.

  **Laboratory techniques.** A two-month fellowship for study in the United Kingdom.

  **Public-health administration.** A three-month fellowship for study in Europe, and a two-month fellowship for study in the United Kingdom.

### Sudan 25
- **Fellowships**

  **Nursing.** Three fellowships for undergraduate studies at the Higher Institute of Nursing, Egypt, and extension of two fellowships for study of basic nursing in Egypt.

### Sudan 26
- **Onchocerciasis Control (Nov. 1957 - )**

  **Aim of the project.** To investigate problems of blindness in the Sudan and its prevention by onchocerciasis control.

  **Assistance provided by WHO during the year.** Supplies and equipment.

  **Probable duration of assistance.** Until the end of 1959.

### Sudan
- **Participation in Regional Courses and Meetings**

  See EMRO 13.
Project No. | Source of Funds | Co-operating Agencies
--- | --- | ---
Syria 2 | TA | UNICEF
Syria 4 | R |
Syria 23 | R |
Syria | |
Tunisia 3 | TA | UNICEF

**Malaria Eradication** (March 1956 - )

*Assistance provided by WHO during the year.* (a) A malarialogist, an entomologist and a sanitarian; (b) laboratory equipment and supplies.

*Probable duration of assistance.* Five years.

*Work during the year.* The spraying operations started early in April and continued until August to protect 870,000 inhabitants, a quarter of a million less than the target figure. The international team gave advisory services, and contributed to the training programme.

**Bilharziasis Control, Jezireh Province** (Dec. 1953 - Dec. 1957)

*Aim of the project.* To control bilharziasis and malaria by a combined project in the Jezireh area, and pilot demonstrations of control, first in limited districts and expanding later. Bilharziasis is to be controlled by destroying the snail vector, by improved sanitation, health education to promote better personal hygiene, and the treatment of cases; malaria is to be controlled principally by residual spraying, after surveys.

*Assistance provided by WHO during the year.* (a) A medical officer (team leader), a public-health engineer and a sanitarian; (b) supplies and equipment.

*Work during the year.* WHO assistance to the project was temporarily suspended at the beginning of the year. The team resumed its duties in February and carried out the following work: bilharziasis control, including epidemiological investigations, case-finding and treatment, snail-killing with copper sulfate and sodium pentachlorophenate, health education and some environmental sanitation improvements. Bilharziasis control methods were demonstrated in adjacent Turkish territory, with the co-operation of the two Governments.

**Fellowships**

*Hygiene and tropical medicine.* A twelve-month fellowship for study in the United Kingdom.

*Maternal and child health.* Two fellowships, one of ten months and the other of twelve months, for study in France.

*Paediatrics.* A three-month fellowship for study in Europe.

*Public-health administration.* A three-month fellowship for study in Canada and the United States of America.

*Statistics.* A seven-month fellowship for study in Lebanon.

*Surgery.* A four-month fellowship for study in France.

**Participation in Regional Courses and Meetings**

See EMRO 13; EURO 56.

**Communicable Eye Disease Control** (Nov. 1953 - )

*Aim of the project.* To carry out (a) a mass campaign against seasonal conjunctivitis; (b) systematic and collective treatment of trachoma in schools, and (c) a programme of research.

*Assistance provided by WHO during the year.* An ophthalmologist and a short-term consultant (until March 1957).

*Probable duration of assistance.* Until 1959 (consultants' visits).

*Work done.* The earlier part of the campaign against trachoma and seasonal conjunctivitis was concentrated in the inhabited areas of the southern half of Tunisia, where eye diseases were more prevalent. Every year campaigns for the treatment of trachoma were carried out from November to June in the schools, and mass campaigns for the prevention of seasonal conjunctivitis were carried out among the population between July and October.
The short-term consultant advised the Government on the expansion of the programme, which is gradually to cover the whole of the country.

Although the ophthalmologist was withdrawn in March, UNICEF and WHO will continue to provide supplies and equipment and visits by short-term consultants, including a virologist to help in the research programme on trachoma and other ophthalmias.

**Tunisia 6**

**Maternal and Child Health (Oct. 1957 - )**

*Description.* To establish a maternal and child health training and demonstration centre in Tunis; to expand the maternal and child health programme; to train professional and auxiliary personnel.

*Assistance provided by WHO and work done during the year.* (a) A short-term consultant, who began a survey; (b) a three-month fellowship.

*Probable duration of the project.* Until the end of 1959.

**Tunisia 10**

**Nursing Education (Sept. 1955 - July 1957)**

*Description.* To develop and strengthen basic nursing education in the School of Nursing in Tunis.

*Assistance provided by WHO during the year.* (a) Two nurse educators; (b) a twelve-month fellowship.

*Work during the year.* The basic nursing curriculum was reorganized to include the social and preventive aspects of nursing and to provide supervised practice in hospital wards for students.

**Tunisia 14**

**Fellowships**

*Health education.* A six-week fellowship for study in Egypt.

*Ophthalmology.* Two sixteen-month fellowships for study in France.

*Statistics.* A seven-month fellowship for study in Lebanon.

*Tuberculosis control.* A fellowship of three and a half months for study in Denmark.

**Tunisia 17**

**Malaria Eradication (Sept. 1957 - )**

*Description.* First phase: To prepare a plan of operation for a malaria eradication programme.

*Assistance provided by WHO and work done during the year.* A consultant for three months who made a preliminary survey.

*Probable duration of assistance.* Until the end of 1959.

**Tunisia 18**

**Environmental Sanitation (Sept. 1957 - )**

*Description.* To establish a national programme of environmental sanitation, including a rural sanitation pilot project in one province.

*Assistance provided by WHO and work done during the year.* A consultant (sanitary engineer) for three months, who made a preliminary survey.

*Probable duration of the project.* Until the end of 1959.

**Tunisia 22**

**Ophthalmological Centre (Nov. 1957 - )**

*Description.* To study the etiology of trachoma and related eye diseases in Tunisia, particularly the virological aspects; to develop laboratory facilities for the application of modern techniques and a basic programme of research.

*Assistance provided by WHO during the year.* A virologist.

*Probable duration of assistance.* Until the end of 1959.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Tunisia</td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td></td>
<td>See EMRO 13.</td>
</tr>
</tbody>
</table>

**Yemen 3**

**R**

**Public-Health Administration** (Feb. 1954 - Sept. 1957)

*Aim of the project.* To expand health facilities throughout the country.

*Assistance provided by WHO during the year.* (a) A public-health adviser to the Government; (b) supplies.

*Work during the year.* The public-health adviser made a survey of health conditions in several parts of the country and gave advice on various aspects of the health services.

**Yemen 8**

**TA**

**Health Centre, Sana’a** (July 1956 - )

*Aim of the project.* (a) To provide basic public-health facilities to the inhabitants of Sana’a; (b) to train auxiliary personnel in basic public-health measures; (c) to study the prevalence of disease in Sana’a and its neighbourhood. This study will serve as a guide for further WHO assistance in Yemen.

*Assistance provided by WHO during the year.* (a) A medical officer and a sanitarian; (b) supplies and equipment, including an x-ray unit.

*Probable duration of assistance.* Until 1961.

*Work during the year.* A health centre was established in Sana’a, where curative and preventive services were progressively developed. A training programme for sanitary officers and assistant sanitarians was established.

**Yemen 11**

**R**

**Fellowships**

*Undergraduate medical studies.* Extension of a fellowship for study in Egypt.

**Yemen 12**

**TA**

**Fellowships**

*Undergraduate medical studies.* Extension of two fellowships for study in Egypt.
WESTERN PACIFIC

Project No. Source of Funds Co-operating Agencies

WPRO 22 R UNICEF

Yaws Control, Fiji (Nov. 1954– ), Western Samoa (June 1955– ), British Solomon Islands Protectorate (May 1956– ), Gilbert and Ellice Islands Colony (Jan. 1957– )

Aim of the project. To reduce the prevalence of yaws by mass examination and treatment with penicillin and, ultimately, to eliminate the disease as a public-health problem; to train local personnel in the diagnosis, therapy and epidemiology of yaws.

Assistance provided by WHO during the year. (a) A medical officer, a serologist and a male nurse administrator; (b) supplies and equipment.

Probable duration of assistance. Until the end of 1959.

Work during the year.

Fiji. Only the remote island of Nyau, with about 600 people, remains to be covered to complete the initial treatment survey of Fiji; about 151,600 people have been surveyed—almost the total Fijian population. The first re-survey of the population was started and was half completed by the end of the year. The second re-survey of the pilot project area, Savusavu, was completed; among the 4417 people surveyed, only one case of infectious yaws was diagnosed was a visitor from another area. Administrative work in connexion with the project is under the direction of the Medical Department and one team is assigned to carry out the re-surveys with the rural health personnel.

Western Samoa. The second mass re-survey was completed rapidly and successfully, by the rural health personnel assisted by the yaws control field teams. The data collected in the second re-survey of the pilot project area showed that the new cases of yaws were exclusively amongst those that had been absent when the treatment campaign was carried out.

Gilbert and Ellice Islands Colony. During July the mass campaign was completed on Tabiteuea, Nikunau, Onotoa, Maiana and Abemana. All the people on each island were examined and treated. The campaign in the Gilbert Islands continued.

British Solomon Islands Protectorate. The campaign made rapid progress, and more than two thirds of the islands of the Protectorate have been surveyed. The first re-survey started in September. The plan of operations for this campaign includes leprosy control also. A short-term consultant visited the Islands for six weeks to review the situation, before the preparation of a detailed plan of campaign.

WPRO 23 TA

Study Group on Teaching of Social and Preventive Medicine, Manila (16-29 Oct. 1957)

Aim of the project. To provide an opportunity for medical educators to discuss the undergraduate teaching of social and preventive medicine in the medical schools of the Region.

Assistance provided by WHO. (a) A short-term consultant for five weeks; (b) grants to twenty-three participants from Australia, Cambodia, China, Fiji, Hong Kong, Japan, Korea, New Zealand, Philippines, Singapore, and Viet Nam; (c) supplies.

Work done. Several deans of medical schools and of the clinical professions and professors of preventive medicine participated in the discussions, which centred around objectives, curriculum content and methodology of teaching of social and preventive medicine, organization of the department of social and preventive medicine, its relationship with other departments, comprehensive health care, practice facilities and research. The study group was divided into two sub-groups which met separately to deal with each item of the agenda. After completion of their discussions the groups reported to a plenary meeting.

WPRO 32 R (Rockefeller Foundation)

Public-Health Conference and Study Tour, Japan and Taiwan (13 - 30 Sept. 1957)

Aim of the project. To enable public-health administrators from countries in the Region to exchange experience and study problems.

Assistance provided by WHO. Travel and stipends of fourteen participants from Australia, Cambodia, China, Hong Kong, Japan, Korea, Laos, New Zealand, Philippines, United States of America (US International Co-operation Administration), Viet Nam, West New Guinea. The Rockefeller Foundation provided a short-term consultant.

Work done. The group visited nearly thirty institutions etc.—research laboratories, medical schools, institutes of public health, nursing education projects, vital and health statistical services, environmental
sanitation projects, hospitals, health centres and stations, maternal and child health services, services for crippled children, and programmes for control of communicable diseases such as malaria, tuberculosis, leprosy, venereal diseases and trachoma. During seven conference sessions, the group considered the subject of comprehensive health planning, including community development.

**WPRO 34**

**Leprosy Consultant: Taiwan, Korea and British Solomon Islands Protectorate (9 Aug. - 4 Nov. 1957)**

**Aim of the project.** To review the leprosy problem, and the facilities available for dealing with it, in selected countries of the Region, and to make recommendations.

**Assistance provided by WHO.** A leprosy consultant for three months.

**WPRO 37**

**Poliomyelitis Centres, Singapore and Tokyo (June 1956 - )**

**Aim of the project.** To set up laboratory centres to: collect and study strains of poliomyelitis virus from different parts of the Region; undertake epidemiological studies for the eventual use of the vaccines; train WHO fellows as far as facilities permit.

**Assistance provided by WHO during the year.** Laboratory supplies.

**Work during the year.** The centres were engaged in the work of isolating, typing and studying poliomyelitis viruses from specimens sent by Member countries and their territories. They assisted in the planning of surveys and examined specimens sent them in order to estimate the populations' state of immunity to poliomyelitis. Advice was given to enable Member governments gradually to undertake virus work themselves.

**WPRO 38**

**Training in Health Education (July 1957 - )**

**Aim of the project.** To provide training in health education to health and education workers of native origin from the territories of the South Pacific by means (a) of a course to enable them (1) to study the basic principles underlying health education and their application in the territories; (2) to exchange ideas on health education activities and programmes now in progress; and (3) to study plans for further development; (b) of continuous guidance to the trainees in their respective territories.

**Assistance provided by WHO during the year.** (a) A health education specialist and two short-term consultants; (b) fellowships to forty-one participants from American Samoa, British Solomon Islands Protectorate, Cook Islands, Fiji, French Settlements in Oceania, Guam, Nauru, New Caledonia, New Hebrides, Niue, Northern Territory of Australia, Papua and New Guinea, Tonga, United States Trust Territories of the Pacific, Wallis Islands, West New Guinea, Western Samoa, and Uganda (East Africa); (c) supplies.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The training course, held in Noumea, New Caledonia, from 1 July-21 August, was organized jointly by the South Pacific Commission and WHO. At the beginning of the course the health education needs and problems of the trainees were discussed and analysed. Four study groups were set up to deal with the following questions and subjects: (1) what are the common health needs and problems of the village life? (2) who and what influence the health of the village? (3) how people grow up in different communities; (4) how people learn and change their behaviour; (5) planning and organizing health education programmes and activities; (6) use of health education methods and techniques.

The WHO health education specialist made the first follow-up visit to trainees in the British Solomon Islands, West New Guinea, and Papua and New Guinea.

**WPRO 50**

**Industrial Health (Fellowships)**

**Aim of the project.** To provide fellowships for candidates from various countries of the Region to study for the Diploma in Public Health, with emphasis on industrial health, at the University of Malaya, Singapore.

**Assistance provided by WHO during the year.** Three nine-month fellowships to one candidate from Japan and two from Hong Kong.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Co-operating Agencies</th>
<th>Description</th>
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<td>WPRO 64</td>
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<td>R</td>
<td>Medical Literature and Teaching Equipment</td>
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<td><strong>Aim of the project.</strong> To supply small quantities of essential literature, equipment and supplies to Member governments for work on demonstrations, training projects and pilot studies.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> Medical literature to Japan and Sarawak.</td>
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<tr>
<td>WPRO 65</td>
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<td>R</td>
<td>Publication of Japanese Paper on Resistance to Insecticides</td>
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<td><strong>Aim of the project.</strong> Translation and publication of Japanese articles on insect resistance to insecticides for distribution to workers in the same field.</td>
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<td><strong>Assistance provided by WHO and work done during the year.</strong> Financial provision for translation and publication. Thirty-six papers were translated and edited.</td>
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<tr>
<td>American Samoa</td>
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<td>Participation in Regional Courses and Meetings</td>
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<td>Australia 1</td>
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<td>R</td>
<td>Fellowships</td>
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<td><strong>Clinical pathology.</strong> A twelve-month fellowship for study in the United Kingdom.</td>
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<td><strong>Public-health administration.</strong> An eight-month fellowship for observation in the United States of America, the United Kingdom and continental Europe.</td>
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<td><strong>Tropical medicine and hygiene.</strong> A four-month fellowship for observation in the Federation of Malaya, India and Africa.</td>
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<tr>
<td>Australia</td>
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<td>Participation in Regional Courses and Meetings</td>
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<tr>
<td>British Solomon Islands Protectorate</td>
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<td>Participation in Regional Courses and Meetings</td>
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<td>See WPRO 38.</td>
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<tr>
<td>Cambodia 1</td>
<td>TA</td>
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<td>Malaria Control (Oct. 1950 - )</td>
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<td><strong>Aim of the project.</strong> To organize antimalaria services; to demonstrate methods of malaria control; to train personnel.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> (a) A malariologist; (b) supplies.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td><strong>Work during the year.</strong> Good progress was made with the spraying programme, which by the end of September had covered an area with a population of about 715,200. All the malarious regions have now been covered with the exception of three small areas. In order to interrupt malaria transmission successfully, the isolated farm huts in which people may spend up to six months a year had to be found and sprayed, as well as houses in the villages. Chloroquine was distributed as a supplementary measure of protection for the population. The team suspects that malaria in some of the mountainous areas is being transmitted by Anopheles leucosphyrus, and work on this problem was pursued. The possibility of utilizing medicated salt in certain areas was explored.</td>
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<tr>
<td>Cambodia 3</td>
<td>R</td>
<td>UNICEF</td>
<td>Nursing Education, Phnom-Pen (Dec. 1951 - )</td>
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<tr>
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<td>(ICA) (Asia Foundation)</td>
<td><strong>Aim of the project.</strong> To set up a school of nursing in Phnom-Pen; to develop nursing and midwifery training.</td>
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<td><strong>Assistance provided by WHO during the year.</strong> (a) A senior nurse educator and three nurse educators—two in general nursing and one in midwifery; (b) supplies.</td>
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<td><strong>Probable duration of assistance.</strong> Until the end of 1959.</td>
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<td><strong>Work during the year.</strong> The curriculum for the two-year nursing course was revised and WHO staff and counterparts now teach nursing arts and assist with clinical teaching and supervision of all student nurses.</td>
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</table>
Counterpart personnel are gradually being given positions of greater responsibility. A Cambodian nurse was appointed assistant director of the School of Nursing. Assistance in midwifery education continued at the School of Midwifery where training courses were also given for rural midwives.

The Asia Foundation provided fellowships for two groups of nurses to visit Bangkok for several weeks.

Cambodia 4

Maternal and Child Health, Phnom-Penh (Jan. 1952 - )

Aim of the project. To teach modern methods of maternal and child care adapted to the country's resources and cultural background; to improve the teaching of obstetrics and child care in the Phnom-Penh schools of nursing and midwifery; to improve the teaching of paediatrics, obstetrics and gynaecology at the Royal School of Medicine; to demonstrate methods of combining curative, preventive and educational health services; to extend maternal and child health (including school health) services and make them part of the country's health services.

Assistance provided by WHO during the year. (a) A medical officer and a nurse educator (public health); (b) supplies.

Probable duration of assistance. Until the end of 1959.

Work during the year. In Phnom-Penh, work continued in the school health demonstration and training programme at the Preah Chey Chesdha School, in health teaching at the teachers' training school and in improving and expanding the health services in eight of the larger city schools which have their own dispensary and school nurse. Distribution of UNICEF milk began and help was given in the preliminary organization of this programme.

Other activities included joint consultation and planning with the Government and international agencies on the health content of the programme to be developed at the new home economics centre in the Sutharot School, Phnom-Penh, and in the training courses at the new pedagogic centre and the fundamental education project in Kandal province.

Cambodia 5

Royal School of Medicine, Phnom-Penh (July 1953 - )

Aim of the project. To improve the standard of teaching at the Royal School of Medicine to a professional level; to expand facilities for training hospital assistants.

Assistance provided by WHO during the year. (a) Three lecturers—one in ophthalmology, one in radiology and one in physiology; (b) partial expenses (40 per cent.) of all students enrolled in the degree class (as from the 1957-58 academic year a collective study grant for ten students of the degree class was substituted for the former arrangement); (c) supplies and equipment.

Probable duration of assistance. Until the end of 1959.

Work during the year. The enrolment in the School, excluding the preparatory year, was fifteen students in the doctorate and "officier de santé" sections, thirty-nine in the first year, thirty-two in the second year, thirty-four in the third year and seventeen in the fourth year. Provision of a lecturer in radiology and the sustained efforts of the lecturers already working on the project contributed to raising the standard of teaching. The x-ray facilities at the Phnom-Penh Hospital were improved and the Organization provided an additional x-ray unit. The greater teaching facilities made available for clinical demonstration and for practical experience by the medical students, provided at the same time more extensive services to the patients.

Cambodia 6

BCG Vaccination (Jan. 1955 - Dec. 1956)

Aim of the project. To organize and carry out a mass BCG vaccination programme to give immediate protection to a large section of the community; to lay the foundations for a national BCG vaccination service as part of the tuberculosis control service.

Assistance provided by WHO (cost reimbursed by UNICEF). A BCG nurse (until December 1956).

Work done. By the time WHO assistance ended a national pattern of BCG services had taken definite shape. Under the national health administration, the country is divided into four zones, each with one team, and the Ministry of Public Health co-ordinates the work through the BCG office. The volume of work varies according to the density of population of the zone and its accessibility at certain times of the
Rural Health Centre, Takhmau (Jan. 1957 - )

Aim of the project. To plan and implement a comprehensive and well-balanced public-health programme at the provincial level; to develop model public-health services in the province of Kandal; to use the facilities of the Takhmau centre for field training of all categories of medical and health personnel.

The project is to be carried out with the development of rural communities and agricultural expansion and in co-operation with the UNESCO-assisted fundamental education project in the rural areas. WHO activities are correlated with those of the United States International Co-operation Administration (ICA), which is assisting the Government with the construction and supply phase of the project.

Assistance provided by WHO during the year. A public-health officer and a nurse midwife.

Probable duration of assistance. Until the end of 1959.

Venereal-Disease Control, Taiwan (Aug. 1953 - )

Aim of the project. To train local personnel in case-finding, contact investigation, health education and modern methods of diagnosis and treatment; to improve laboratory methods; to establish an island-wide venereal-disease control programme.

Assistance provided by WHO during the year. (a) A venereologist; (b) a nine-month fellowship; (c) supplies.

Probable duration of assistance. Until the end of 1959.

Work during the year. In-service training of project personnel and constant supervisory field visits contributed to raising to a satisfactory standard the venereal-disease control work of the 463 health units participating in the project.

The reference serological laboratory continued to evaluate the performance of the twenty-one serological laboratories of the project, and carried out a serological evaluation study in co-operation with the Venereal-Disease Research Laboratory, Chamblee, United States of America.

The health education services continued and included the distribution of a pamphlet prepared for private practitioners.

Several serological surveys were carried out among selected population groups, a combined venereal-disease and tuberculosis survey was made in Hsi Yu, and a public-health survey made in Taishan Hsiang included examinations for venereal disease, tuberculosis, leprosy and the common skin diseases, *tinea capitis*, and intestinal parasites.

Co-operation with the maternal and child health project (China 3) was strengthened and technical assistance was given to a venereal-disease control project undertaken by the military authorities.

Maternal and Child Health, Taiwan (Aug. 1952 - )

Aim of the project. To provide an efficient maternal and child health service throughout the island; to train nursing and medical personnel in all branches of public health relating to mothers and children; to improve health education.

Assistance provided by WHO during the year. (a) A nurse midwife and a short-term consultant for three months; (b) two twelve-month fellowships; (c) supplies.

Probable duration of assistance. Until the end of 1959.

Work during the year. Special attention was again given to in-service training; courses for medical officers, staff level nurses and midwives in private practice proceeded satisfactorily. The project team participated in a combined health programme carried out on Tsi Yu Island where local staff were assisted in establishing maternal and child health services. Regular supervisory visits were made to health stations, and the need for more prenatal care was stressed. The consultant assisted in evaluating the maternal and child health programme and advised the Government on proposals for setting up a new Institute of Maternal and Child Health.
PROJECT LIST: WESTERN PACIFIC

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<th>Project No.</th>
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<tr>
<td><strong>China 7</strong></td>
<td>TA (ICA)</td>
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<td><strong>China 13</strong></td>
<td>TA UNICEF</td>
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<td><strong>China 14</strong></td>
<td>TA</td>
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</table>

**Nursing Education, Taiwan (May 1952 - )**

*Aim of the project.* To improve the standard of nursing education and the quality of nursing services by establishing a school of nursing at the University Hospital in Taipei.

*Assistance provided by WHO during the year.* (a) A senior nurse educator, two nurse educators (one general and one in mental health) and a nursing consultant for six months; (b) supplies.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* The international team assisted with the four-year collegiate programme of nursing, which began in September 1956. They took part in teaching and demonstrations, served on committees set up to analyse problems and improve nursing education and service, and gave guidance to counterpart staff.

The senior nurse educator worked closely with the Director of the School of Nursing, the University faculty, and the nursing consultant of the United States International Co-operation Administration on the collegiate nursing education programme, and was a member of a sub-committee on nursing, on which all schools of nursing in Taiwan are represented.

The nursing consultant advised on the total programme and on plans for establishing a division for graduate studies in the University.

**Malaria Eradication, Taiwan (May 1952 - )**

*Aim of the project.* To control malaria and eventually to eradicate it throughout the island, by use of residual insecticides.

*Assistance provided by WHO during the year.* An entomologist, and two short-term consultants—one on arthropod-borne diseases and the other on insect resistance; a malaria advisory team composed of a malariologist (team leader), an entomologist and two laboratory technicians.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* Island-wide malariometric surveys showed that, after two years of spraying, transmission has been stopped in most of the malarious areas of Taiwan, but that in some areas residual foci of transmission still persisted and an adequate scheme of surveillance was needed for detecting and eliminating them. Such a surveillance scheme was organized, and it is expected that, with its support, malaria should be eradicated from Taiwan in a few years' time.

**Trachoma Mass Campaign, Taiwan (Oct. 1954 - )**

*Aim of the project.* To control trachoma in over two million schoolchildren by a mass campaign, and to organize services in schools and health stations.

*Assistance provided by WHO during the year.* A short-term consultant in trachoma.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* The control programme in Taiwan proceeded satisfactorily. All schoolchildren with trachoma and conjunctivitis have now been treated; those in their last year of school are to be examined and those found to be reinfected will receive a final course of treatment. Each September, new entrants are examined at the schools and those found to be suffering from trachoma and conjunctivitis are treated.

Trials were made of various treatment schedules with different forms of several antibiotics in order to find out whether it is practical to treat family contacts at home, and which drug and which treatment schedule is most economical and effective.

**Environmental Sanitation, Taiwan (Oct. 1954 - )**

*Aim of the project.* To survey the organization and functions of governmental agencies concerned with environmental sanitation; to assess the chief problems and establish their relative urgency; to carry out a pilot project of modern and economic sanitation procedures; to train personnel.

*Assistance provided by WHO during the year.* (a) Two sanitary engineers; (b) supplies and equipment.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* The Taiwan Institute of Environmental Sanitation, now in its second year, made progress in the stimulation and co-ordination of environmental sanitation work. A demonstration project
was completed in a typical rural area, where various types of wells, latrines and other sanitary facilities were installed for the purpose of determining the best types for use in rural districts. The Institute sponsored three national conferences on problems of organic wastes and completed a sampling and analysis of night-soil in the city of Taipei. Assistance was given to an experimental composting station and designs and estimates completed for a composting plant for the city of Taipei. Food sanitation work included surveys of establishments such as abattoirs, restaurants and food processing plants, assistance in the planning and operation of courses for food-handlers and the completion of a draft restaurant sanitation code. Technical and supervisory services were provided for a national programme of construction of wells and latrines. The Institute also participated in and co-ordinated the activities of water pollution surveys. Courses for sanitarians were revised and have been given continuously by the Institute.

During the year, one of the sanitary engineers led a team for investigation, survey and design of a water-borne sewerage system for the city of Taipei.

China 17

**Tuberculosis Control, Taiwan (April 1951 - )**

*Description*

Aim of the project. To expand the tuberculosis control service and to incorporate in it the BCG work already in operation; to explore new methods of control of ambulatory cases by chemotherapy.

Assistance provided by WHO during the year. (a) A medical officer and a consultant-statistician; (b) two fellowships—one of nine months and one of twelve months; (c) supplies and equipment.

Probable duration of assistance. Until the end of 1959.

Work during the year. Case-finding and treatment, especially domiciliary chemotherapy, were expanded. A central registry was started. The work of three tuberculosis centres was strengthened and more tuberculosis clinics in health centres established. Training courses for doctors, nurses and technicians continued. Progress was made with prevalence surveys, and a combined health survey on Hsi Yu Island was completed, the patients discovered being placed promptly under treatment. The BCG vaccine production laboratory was reorganized and now conforms in all respects to the standards approved by WHO. In the mass BCG vaccination campaign, 5 526 337 persons had been tested, and 3 107 353 vaccinated, by the end of September.

China 28

**Fellowships**

*Health statistics.* Two six-month fellowships for study of vital and health statistics, one in the Philippines and the other in Japan.

China 29

**Fellowships**

*Food and drug control.* A seven-month fellowship for study in the United States of America.

China

**Participation in Regional Courses and Meetings**

See WPRO 23; WPRO 32.

Cook Islands 2

**Fellowships**

*Tropical medicine and hygiene.* A seven-month fellowship for study in the United Kingdom.

Cook Islands

**Participation in Regional Courses and Meetings**

See WPRO 38.

Fiji 2

**Central Medical School, Suva (Feb. 1955 - )**

*Description*

Aim of the project. To train assistant medical practitioners for government service in Fiji and adjacent territories, and to strengthen the staff of the Central Medical School.

Assistance provided by WHO during the year. (a) Two lecturers—one in biology and the other in physiology; (b) a three-year fellowship in biology; (c) supplies and equipment.

The China Medical Board provided a three-year fellowship in anatomy.

Probable duration of assistance. Until the end of 1959.

Work during the year. There was keen participation of students in courses in biology and physiology and a high percentage of students passed the relevant examinations (84 per cent. for the biology examination).
Teaching of physiology, interrupted in June 1956, was resumed in June 1957. The five-year education system has greatly improved the standard of the students.

The two holders of three-year fellowships in physiology and biology (awarded in 1955 and 1957 respectively) continued their studies; it is expected that, on their return, they will take over posts of junior lecturers in their specialities.

Fiji

Participation in Regional Courses and Meetings

See WPRO 23; WPRO 38.

French Settlements in Oceania

Participation in Regional Courses and Meetings

See WPRO 38.

Guam

Participation in Regional Courses and Meetings

See WPRO 38.

Hong Kong

Fellowships

See WPRO 50.

Hong Kong

Participation in Regional Courses and Meetings

See WPRO 23; WPRO 32.

Japan 1

Rehabilitation of Crippled Children (Nov. 1952 - )

Aim of the project. To consolidate and expand services for the protection of children against crippling and deformities, and for the diagnosis, treatment and rehabilitation of crippled children; to train local professional and auxiliary personnel.

Assistance provided by WHO during the year. (a) A short-term consultant; (b) a six-month fellowship.

Probable duration of assistance. Until the end of 1959.

Work during the year. The medical consultant who visited Japan in 1952 returned in October 1957 for one month to evaluate the progress made and recommendations were submitted to the Government for future development of the programme.

Japan 4

National Institute of Mental Health, Tokyo (June 1953 - )

Aim of the project. To survey needs and facilities and draw up a mental health programme; to carry out research; to train local professional and auxiliary personnel.

Assistance provided by WHO during the year. Medical literature and periodicals, in connexion with the programme of the National Institute of Mental Health for training workers for child guidance clinics.

Probable duration of assistance. Until the end of 1959.

Japan 10

Assistance to Institute of Public Health, Tokyo (March 1955 - )

Aim of the project. To strengthen post-graduate training of health personnel in the departments of the Institute, particularly the Departments of Epidemiology, Medical-Social Services, and Environmental Sanitation.

Assistance provided by WHO during the year. (a) A short-term consultant on training of sanitarians; (b) two fellowships, one for five months for study of national medical aid systems and the other for six months for study of control of public-health hazards; (c) supplies.

Probable duration of assistance. Until the end of 1959.
Project No. Source of Funds Co-operating Agencies

Japan 11 TA

Environmental Sanitation, Kobe (Aug. 1955 - )

Aim of the project. To study the economical and hygienic disposal of night-soil and other organic refuse; to operate a pilot composting plant; eventually to establish a full-scale prototype rapid composting plant.

Assistance provided by WHO during the year. A small amount of equipment and supplies.

Probable duration of assistance. Until the end of 1958.

Work during the year. Operation of the prototype plant continued; it produces an acceptable compost of garbage and refuse in four days. Mechanical difficulties were, however, encountered and revision of the existing machinery is required.

Japan 14 R

Nursing Education, Tokyo (Aug. 1955 - )

Aim of the project. To strengthen basic nursing, midwifery and public-health nursing education; to develop a centre for post-graduate training at the Institute of Public Health, Tokyo, and to train qualified teachers for the centre.

Assistance provided by WHO during the year. (a) A nurse educator; (b) two twelve-month fellowships and one two-week fellowship; (c) supplies.

Probable duration of assistance. Until the end of 1958.

Work during the year. The nurse educator helped the faculty of the Institute of Public Health by participating in faculty meetings and in the teaching programme, planning curricula, and preparing teaching materials. Consultant service was given to schools of nursing; materials were prepared on planning classroom and clinical experience in schools of nursing, for discussion at the nine regional nursing meetings.

Japan 17 TA

Hospital Administration (July 1956 - )

Aim of the project. To make a survey of institutional care and to improve hospital management.

Assistance provided by WHO during the year. (a) A twenty-one month fellowship in administrative medicine for study in the United States of America; (b) supplies.

Probable duration of assistance. Until the end of 1959.

Japan 18 R

Fellowships

Communicable diseases. A six-month fellowship for study in the United States of America.

Japan 19 TA

Fellowships

Management and control of blood banks. A fellowship of three and a half months for study in Australia.

Maternal and child health. A six-month fellowship for observation in Ireland, the United Kingdom and other parts of Europe.

Prevention of radiation hazards in medicine. A six-month fellowship for study in the United Kingdom and other parts of Europe.

Safe handling of radioisotopes. A three-month fellowship for study in the United States of America, the United Kingdom and the Netherlands.

Standardization of biologics and antibiotics. A six-month fellowship for study in the United Kingdom and other parts of Europe.

Tuberculosis. A six-month fellowship to observe rehabilitation in the United Kingdom and other parts of Europe; another to study tuberculosis statistics in Europe.

Japan

Fellowships

See WPRO 50.

Japan

Participation in Regional Courses and Meetings

See WPRO 23; WPRO 32.
Korea 10

R

Fellowships

Maternal and child health. A twelve-month fellowship for study in Australia.

Medical entomology. A twelve-month fellowship for study in Australia.

Korea 11

TA

Fellowships

Control of epidemic diseases. A fellowship of four and a half months for study in the United States of America and the Philippines, and a six-month fellowship for study in the United States of America.

Korea

Participation in Regional Courses and Meetings

See WPRO 23; WPRO 32.

Laos 2

TA (ICA)

Treponematoses Control, Thakhet, Savannakhet, Saravane and Pakse (Jan. 1953 - )

Aim of the project. To survey the yaws situation; to train local personnel in diagnosis and treatment; to carry out a mass campaign (house-to-house case-finding and treatment of all accessible clinical cases and contacts, and health education) so as to reduce the incidence of yaws to a level at which the public-health programme can maintain control.

Assistance provided by WHO during the year. A medical officer and a serologist (laboratory).

Probable duration of assistance. Until the end of 1959.

Work during the year. The field work of the project was continued with the survey of a high percentage of the population in the provinces of Pakse and Saravane. Re-survey work was undertaken in Savannakhet by the provincial head nurses under the supervision of the provincial health officer and the yaws control team. Plans were made for establishing laboratories in Vientiane and Pakse to provide serological and general health laboratory services, for starting venereal-disease control activities and for broadening the work of the field teams.

Laos 8

TA

Undergraduate medical studies. Four eleven-month fellowships for study at the Royal School of Medicine in Cambodia.

Laos

Participation in Regional Courses and Meetings

See WPRO 32.

Malaya 1

TA

Nursing Education, Kuala Lumpur, Penang and Ipoh (Perak) (June 1950 - )

Aim of the project. To improve the standard of basic and graduate nursing education and the quality of nursing services; to prepare nurses for administrative and teaching posts; to adapt the nursing education programme to local resources and needs; to develop a well-organized programme for midwives.

Assistance provided by WHO during the year. (a) At Kuala Lumpur—a midwifery tutor; at Penang—a senior nurse educator, a male nurse tutor, and a clinical nursing tutor; at Ipoh (Perak)—a midwifery tutor; (b) supplies.

Probable duration of assistance. Until the end of 1958.

Work during the year. The third course for health visitors was completed. Assistance was given with the integration of the social and preventive aspects of health into the basic nursing course and the ward administration course. The national counterparts conducted the ward administration course in 1957. Clinical teaching for student nurses and in-service education for ward sisters and staff nurses continued in the Penang General Hospital. Some progress was made with midwifery training in Perak. Units for domiciliary experience and ante-natal clinics were developed in Perak and counterpart personnel prepared to carry on the programme. Refresher courses for kampong midwives were held and in-service education in domiciliary midwifery for health nurses was organized. Assistance continued in the maternity unit in Kuala Lumpur. An obstetrical advisory committee was set up to maintain liaison between all departments providing midwifery training and practice in midwifery and obstetrics, and to investigate maternal deaths.
<table>
<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Malaya 9</td>
<td>Rural Health Training Centre, Jitra, Kedah (Nov. 1954 - )</td>
</tr>
</tbody>
</table>

**Aim of the project.** To establish a training centre at Jitra for assistant health nurses, rural midwives, dispensers and sanitary overseers.

Staff trained at Jira will be assigned to ninety main health centres which the Government is building. These centres and their sub-centres, in addition to their routine work, will have special responsibilities for the welfare of mothers and children, such as domiciliary midwifery, infant care and dental hygiene.

**Assistance provided by WHO during the year.** (a) A medical officer and a public-health nurse; (b) supplies.

**Probable duration of assistance.** Until the end of 1958.

**Work during the year.** Two training courses were held and were attended by teams from Johore, Kedah, Kelantan, Malacca, Negri Sembilan, Pahang, Penang, Perak, Selangor, and Trengganu. The students gained practical experience by participating under supervision in the work of the out-patient clinic, the travelling dispensary, the maternity and infant welfare clinics and in home visiting. Six teams were trained and six more started their training. One sub-centre was opened in the area for service and training purposes.

<table>
<thead>
<tr>
<th>Malaya 14</th>
<th>Hospital Administration, Penang (May 1956 - )</th>
</tr>
</thead>
</table>

**Aim of the project.** To review the hospital administration system; to devise a suitable scheme for training lay hospital administrators, taking account of the facilities available, in the Federation or overseas.

**Assistance provided by WHO during the year.** A hospital administrator.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** A School of Hospital Administration was established at the General Hospital, Penang, which is the location of the project. Official contacts were made, a two-year plan was prepared, the administration of the five main general and two special hospitals were surveyed and a report made. Help was given with the administration of the rural health training centre at Jitra (see Malaya 9). A "Training Programme in Hospital Administration" was issued and educational material prepared. Several lectures were given on subjects connected with nursing administration. Candidates for training were interviewed.

During the first three months of 1957, assistance was given with a review of the Singapore nursing education project (see Singapore 8).

<table>
<thead>
<tr>
<th>Malaya 15</th>
<th>Hospital Records, Penang (Nov. 1956 - )</th>
</tr>
</thead>
</table>

**Aim of the project.** To review and reorganize the hospital records systems in the Federation and in Singapore (Singapore 9); to establish and implement a suitable training programme for local personnel in the Federation of Malaya.

**Assistance provided by WHO during the year.** A hospital records officer.

**Probable duration of assistance.** Until the end of 1959.

**Work during the year.** The hospital records officer made a preliminary survey of the hospital records in the Federation in collaboration with the medical officer attached to the Singapore hospital records project (Singapore 9).

Improvements were made in the medical records system at the Penang General Hospital in order that the training programme for hospital records personnel may be started.

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<th>Nauru</th>
<th>Participation in Regional Courses and Meetings</th>
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<td><em>See WPRO 38.</em></td>
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<tr>
<th>New Caledonia</th>
<th>Participation in Regional Courses and Meetings</th>
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<td></td>
<td><em>See WPRO 38.</em></td>
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<tr>
<th>New Hebrides</th>
<th>Participation in Regional Courses and Meetings</th>
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<td><em>See WPRO 38.</em></td>
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<tr>
<td>Source of Funds</td>
<td>Description</td>
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<tr>
<td>New Zealand</td>
<td>Fellowships</td>
</tr>
<tr>
<td></td>
<td>Child health. A six-month fellowship for observation in the United Kingdom, the United States of America and Canada.</td>
</tr>
<tr>
<td></td>
<td>Health education. A twelve-month fellowship for study in the United States of America.</td>
</tr>
<tr>
<td>New Zealand</td>
<td>Participation in Regional Courses and Meetings</td>
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<td></td>
<td>See WPRO 23; WPRO 32.</td>
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<tr>
<td>Niue</td>
<td>Participation in Regional Courses and Meetings</td>
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<td></td>
<td>See WPRO 38.</td>
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<tr>
<td>North Borneo 5</td>
<td>Malaria Control, Keningau (July 1955 - )</td>
</tr>
<tr>
<td></td>
<td>Aim of the project. To study the malaria situation; to train local personnel and to carry out a control programme.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO during the year. (a) A malariologist and an entomologist; (b) a six-month fellowship; (c) supplies.</td>
</tr>
<tr>
<td></td>
<td>Probable duration of assistance. Until the end of 1959.</td>
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<tr>
<td></td>
<td>Work during the year. The malaria map of North Borneo was completed and it is estimated that out of a total population of about 334,000 some 200,000 are living under malarious conditions. Spraying operations continued, the target for 1957 being 81,300. Although malaria transmission has not yet been interrupted in the pilot area, it has been reduced, as is indicated by the result of blood examination of infants before and one year after spraying. Antimalarial drugs were used as a supplementary measure to hasten the interruption of malaria transmission.</td>
</tr>
<tr>
<td></td>
<td>Studies on the susceptibility of the main vector, Anopheles leucosphyrus balabacensis, to DDT and dieldrin, as well as on the role played by A. sundaicus in the transmission of the disease, were carried out.</td>
</tr>
<tr>
<td>North Borneo 8</td>
<td>Environmental Sanitation (Dec. 1953 - March 1957)</td>
</tr>
<tr>
<td></td>
<td>Aim of the project. To study environmental sanitation problems, particularly collection and disposal of sewage in Jesselton, Labuan, Kudat, Tawan, Sandakan, Papar and Beaufort, and to take appropriate action.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO. (a) Two sanitary engineers; (b) supplies and equipment.</td>
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<tr>
<td></td>
<td>Work done. The objectives of the project have been achieved. They included the evaluation of specific environmental sanitation problems, and recommendations for the collection and disposal of human excreta in urban communities of North Borneo. Assistance has been given on investigations, studies, completion of detailed engineering plans, specifications and cost estimates for water-borne sewerage systems for eight urban communities in North Borneo. The Government has already started to construct certain portions of these sewerage schemes, which ultimately will serve a population of some 55,000. The project has provided basic technical and economic data on the general problem of excreta disposal for small urban communities in the Western Pacific.</td>
</tr>
<tr>
<td>Papua and New Guinea 4</td>
<td>Malaria Control Pilot Project, Sepik District (Oct. Nov. 1957)</td>
</tr>
<tr>
<td></td>
<td>Aim of the project. To assist in some of the entomological aspects of the malaria control pilot project in the Sepik District.</td>
</tr>
<tr>
<td></td>
<td>Assistance provided by WHO. A short-term consultant in malaria.</td>
</tr>
<tr>
<td>Papua and New Guinea 6</td>
<td>Fellowships</td>
</tr>
<tr>
<td></td>
<td>Health education. Two twelve-month fellowships for study in the United Kingdom.</td>
</tr>
<tr>
<td>Papua and New Guinea 7</td>
<td>Fellowships</td>
</tr>
<tr>
<td></td>
<td>Malaria. A three-month fellowship for study in the Philippines, the Federation of Malaya, North Borneo and Singapore.</td>
</tr>
<tr>
<td>Country</td>
<td>Description</td>
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<tr>
<td>Papua and New Guinea</td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td>Philippines 4</td>
<td><strong>Mental Health, Manila (First phase: Nov. 1949 - Jan. 1953; second phase: Feb. 1957 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To organize the Division of Mental Health in the Department of Health, and to plan a mental health programme at the national and regional levels, including the training of personnel.&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO during the year.</em> A mental health specialist.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until the end of 1959.&lt;br&gt;&lt;br&gt;<em>Work during the year.</em> A programme was begun to improve conditions in the national mental hospital. A medical administrator was assigned to prepare long-range administrative changes in the hospital, and plans were made for in-service training of professional personnel.</td>
</tr>
<tr>
<td>Philippines 9</td>
<td><strong>Bilharziasis Pilot Project, Leyte (June 1952 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To determine the most effective and economical means of controlling bilharziasis; to train local professional and auxiliary personnel; to study the human, domestic-animal and snail hosts of <em>Schistosoma japonicum</em> and the parasite itself; to make an epidemiological study of the disease in a highly epidemic area; to plan a control programme.&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO during the year.</em> (a) An epidemiologist, a zoologist and a public-health engineer; (b) supplies and equipment.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until the end of 1959.&lt;br&gt;&lt;br&gt;<em>Work during the year.</em> A critical evaluation, taking account of effect on health of human beings, economic feasibility, and acceptability to the people, was made of methods for controlling bilharziasis in the Philippines. Studies on epidemiology, snail ecology and control, both in the laboratory and the field, continued.&lt;br&gt;&lt;br&gt;The transmission index for vertebrate hosts (dogs, pigs, carabaos, cows, goats and rats) was established. It was, however, proved that 75 per cent. of the source of infection is of human origin. Research in ecology confirmed the permanence of snail colonies in undisturbed habitats. Control by engineering methods led to the eradication of these colonies. The cost per inhabitant of snail control in eleven zones of the project was estimated at 4.50 Philippines pesos if a bulldozer is provided, and 15 pesos if work is done by manual labour only. Health education work was started. A new approach to the control of bilharziasis was introduced through the concerted efforts of several bodies, efforts culminating in the creation of a co-ordination committee, consisting of the provincial and local officials of the Public Works, Irrigation, Agricultural Extension, Fisheries and Education Departments, closely integrated with the activities of the Public Health Department and the project.</td>
</tr>
<tr>
<td>Philippines 12</td>
<td><strong>Institute of Hygiene, University of the Philippines, Manila (July 1953 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To strengthen the faculty of the Institute of Hygiene by a programme of exchange between members of the teaching staffs of the Institute and the Johns Hopkins University School of Hygiene and Public Health.&lt;br&gt;&lt;br&gt;<em>Assistance provided by WHO and work done during the year.</em> An associate professor in maternal and child health, and two short-term consultants—one in biostatistical methods and the other in material and child health—who spent about two and a half months at the Institute to provide instruction and guidance on future developments in their specialties.&lt;br&gt;&lt;br&gt;<em>Probable duration of assistance.</em> Until mid-1958.</td>
</tr>
<tr>
<td>Philippines 29</td>
<td><strong>Midwifery Training, Philippines (Oct. 1953 - )</strong>&lt;br&gt;&lt;br&gt;<em>Aim of the project.</em> To study the midwifery services and training facilities; to develop a well-organized training programme for midwives; to train village midwives (<em>hilots</em>); to study maternity-nursing needs and resources; to formulate a midwifery practice act.</td>
</tr>
</tbody>
</table>
Project No. | Description
--- | ---
 Source of Funds | Co-operating Agencies

**PROJECT LIST: WESTERN PACIFIC**

| 43 | **Philippines** Environmental Sanitation (June 1955 - )
--- | ---
| R | **Aim of the project.** To co-ordinate and strengthen environmental sanitation work.
| (ICA) | **Assistance provided by WHO during the year.** (a) A sanitary engineer; (b) supplies.
| **Probable duration of assistance.** Until the end of 1959.
| **Work during the year.** The sanitary engineer provided assistance in the administrative and technical aspects of environmental sanitation to the Division of Environmental Sanitation of the Department of Health, and to the Institute of Hygiene of the University of the Philippines. A long-range plan for environmental sanitation prepared by a committee within the Department of Health was discussed and revised. A graduate course in public-health engineering was approved by the University of the Philippines and started during the academic year. This course will lead to the degree of Master of Science in Public-Health Engineering, and will be open to students from other countries in the Region.

| 53 | **Philippines** Malaria Eradication (First phase: Aug. - Dec. 1956; second phase: June 1957 - )
--- | ---
| R | **Aim of the project.** To eradicate malaria through spraying of all malarious areas and treatment of malaria cases.
| (ICA) | **Assistance provided by WHO during the year.** An advisory team on malaria eradication composed of a malariologist (team leader), an entomologist and two laboratory technicians; a short-term malaria consultant.
| **Probable duration of assistance.** Until the end of 1957.
| **Work during the year.** Through the malaria advisory team, the malaria consultant and the regional malaria adviser, assistance was provided on technical matters, including indications for the interruption of residual spraying, organization of malaria surveillance activities, elimination of residual foci of transmission and assessment of susceptibility of the vector species.

| 54 | **Philippines** Fellowships
--- | ---
| R | **Health education.** A ten-month fellowship for observation in the United States of America, Puerto Rico, Korea, Japan, China, Viet Nam, Burma, Thailand and Indonesia.
| **Nursing administration and midwifery education.** A twelve-month fellowship for study in the United Kingdom and the United States of America.
| **Public-health administration.** A six-month fellowship to study public-health administration with emphasis on general environmental sanitation in the United States of America, Hawaii, Japan, China, Hong Kong and Singapore; and a twelve-month fellowship for study in Puerto Rico and the United States of America.
| **Sanitary engineering.** A twelve-month fellowship for study in the United States of America.
| **University health services.** Two five-month fellowships for observation in the United States of America.

|  | **Participation in Regional Courses and Meetings**
--- | ---
| See WPRO 23; WPRO 32.

| 5 | **Sarawak** Malaria Pilot Project (July 1952 - )
--- | ---
| TA | **Aim of the project.** To study the efficacy, for malaria control in Sarawak, of indoor spraying with residual insecticides in an experimental area; to train professional auxiliary and ancillary personnel for malaria control throughout the country.

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Singapore 2</td>
<td>TA (London School of Hygiene and Tropical Medicine)</td>
<td>Assistance provided by WHO during the year. (a) Two malariologists and an entomologist; (b) technical literature. Probable duration of assistance. Until the end of 1959. Work during the year. Spraying operations were extended into all five divisions in Sarawak. In the Fifth Division the greater part of the known heavily malarious areas was covered for the first time, while in the remaining divisions all the heavily malarious areas have been sprayed two or more times. Information was collected to show where expansion is necessary. An investigation and training unit was formed which will also be responsible for assessing the results of the spraying programmes and will eventually take over the case-finding and surveillance. Antimalarial drugs were used to hasten the interruption of malaria transmission.</td>
</tr>
<tr>
<td>Singapore 4</td>
<td>R UNICEF</td>
<td>University of Malaya (Sept. 1952 - ) Aim of the project. To develop the teaching of preventive and social medicine in the Faculty of Medicine; to establish a first-class post-graduate school of public health. Assistance provided by WHO during the year. A lecturer in public health. Probable duration of assistance. Until the end of 1958. Work during the year. The lecturer in public health carried out tutorial work on the presentation of socio-medical case-histories and gave lectures in medical genetics to the class for the Diploma in Public Health. Progress was made in research in the subjects taught.</td>
</tr>
<tr>
<td>Singapore 8</td>
<td>TA</td>
<td>University of Malaya (Sept. 1952 - ) Aim of the project. To develop the teaching of preventive and social medicine in the Faculty of Medicine; to establish a first-class post-graduate school of public health. Assistance provided by WHO during the year. A lecturer in public health. Probable duration of assistance. Until the end of 1958. Work during the year. The lecturer in public health carried out tutorial work on the presentation of socio-medical case-histories and gave lectures in medical genetics to the class for the Diploma in Public Health. Progress was made in research in the subjects taught.</td>
</tr>
<tr>
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<td></td>
<td>Urban Health Centre (Jan. 1956 - ) Aim of the project. (a) To provide maternal and child health, school dental and health education services to about 125 000 people living near the Centre; (b) to train at the Centre undergraduate medical and post-graduate public-health students of the University of Malaya (including students from other countries of the Region), and health visitors, health inspectors and other ancillary personnel. Assistance provided by WHO during the year. A senior nurse educator and a public-health nurse tutor. Probable duration of assistance. Until the end of 1959. Work during the year. The training course for assistant health nurses was planned, and a curriculum for a three-year period was approved. Plans were made for these nurses to have practical training in school health services, the school service for tuberculosis, tuberculosis health services, social welfare homes and crèches and maternal and child health clinics, and surveys were carried out in these services. Two groups of students started the course—the first in January and the second in May 1957. A special six-month course in public health for assistant nurse midwives began in January.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nursing Education (June 1952 - ) Aim of the project. To improve the standard of nursing education and the quality of nursing services and health teaching; to prepare local nurses for administrative and teaching posts; to adapt the nursing-education programme to local needs and resources; to develop an organized midwifery teaching programme; to develop a teaching centre for domiciliary practice for pupil midwives; to raise the standard of midwifery practice. Assistance provided by WHO during the year. (a) A senior nurse educator, a nurse educator (psychiatry), two nurse educators (clinical) and two short-term consultants—one in nursing education and the other in hospital administration (from project Malaya 14); (b) supplies. Probable duration of assistance. Until the end of 1959. Work during the year. A study of the nursing situation in Singapore was carried out from January to March by the two consultants and a working party appointed by the Director of Medical Services. A comprehensive report was submitted and further WHO assistance will be based on its recommendations. Assistance was given with a programme in psychiatric nursing for registered nurses working in Woodbridge Hospital and for student nurses recruited to this hospital.</td>
</tr>
</tbody>
</table>
PROJECT LIST: WESTERN PACIFIC

**Singapore 9**

**Source of Funds**: TA

**Co-operating Agencies**: Singapore, Tonga, United States Trust Territories of the Pacific

**Description**

**Project No.**: 9

Hospital Records (Nov. 1956 - )

*Aim of the project.* To review and reorganize the hospital records systems in the Federation and in Singapore; to establish and implement a suitable training programme for local personnel in the Federation of Malaya.

*Assistance provided by WHO during the year.* An expert in medical statistics (who also worked on project Malaya 15).

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* The expert made a detailed survey of hospital record systems at the Singapore General Hospital and the Kandang Kerbau Maternity Hospital. He also examined the type of hospital reports prepared for the Ministry of Health. On his recommendation, a permanent medical records committee was formed in the Singapore General Hospital to discuss the proposals for improving the organization of record keeping and for the revision and standardization of forms.

A plan was prepared for establishing a statistical research division in the Ministry of Health to serve as the technical unit responsible for collecting and analysing health data of all kinds, and to direct the assembly and analysis of hospital morbidity data.

**Singapore**

Participation in Regional Courses and Meetings

See WPRO 23.

**Tonga**

Participation in Regional Courses and Meetings

See WPRO 38.

**United States Trust Territories of the Pacific**

Participation in Regional Courses and Meetings

See WPRO 38.

**Viet Nam 3**

**Source of Funds**: TA, UNICEF (ICA)

**Description**

Maternal and Child Health, Saigon, Hué and Dalat (Dec. 1954 - )

*Aim of the project.* (a) To improve preventive and curative paediatrics by reorganizing the three clinics in Saigon-Cholon; (b) to develop a programme of maternal and child health services, including prenatal and postnatal consultative services; and maternal and child health centres in the three Saigon clinics, in a hospital at Hué and in one at Dalat; (c) to introduce progressively a system of health visiting.

*Assistance provided by WHO during the year.* (a) A medical officer and two nurse educators; (b) supplies.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* A maternal and child health section was set up in the Ministry of Health.

In Saigon, since November 1956 the Faculty of Medicine has joined in the work of the Cholon Children's Hospital, which is being used for teaching medical students. A basic training course in paediatric nursing was given in the hospital.

In Hué, work in the children's out-patient department of the hospital increased steadily; regular prenatal clinics were started and the work of the maternity department was reorganized.

In Dalat, paediatric outpatient consultations in the hospital continued. The maternity department was expanded and prenatal and well-child consultations were started.

**Viet Nam 9**

**Source of Funds**: R (ICA)

**Description**

Environmental Sanitation (Nov. 1956 - )

*Aim of the project.* To strengthen national and local environmental sanitation services; to train professional and subprofessional personnel; to carry out pilot schemes of environmental sanitation.

*Assistance provided by WHO during the year.* (a) A sanitary engineer; (b) equipment.

*Probable duration of assistance.* Until the end of 1959.

*Work during the year.* An environmental sanitation service was set up in the Ministry of Health, and the sanitary engineer assisted in its administrative and technical organization. Help was also given in organizing and running a training course for sanitarians. Progress was made in collecting and analysing data on the status of environmental sanitation in preparation for short-term and long-term plans. Assistance was provided in connexion with the proposed comprehensive and integrated health service for rural areas.
<table>
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<tr>
<th>Project No.</th>
<th>Source of Funds</th>
<th>Description</th>
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<td>Viet Nam</td>
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<td>Participation in Regional Courses and Meetings</td>
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<tr>
<td>Wallis Islands</td>
<td></td>
<td>Participation in Regional Courses and Meetings</td>
</tr>
<tr>
<td>West New Guinea 2</td>
<td>Malaria Eradication</td>
<td>Malaria Control, Hollandia (Oct. - Nov. 1957)</td>
</tr>
<tr>
<td></td>
<td>Special Account</td>
<td>Assistance provided by WHO and work done. A short-term consultant on malaria, who assisted the government staff with a study to determine problems which had arisen in connexion with the use of dieldrin in the Nimboran area and the possible development of resistance.</td>
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<td>UNICEF</td>
<td></td>
</tr>
<tr>
<td>West New Guinea 7</td>
<td>R</td>
<td>Fellowships</td>
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<tr>
<td></td>
<td>Environmental sanitation. A seven-month fellowship for observation in the Philippines, Singapore, China, Japan, Hawaii and the United States of America.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public-health administration. A four-month fellowship for observation in Ceylon, India, China and the Philippines.</td>
<td></td>
</tr>
<tr>
<td>West New Guinea</td>
<td>Participation in Regional Courses and Meetings</td>
<td>See WPRO 32; WPRO 38.</td>
</tr>
<tr>
<td>Western Samoa</td>
<td>Participation in Regional Courses and Meetings</td>
<td>See WPRO 38.</td>
</tr>
</tbody>
</table>
## INTER REGIONAL

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter-regional 49</td>
<td><strong>Malaria Eradication Advisory Teams (1957 - )</strong></td>
</tr>
<tr>
<td>R</td>
<td><em>Aim of the project.</em> (a) To help in assessing the progress and development of malaria eradication programmes in certain countries; (b) to study problems associated with <em>Anopheles gambiae</em> in Africa.</td>
</tr>
<tr>
<td></td>
<td><em>Assistance provided by WHO and work done during the year.</em> Three advisory teams, consisting of a malariologist, an entomologist, and two laboratory technicians, worked in Burma, Ceylon, Iraq, Philippines and Taiwan. A fourth advisory team, the <em>Anopheles gambiae</em> Advisory and Research Team, comprising an entomologist and three entomological assistants, worked on a study of problems connected with <em>A. gambiae</em> in the Belgian Congo, Dahomey, Uganda, and Liberia.</td>
</tr>
<tr>
<td>Inter-regional 50</td>
<td><strong>Assistance to Malaria Courses (Jan. 1957 - )</strong></td>
</tr>
<tr>
<td>R</td>
<td><em>Aim of the project.</em> To provide further training in malaria eradication to health officers.</td>
</tr>
<tr>
<td></td>
<td><em>Assistance provided by WHO during the year.</em> Stipends and fees for sixteen Turkish public-health officers engaged in the country’s malaria eradication programme to attend a two-week course held in Rome at the end of January.</td>
</tr>
<tr>
<td></td>
<td><em>Probable duration of assistance.</em> Until 1959 (assistance for attendance at further courses).</td>
</tr>
<tr>
<td>Inter-regional 64</td>
<td><strong>Training of Malaria Eradication Personnel (1957 - )</strong></td>
</tr>
<tr>
<td>Malaria Eradication Special Account</td>
<td><em>Aim of the project.</em> To train malariologists for service in internationally assisted malaria eradication programmes.</td>
</tr>
<tr>
<td></td>
<td><em>Assistance provided by WHO during the year.</em> (a) Provision for four persons, from Argentina, Haiti, Italy and the Philippines, to attend a twelve-week course, organized by PASB in Guatemala. The course, which began in October, is to be followed by two months’ field training in malaria eradication programmes in Latin America; (b) provision for thirteen medical officers to attend a one-month theoretical and laboratory course at the London School of Hygiene and Tropical Medicine. The medical officers came from Denmark, Federal Republic of Germany, France, India, Italy, Philippines, Portugal, Taiwan, Union of South Africa, and United Kingdom of Great Britain and Northern Ireland. After the course, which began in November, they will receive three and a half months’ field training in malaria eradication programmes in Turkey and Iraq under the guidance of tutor consultants.</td>
</tr>
</tbody>
</table>
MEMBERS AND ASSOCIATE MEMBERS OF THE WORLD HEALTH ORGANIZATION
(31 December 1957)

The following list shows the Member States of WHO, together with the date on which each became a party to the Constitution, the chronological order being indicated by the numbers in parentheses. Territories admitted to associate membership are also shown.

<table>
<thead>
<tr>
<th>Member States</th>
<th>Date</th>
<th>Member States</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan (37)</td>
<td>19 April 1948</td>
<td>Lebanon (58)</td>
<td>19 January 1949</td>
</tr>
<tr>
<td>Albania (13)</td>
<td>26 May 1947</td>
<td>Liberia (7)</td>
<td>14 March 1947</td>
</tr>
<tr>
<td>Argentina (56)</td>
<td>22 October 1948</td>
<td>Libya, United Kingdom of (79)</td>
<td>16 May 1952</td>
</tr>
<tr>
<td>Australia (28)</td>
<td>2 February 1948</td>
<td>Luxembourg (63)</td>
<td>3 June 1949</td>
</tr>
<tr>
<td>Austria (15)</td>
<td>30 June 1947</td>
<td>Mexico (35)</td>
<td>7 April 1948</td>
</tr>
<tr>
<td>Belgium (49)</td>
<td>25 June 1948</td>
<td>Monaco (33)</td>
<td>8 July 1948</td>
</tr>
<tr>
<td>Bolivia (68)</td>
<td>23 December 1949</td>
<td>Morocco (82)</td>
<td>14 May 1956</td>
</tr>
<tr>
<td>Brazil (39)</td>
<td>2 June 1948</td>
<td>Nepal (80)</td>
<td>2 September 1953</td>
</tr>
<tr>
<td>Bulgaria (41)</td>
<td>9 June 1948</td>
<td>New Zealand (5)</td>
<td>10 December 1946</td>
</tr>
<tr>
<td>Burma (50)</td>
<td>1 July 1948</td>
<td>Nicaragua (69)</td>
<td>24 April 1950</td>
</tr>
<tr>
<td>Byelorussian SSR (34)</td>
<td>7 April 1948</td>
<td>Norway (18)</td>
<td>18 August 1947</td>
</tr>
<tr>
<td>Cambodia (72)</td>
<td>17 May 1950</td>
<td>Pakistan (48)</td>
<td>23 June 1948</td>
</tr>
<tr>
<td>Canada (3)</td>
<td>29 August 1946</td>
<td>Panama (75)</td>
<td>20 February 1951</td>
</tr>
<tr>
<td>Ceylon (52)</td>
<td>7 July 1948</td>
<td>Paraguay (57)</td>
<td>4 January 1949</td>
</tr>
<tr>
<td>Chile (55)</td>
<td>15 October 1948</td>
<td>Peru (67)</td>
<td>11 November 1949</td>
</tr>
<tr>
<td>China (1)</td>
<td>22 July 1946</td>
<td>Philippines, Republic of the (54)</td>
<td>9 July 1948</td>
</tr>
<tr>
<td>Costa Rica (60)</td>
<td>17 March 1949</td>
<td>Poland (38)</td>
<td>6 May 1948</td>
</tr>
<tr>
<td>Cuba (70)</td>
<td>9 May 1950</td>
<td>Portugal (29)</td>
<td>13 February 1948</td>
</tr>
<tr>
<td>Czechoslovakia (30)</td>
<td>1 March 1948</td>
<td>Romania (40)</td>
<td>8 June 1948</td>
</tr>
<tr>
<td>Denmark (36)</td>
<td>19 April 1948</td>
<td>Saudi Arabia (14)</td>
<td>26 May 1947</td>
</tr>
<tr>
<td>Dominican Republic (45)</td>
<td>21 June 1948</td>
<td>Spain (77)</td>
<td>28 May 1951</td>
</tr>
<tr>
<td>Ecuador (59)</td>
<td>1 March 1949</td>
<td>Sudan (83)</td>
<td>14 May 1956</td>
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<tr>
<td>Egypt (25)</td>
<td>16 December 1947</td>
<td>Sweden (19)</td>
<td>28 August 1947</td>
</tr>
<tr>
<td>El Salvador (47)</td>
<td>22 June 1948</td>
<td>Switzerland (8)</td>
<td>26 March 1947</td>
</tr>
<tr>
<td>Ethiopia (11)</td>
<td>11 April 1947</td>
<td>Syria (6)</td>
<td>18 December 1946</td>
</tr>
<tr>
<td>Finland (22)</td>
<td>7 October 1947</td>
<td>Thailand (21)</td>
<td>26 September 1947</td>
</tr>
<tr>
<td>France (42)</td>
<td>16 June 1948</td>
<td>Tunisia (84)</td>
<td>14 May 1956</td>
</tr>
<tr>
<td>Germany, Federal Republic of (78)</td>
<td>29 May 1951</td>
<td>Turkey (26)</td>
<td>2 January 1948</td>
</tr>
<tr>
<td>Ghana (85)</td>
<td>8 April 1957</td>
<td>Ukrainian SSR (33)</td>
<td>3 April 1948</td>
</tr>
<tr>
<td>Greece (31)</td>
<td>12 March 1948</td>
<td>Union of South Africa (16)</td>
<td>7 August 1947</td>
</tr>
<tr>
<td>Guatemala (66)</td>
<td>26 August 1949</td>
<td>Union of Soviet Socialist Republics (32)</td>
<td>24 March 1948</td>
</tr>
<tr>
<td>Haiti (17)</td>
<td>12 August 1947</td>
<td>United Kingdom of Great Britain and Northern Ireland (2)</td>
<td>22 July 1946</td>
</tr>
<tr>
<td>Honduras (61)</td>
<td>8 April 1949</td>
<td>United States of America (46)</td>
<td>21 June 1948</td>
</tr>
<tr>
<td>Hungary (43)</td>
<td>17 June 1948</td>
<td>Uruguay (62)</td>
<td>22 April 1949</td>
</tr>
<tr>
<td>Iceland (44)</td>
<td>17 June 1948</td>
<td>Venezuela (51)</td>
<td>7 July 1948</td>
</tr>
<tr>
<td>India (27)</td>
<td>12 January 1948</td>
<td>Viet Nam (73)</td>
<td>17 May 1950</td>
</tr>
<tr>
<td>Indonesia, Republic of (74)</td>
<td>23 May 1950</td>
<td>Yemen (81)</td>
<td>20 November 1953</td>
</tr>
<tr>
<td>Iran (4)</td>
<td>23 November 1946</td>
<td>Yugoslavia (24)</td>
<td>19 November 1947</td>
</tr>
<tr>
<td>Iraq (20)</td>
<td>23 September 1947</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ireland (23)</td>
<td>20 October 1947</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Israel (64)</td>
<td>21 June 1949</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Italy (10)</td>
<td>11 April 1947</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Japan (76)</td>
<td>16 May 1951</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jordan, Hashemite Kingdom of (9)</td>
<td>7 April 1947</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Korea (65)</td>
<td>17 August 1949</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laos (71)</td>
<td>17 May 1950</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Associate Members**

<table>
<thead>
<tr>
<th>Associate Members</th>
<th>Date of admission</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federation of Rhodesia and Nyasaland</td>
<td>14 May 1954</td>
</tr>
<tr>
<td>Federation of Nigeria</td>
<td>9 May 1956</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>9 May 1956</td>
</tr>
</tbody>
</table>

1 The Gold Coast was admitted as an Associate Member on 9 May 1956.
Annex 2

MEMBERSHIP OF THE EXECUTIVE BOARD IN 1957

A. At the nineteenth session (15 to 30 January 1957)

Designated by

Dr Ryutaro Azuma .............................................. Japan
Dr L. A. Baquerizo Amador ................................. Ecuador
Professor G. A. Canaparia, Chairman ....................... Italy
Sir John Charles .............................................. United Kingdom of Great Britain and Northern Ireland
Dr Dia E. El-Chatti ........................................... Syria
Dr J. J. Du Pré Le Roux, Rapporteur ...................... Union of South Africa
Dr M. Jafar ....................................................... Pakistan
Dr C. K. Laksmanan, Vice-Chairman ....................... India
Dr N. A. Maung Maung Gyi ................................. Burma
Dr P. E. Moore ................................................. Canada
Professor J. Parisot .......................................... France
Professor N. N. Pesonen ..................................... Finland
Dr R. Pharaon, Vice-Chairman ............................. Saudi Arabia
Dr A. C. Regala ................................................ Philippines
Dr L. Siri ......................................................... Argentina
Dr E. Suarez, Rapporteur ..................................... Chile
Dr D. A. da Silva Travassos ............................... Portugal
Dr J. Zozaya ..................................................... Mexico

B. As from the twentieth session (27 to 28 May 1957)

The Tenth World Health Assembly (in resolution WHA10.5) elected Afghanistan, Australia, Egypt, Federal Republic of Germany, Liberia and the United States of America to designate persons to serve on the Board in place of the retiring members, designated by Burma, Chile, France, Japan, Saudi Arabia and the Union of South Africa. This resulted in the following composition of the Board:

Designated by

Dr Hafez Amin ................................................ Egypt 3 years
Dr L. A. Baquerizo Amador ............................. Ecuador 1 year
Professor G. A. Canaparia ................................. Italy 2 years
Sir John Charles, Chairman .......................... United Kingdom of Great Britain and Northern Ireland 2 years
Dr Dia E. El-Chatti, Vice-Chairman ..................... Syria 2 years
Dr M. A. Faquiri .............................................. Afghanistan 3 years
Dr H. van Zile Hyde ......................................... United States of America 3 years
Dr M. Jafar ....................................................... Pakistan 1 year
Dr F. Koch ....................................................... Federal Republic of Germany 3 years
Dr C. K. Laksmanan .......................................... India 2 years
Dr A. J. Metcalfe ............................................. Australia 3 years
Dr P. E. Moore, Vice-Chairman ......................... Canada 2 years
Professor N. N. Pesonen .................................... Finland 1 year
Dr A. C. Regala ................................................ Philippines 1 year
Dr L. Siri ......................................................... Argentina 1 year
Dr J. N. Tooba ................................................ Liberia 3 years
Dr D. A. da Silva Travassos ............................... Portugal 1 year
Dr J. Zozaya ..................................................... Mexico 2 years

1 Replaced by his alternate, Dr B. M. Clark, at the nineteenth session
2 Replaced by his alternate, Dr R. C. Puri, at the nineteenth session
3 Replaced by his alternate, Dr R. Tumbokon, at the nineteenth session
4 Replaced by his alternate, Dr C. Diaz-Coller, at the nineteenth and twentieth sessions
5 Rapporteur at the twentieth session
Annex 3

EXPERT ADVISORY PANELS AND COMMITTEES

1. EXPERT ADVISORY PANELS

To supply the Organization with technical advice by correspondence and to provide the membership of its expert committees (and of the Committee on International Quarantine), panels of experts have been established for each of the following subjects. The panels on cancer and on radiation were set up during the year.

- Addiction-producing drugs
- Antibiotics
- Biological standardization
- Brucellosis
- Cancer
- Cholera
- Chronic degenerative diseases
- Dental health
- Environmental sanitation
- Health education of the public
- Health laboratory methods
- Health statistics
- Insecticides
- International pharmacopoeia and pharmaceutical preparations
- International quarantine
- Leprosy
- Malaria
- Maternal and child health
- Mental health
- Nursing
- Nutrition
- Occupational health
- Organization of medical care
- Parasitic diseases
- Plague
- Professional and technical education of medical and auxiliary personnel
- Public-health administration
- Rabies
- Radiation
- Rehabilitation
- Trachoma
- Tuberculosis
- Veneral infections and treponematoses (including serology and laboratory aspects)
- Virus diseases
- Yellow fever
- Zoonoses

2. EXPERT COMMITTEES

The membership of the expert committees which met in 1957 was as follows:

**Expert Committee on Addiction-producing Drugs**

*Geneva, 14-19 October 1957*

- Dr N. B. Eddy, Chief, Section on Analgesics, Division of Chemistry, National Institute of Arthritis and Metabolic Diseases, National Institutes of Health (Public Health Service), Bethesda, Md., United States of America
- Dr L. Goldberg, Professor of Research on Alcohol and Analgesics, Karolinska Institut, Stockholm, Sweden
- Dr L. Goldberg, Professor of Research on Alcohol and Analgesics, Karolinska Institut, Stockholm, Sweden
- Dr G. Joachimoglou, Professor of Pharmacology; Chairman, Superior Health Council, Ministry of Social Welfare, Athens, Greece
- Dr J. La Barre, Professor of Pharmacology, Faculty of Medicine and Pharmacy, Université libre de Bruxelles, Brussels, Belgium
- Dr V. Zapata Ortiz, Professor of Pharmacology, Faculty of Medicine, National University of San Marcos, Lima, Peru

**Expert Committee on Air Pollution**

*Geneva, 18-23 November 1957*

- Dr E. C. Halliday, Head, General Physics Division, National Physical Research Laboratory, Council for Scientific and Industrial Research, Pretoria, Union of South Africa
- Dr Harry Heimann, Chief, Operational Research Section, Air Pollution Medical Program, Division of Special Health Services, Public Health Service, Department of Health, Education and Welfare, Washington, D.C., United States of America

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1 The Committee on International Quarantine, which has special functions defined by the Health Assembly in resolution WHA6.20, is for convenience included in this annex, as section 3.
2 The terms of reference of this panel cover the health aspects of the peaceful uses of atomic energy and also the health problems of *x*-radiation.
Dr T. Ramachandra Rao, Assistant Director of Public Health
Dr Marshall Laird, Macdonald College, McGill University,
Dr J. R. Busvine, London School of Hygiene and Tropical
Dr L.
Expert Committee on Insect Resistance and Vector Control
Dr W. P. D. Logan, Chief Statistician
Dr H. F. Dorn, Chief, Biometrics Branch, Division of Research
Dr P. F. Denoix, Director, Institut Gustave Roussy, Villejuif
Dr J. Clemmesen, Director, Danish Cancer Registry, Copen-
Geneva, 9 -14 December 1957
Dr N. H. Fisek, Head, Biologies Control Division, Central
Professor E. Grasset, Director, Institute of Hygiene, University
Dr O. Maaloe, Chief, Department of Biological Standardiza-
Dr R. Murray, Director, Division of Biologics Standards,
Dr A. S. Outschoorn, Head, Division of Pharmacology, Medical
Dr H. Welch, Director, Division of Antibiotics, Food and Drug
Expert Committee on Biological Standardization
Geneva, 16-21 September 1957
Dr N. H. Fisek, Head, Biologies Control Division, Central
Professor E. Grasset, Director, Institute of Hygiene, University
Dr O. Maaloe, Chief, Department of Biological Standardiza-
Dr R. Murray, Director, Division of Biologics Standards,
Dr A. S. Outschoorn, Head, Division of Pharmacology, Medical
Dr H. Welch, Director, Division of Antibiotics, Food and Drug
Expert Committee on Health Statistics: Sub-Committee on
Geneva, 9-14 December 1957
Dr J. Clemmesen, Director, Danish Cancer Registry, Copen-
Dr P. F. Denoix, Director, Institut Gustave Roussy, Villejuif
Dr H. F. Dorn, Chief, Biometrics Branch, Division of Research
Dr W. L. M. Perry, Director, Department of Biological Stan-
Professor R. Frigge, Director, Paul-Ehrlich-Institut, Frankfurt-
Dr H. Welch, Director, Division of Antibiotics, Food and Drug
Expert Committee on Insect Resistance and Vector Control
Geneva, 18-23 November 1957
Dr L. J. Bruce-Chwatt, Senior Specialist, Malaria Service,
Dr J. R. Busvine, London School of Hygiene and Tropical
Dr Marshall Laird, Macdonald College, McGill University,
Dr T. Ramachandra Rao, Assistant Director of Public Health
Dr G. Saccà, Istituto Superiore di Sanità, Rome, Italy
Dr S. W. Simmons, Scientist Director; Chief, Technology
Expert Committee on the International Pharmacopoeia
Geneva, 2-8 October 1957
Professor H. Baggesgaard Rasmussen, Professor of Organic
Professor R. Prigge, Director, Paul -Ehrlich -Institut, Frankfurt-
Dr W. L. M. Perry, Director, Department of Biological Stan-
Dr R. Hazard, Professor of Pharmacology and Materia medica,
Dr T. Itai, Chief, Division of Non-Official Drugs, National
F. A. Maurina, Director, Analytical Laboratories, Parke,
Dr L. C. Miller, Director of Revision of the Pharmacopoeia of
Dr J. L. Powers, Chairman, Committee on National Formulary,
Sub-Committee on Non-Proprietary Names
Geneva, 13-15 June 1957
Dr H. Baggesgaard Rasmussen, Professor of Organic Chemistry,
Professor H. Flück, Professor of Pharmacognosy, Federal
Dr T. Itai, Chief, Division of Non-Official Drugs, National
Dr R. Hazard, Professor of Pharmacology and Materia medica,
Dr R. T. Stormont, Director, Division of Therapy and Research,
Professor K. Venkataraman, Director, National Chemical
Expert Committee on Poliomyelitis
Geneva, 15-20 July 1957
Dr H. Bernkopf, Head, Virus Research Laboratory, Hadassah
Sir Macfarlane Burnet, Director, Walter and Eliza Hall Institute
Dr H. K. Cowan, Chief Medical Officer, Department of Health
Professor E. Leclerc, Director, Centre belge d'Etude et de
Documentation des Eaux, University of Liège, Belgium
Dr Louis C. McCabe, President, Resources Research Inc.,
Dr Albert Parker, formerly Director of Fuel Research, Depart-
Professor C. A. Ragazzi, Chief Medical Officer of Milan, Italy
Dr J. Bruce -Chwatt, Senior Specialist, Malaria Service,
Dr R. T. Stormont, Director, División of Therapy and Research,
Professor J. Bruce -Chwatt, Senior Specialist, Malaria Service,
Faculty of Medicine, University of Paris, France; Member of
Dr T. Canbäck, Stockholm, Sweden; Vice-Chairman of the
Dr T. Canbäck, Stockholm, Sweden; Vice-Chairman of the
Professor H. Baggesgaard Rasmussen, Professor of Organic
Professor H. Flück, Professor of Pharmacognosy, Federal
Professor E. Leclerc, Director, Centre belge d'Etude et de
Professor R. Prigge, Director, Paul -Ehrlich -Institut, Frankfurt-
Professor H. Flück, Professor of Pharmacognosy, Federal
Professor H. Flück, Professor of Pharmacognosy, Federal
ANNEX 3

Dr S. Gard, Professor of Virus Research, School of Medicine, Karolinska Institut, Stockholm, Sweden
Dr J. H. S. Gear, Director of Research, Poliomyelitis Research Foundation, South African Institute for Medical Research, Johannesburg, Union of South Africa
Professor J. H. Hale, Head, Department of Bacteriology, University of Malaya, Singapore
Dr M. Kitaoka, Director, Department of Viral and Rickettsial Diseases, National Institute of Health, Tokyo, Japan
Dr P. R. Lépine, Chief, Virus Section, Institut Pasteur, Paris, France
Dr J. L. Melnick, Professor of Epidemiology, Yale University School of Medicine, New Haven, Conn., United States of America
Dr F. P. Nagler, Chief, Virus Laboratory, Laboratory of Hygiene, Department of National Health and Welfare, Ottawa, Canada
Dr J. R. Paul, Professor of Preventive Medicine, Yale University School of Medicine, New Haven, Conn., United States of America
Professor F. Przesmycki, Director, State Institute of Hygiene, Warsaw, Poland
Dr A. B. Sabin, Professor of Research Pediatrics, University of Cincinnati College of Medicine, Children's Hospital Research Foundation, Cincinnati, Ohio, United States of America
Dr V. D. Soloviev, Professor of Virology, Scientific Director, Moscow Institute for Poliomyelitis Prophylactics, Moscow, Union of Soviet Socialist Republics

Expert Committee on Professional and Technical Education of Medical and Auxiliary Personnel (Introduction of Radiation Medicine into the Undergraduate Curriculum)

Geneva, 23-28 September 1957
Dr Gaylord W. Anderson, Mayo Professor and Director, School of Public Health, University of Minnesota, Minneapolis, Minn., United States of America
Dr John C. Bugher, Director, Medical Education and Public Health, Rockefeller Foundation, New York, N.Y., United States of America
Professor Dr G. C. E. Burger, Medical Department, Philips Gloeilampenfabrieken, Eindhoven, Netherlands
Sir Ernest Rock Carling, London, England
Dr J. Coursaget, Professeur agrégé; Chief, Biology Section, Commissariat à l'Energie atomique, Saclay (Seine-et-Oise), France
Dr Conrad P. Straub, Chief, Radiological Health Program, Robert A. Taft Sanitary Engineering Center, Public Health Service, Department of Health, Education and Welfare, Cincinnati, Ohio, United States of America
Dr Masao Tsuzuki, Director, Japanese Red Cross Central Hospital, Tokyo, Japan

Expert Committee on Professional and Technical Education of Medical and Auxiliary Personnel (Post-graduate Training in the Public-Health Aspects of Atomic Energy)

Geneva, 28 October-1 November 1957
Miss O. Baggallay, London, England; (formerly Chief, Nursing Section, World Health Organization)
Dr J. Burton, Medical Director, Central Council for Health Education, London, England
Dr V. S. Erchov, Departmental Director, Central Institute for Scientific Research in Health Education, Moscow, Union of Soviet Socialist Republics
Professor V. García de Yazigi, Assistant Professor of Public Health, School of Public Health, Santiago, Chile
Professor L. Morgan, Professor of Health Education, University of North Carolina School of Public Health, Chapel Hill, N.C., United States of America
Dr A. Zaki, Director of Medical Services, Ministry of Health, Khartoum, Sudan

Expert Committee on Water Fluoridation

Geneva, 26-30 August 1957
Professor S. Yngve Ericsson, Professor of Cariology, Royal School of Dentistry, Stockholm, Sweden
Dr Jean R. Forrest, Senior Dental Officer, Ministry of Health, London, England
Dr Paulo da Silva Freire, Chief of the Dental Section, Special Public Health Service, Rio de Janeiro, Brazil
Professor A.-J. Held, Institute of Dental Medicine, University of Geneva, Switzerland
Professor Harold C. Hodge, Professor of Pharmacology and Toxicology, University of Rochester School of Medicine and Dentistry, Rochester, N.Y., United States of America
Dr John W. Knutson, Assistant Surgeon General; Chief Dental Officer, Public Health Service, Department of Health, Education and Welfare, Washington, D.C., United States of America
Professor K. L. Shourie, Principal, C.E.M. Dental College and Hospital, Bombay, India

Expert Committee on Yellow-FEVER Vaccine

Geneva, 8-13 April 1957
Dr A. Gast-Galvis, Director, Instituto Carlos Finlay, Bogotá, Colombia
Dr R. Isaac Díaz, Chief, Yellow Fever and Plague Division, Ministry of Health and Welfare, Caracas, Venezuela
Dr J. Laigret, Professor of Hygiene and Bacteriology, Faculty of Medicine, University of Strasbourg, France
Dr P. Lépine, Chief, Virus Section, Institut Pasteur, Paris, France
Dr F. N. Macnamara, Director, West African Council for Medical Research Laboratories, Yaba-Lagos, Nigeria
Dr K. C. Smithburn, Rockefeller Foundation, Johannesburg, Union of South Africa

Joint Expert Committees

Joint FAO/WHO Expert Committee on Brucellosis
Lima, 9-14 October 1957
Dr Mario Cornejo Marino, Chief, Livestock Department, Ministry of Agriculture, Santiago, Chile
Sir Weldon Dalrymple-Champneys, Bt, formerly Deputy Chief Medical Adviser, Ministry of Health, London, England
Dr Sanford Elberg, Professor of Bacteriology, University of California, Berkeley, Calif., United States of America

Dr C. A. Manthei, Head, Bacterial and Mycotic Diseases Section, Animal Disease and Parasitic Research Division, Agriculture Research Service, Department of Agriculture, Beltsville, Md., United States of America

Dr N. B. McCullough, Chief, Laboratory of Clinical Investigation, National Institute of Allergy and Infectious Diseases, National Institutes of Health (Public Health Service), Bethesda, Md., United States of America

Dr G. Renoux, Director, Institut Pasteur, Tunis, Tunisia
Dr M. Ruiz Castañeda, Medical Research Institute, General Hospital, Mexico, D.F., Mexico
Dr W. W. Spink, Professor of Medicine, University of Minnesota, Minneapolis, Minn., United States of America

Dr A. W. Stableforth, Director of Veterinary Laboratory and Investigation Services, Central Veterinary Laboratory, New Haw, Weybridge, Surrey, England

Dr Milton Thiago de Mello, Instituto Oswaldo Cruz, Rio de Janeiro, Brazil

Joint FAO/WHO Expert Committee on Food Additives (Procedures of Toxicological Testing of Food Additives)
Geneva, 17-24 June 1957
Professor E. Abramson, Director, National Institute of Public Health, Tomteboda, Sweden
M. G. Allmark, Head, Section of Pharmacology and Toxicology, Food and Drug Directorate, Department of National Health and Welfare, Ottawa, Canada

Dr J. M. Barnes, Toxicology Research Unit, Medical Research Council Laboratories, Carshalton, Surrey, England

Dr R. Blackwell Smith, Jr, President, Medical College of Virginia, Richmond, Va., United States of America

Dr F. A. Denz, Director, Toxicology Research Department, Medical School, University of Otago, Dunedin, New Zealand

Professor A. C. Frazer, Department of Pharmacology, Medical School, University of Birmingham, England

H. van Genderen, Head, Department of Pharmacology and Endocrinology, National Institute of Public Health, Utrecht, Netherlands

Dr B. Mukerji, Director, Central Drug Research Institute, Lucknow, India

Dr Howard Spencer, Biochemical Research Department, Dow Chemical Company, Midland, Mich., United States of America
Professor R. Truhaut, Toxicological Laboratory, Faculty of Pharmacy, Paris, France

Joint FAO/WHO Expert Committee on Nutrition
Rome, 22-29 October 1957
Professor W. J. Darby, Director, Division of Nutrition, Vanderbilt University School of Medicine, Nashville, Tenn., United States of America

Dr J. Deeny, Chief Medical Adviser, Department of Health, Dublin, Ireland

Professor M. J. L. Dols, General Adviser, Ministry of Agriculture, Fisheries and Food, The Hague, Netherlands

Dr Toshio Oiso, Chief, Nutrition Section, Bureau of Public Health, Ministry of Health and Welfare, Tokyo, Japan

Dr V. N. Patwardhan, Director, Nutrition Research Laboratories, Indian Council of Medical Research, Coonoor, India

Professor B. S. Platt, Professor of Human Nutrition, University of London; Director, Medical Research Council's Human Nutrition Research Unit; Director, Applied Nutrition Unit, London School of Hygiene and Tropical Medicine, London, England

Dr V. Ramalingaswami, All-India Institute of Medical Sciences, New Delhi, India

Dr Hazel K. Stiebeling, Director, Human Nutrition and Home Economics Research, Agricultural Research Service, Department of Agriculture, Washington, D.C., United States of America

Dr Rudolf Wenger, Associate Professor of Internal Medicine, Medical Clinic I, University of Vienna, Austria

Joint ILO/WHO Committee on Occupational Health
Geneva, 18-23 March 1957
Dr H. P. Dastur, Chief Industrial Health Officer, Tata Industries Ltd., Bombay, India

Dr J. J. Gillon, Chief Inspector of Occupational Health Services, State Secretariat of Labour and Social Security, Paris, France

Dr L. J. Goldwater, Professor of Occupational Medicine, School of Public Health and Administrative Medicine, Columbia University, New York, N.Y., United States of America

Dr S. Harashima, Professor of Preventive Medicine and Occupational Health, School of Medicine, Keio Gijuku University, Tokyo, Japan

Dr J. Kaplan, Associate Professor of Hygiene and Social Medicine, School of Medicine of Buenos Aires; Occupational Health Adviser to the National Ministry of Public Health and Director of Occupational Health for the Province of Buenos Aires, Argentina

Professor R. A. Kehoe, Director, Kettering Laboratory, Department of Preventive Medicine and Industrial Health, College of Medicine, University of Cincinnati, Ohio, United States of America

Professor R. E. Lane, Professor of Occupational Health, Nuffield Department of Occupational Health, University of Manchester, England

Dr L. Noro, Director, Institute of Occupational Health, Helsinki, Finland

Professor E. C. Vigliani, Director, Occupational Health Clinic, University of Milan, Italy
3. COMMITTEE ON INTERNATIONAL QUARANTINE

Geneva, 21-26 October 1957

Dr B. M. Clark, Deputy Chief Health Officer, Department of Health, Pretoria, Union of South Africa

Professor A. El Halawani, Assistant Under-Secretary of State, Ministry of Public Health, Cairo, Egypt

Dr C. K. Lakshmanan, Director-General of Health Services, New Delhi, India

Dr L. H. Murray, Medical Officer, Ministry of Health, London, England

Professor E. G. Nauck, Director, Institute of Tropical Medicine, Hamburg, West Germany

Dr Stevo Posloncec, Port Health Officer, Rijeka, Yugoslavia

Dr C. B. Spencer, Medical Officer in Charge, US Quarantine Station, Baltimore, Md, United States of America

Dr O. Vargas-Méndez, Director-General of Health, San José, Costa Rica

ANNEX 4

ORGANIZATIONAL MEETINGS AND MEETINGS OF EXPERT COMMITTEES AND ADVISORY GROUPS HELD IN 1957

Executive Board, nineteenth session: Standing Committee on Administration and Finance
Tuberculosis Workers' Meeting (South-East Asia Region)

Executive Board, nineteenth session
ILO/WHO: Joint Committee on Occupational Health
Malaria Conference (for Eastern and South-Eastern European Countries)

Borneo Inter-territorial Malaria Conference (Western Pacific Region)

Expert Committee on Yellow-Fever Vaccine

UNICEF/WHO: Joint Committee on Health Policy, tenth session

Tenth World Health Assembly

Executive Board, twentieth session

Expert Committee on the International Pharmacopoeia: Sub-Committee on Non-Proprietary Names

FAO/WHO: Joint Expert Committee on Food Additives (Procedures of Toxicological Testing of Food Additives)

Study Group on Histological Definitions of Cancer Types

Conference on Health Education of the Public (European Region)

Expert Committee on Poliomyelitis

Technical Conference on Insect Resistance to consider an International Collaborative Programme of Research

Yaws Co-ordination Meeting (African Region)

Expert Committee on Water Fluoridation

Regional Committee for the Western Pacific, eighth session

Study Group on Schizophrenia

Regional Committee for Europe, seventh session

Regional Committee for South-East Asia, tenth session

Expert Committee on Biological Standardization

Regional Committee for Africa, seventh session

Regional Committee for the Americas, ninth session, and Directing Council, PASO, X Meeting

Study Group on Chemotherapy and Chemoprophylaxis in Tuberculosis Control

Regional Committee for the Eastern Mediterranean, seventh session: Sub-Committee A

Expert Committee on Professional and Technical Education of Medical and Auxiliary Personnel (Post-graduate Training in the Public-Health Aspects of Atomic Energy)

1 Details of seminars and training courses organized by WHO in co-operation with governments or with organizations are given in the Project List in Part IV.
FAO/WHO: Latin-American Conference on Nutrition (Region of the Americas)
Symposium on the Public-Health Aspects of Chronic Diseases (European Region)
Expert Committee on the International Pharmacopoeia
Study Group on Classification of Atherosclerotic Lesions
Study Group on Recommended Requirements for Biological Substances
FAO/WHO: Joint Expert Committee on Brucellosis
Expert Committee on Addiction-producing Drugs
Advisory Group on Public-Health Laboratory Services (European Region)
Rural Health Conference (South-East Asia Region)
Study Group on the Teaching of Social and Preventive Medicine (Western Pacific Region)
Committee on International Quarantine
Study Group on Mental Health Aspects of Peaceful Uses of Atomic Energy
FAO/WHO: Joint Expert Committee on Nutrition
Expert Committee on the Training of Health Personnel in Health Education of the Public
Study Group on Ataraxic and Hallucinogenic Drugs in Psychiatry
Conference on Air Pollution (European Region)
Expert Committee on Insect Resistance and Vector Control
Expert Committee on Air Pollution
Meeting of Malarologists (African Region)
Expert Committee on Professional and Technical Education of Medical and Auxiliary Personnel (Introduction of Radiation Medicine into the Undergraduate Curriculum)
Maternal and Child Health Seminar (Eastern Mediterranean Region)
Borneo Inter-territorial Malaria Conference (Western Pacific Region)
Study Group on the Preventive Aspects in the Teaching of Physiology
Advisory Group on Nursing Service Administration (European Region)
Meeting on Malaria Eradication (Eastern Mediterranean Region)
Expert Committee on Health Statistics: Sub-Committee on Cancer Statistics
Antimalaria Co-ordination Board
Malaria Symposium

Guatemala, 23 Sept.-1 Oct.
Amsterdam, 30 Sept.-5 Oct.
Geneva, 2-8 October
Washington, D.C., 7-11 October
Geneva, 7-12 October
Lima, 9-14 October
Geneva, 14-19 October
Moscow, 14-19 October
New Delhi, 14-26 October
Manila, 16-29 October
Geneva, 21-26 October
Geneva, 21-26 October
Geneva, 21-26 October
Geneva, 22-29 October
Geneva, 4-9 November
Geneva, 6-14 November
Geneva, 18-23 November
Geneva, 18-23 November
Brazzaville, 19-22 November
Geneva, 25-30 November
Cairo, 25 Nov.-7 Dec.
Labuan, North Borneo, 26-28 Nov.
Geneva, 2-7 December
Geneva, 6-12 December
Baghdad, 7-12 December
Geneva, 9-14 December
Bangkok, 11-13 December
Bangkok, 13-20 December

Annex 5

TENTATIVE SCHEDULE OF WHO ORGANIZATIONAL MEETINGS IN 1958

Executive Board, twenty-first session: Standing Committee on Administration and Finance
Executive Board, twenty-first session
Tenth Anniversary Commemorative Session of the World Health Organization
Eleventh World Health Assembly
Executive Board, twenty-second session
Regional Committee for Europe, eighth session
Regional Committee for the Americas, tenth session, and XV Pan American Sanitary Conference
Regional Committee for Africa, eighth session
Regional Committee for South-East Asia, eleventh session
Regional Committee for the Eastern Mediterranean, eighth session
Regional Committee for the Western Pacific, ninth session

Geneva, 6 January
Geneva, 14 January
Minneapolis, 26 May
Minneapolis, 28 May
Minneapolis, 16 June
Monaco, 3 September
San Juan, Puerto Rico, 21 September
Monrovia, 22 September
New Delhi, September
Baghdad, September
(UNSCHEDULED)
Manila, September
Annex 6

NON-GOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO
(as at 31 December 1957)

Biometric Society
Central Council for Health Education
Council for International Organizations of Medical Sciences
Fédération dentaire internationale
Inter-American Association of Sanitary Engineering
International Academy of Legal Medicine and of Social Medicine
International Association of Microbiological Societies
International Association for the Prevention of Blindness
International Commission on Radiological Protection
International Commission on Radiological Units and Measurements
International Committee of Catholic Nurses
International Committee of the Red Cross
International Confederation of Midwives
International Conference of Social Work
International Council of Nurses
International Diabetes Federation
International Federation of Gynecology and Obstetrics
International Federation for Housing and Town Planning
International Hospital Federation
International Hydatidological Association
International League against Rheumatism
International Leprosy Association
International Organization against Trachoma
International Paediatric Association
International Pharmaceutical Federation
International Society for Blood Transfusion
International Society for Criminology
International Society for the Welfare of Cripples
International Union against Cancer
International Union for Child Welfare
International Union for Health Education of the Public
International Union against Tuberculosis
International Union against Venereal Diseases and the Treponematoses
League of Red Cross Societies
Medical Women's International Association
Permanent Committee for the International Veterinary Congresses
World Confederation for Physical Therapy
World Federation for Mental Health
World Federation of Societies of Anaesthesiologists
World Federation of United Nations Associations
World Medical Association
World Union OSE (Child Relief and Health Protection of Jewish Populations)
World Veterans Federation
### Annex 7

**REGULAR BUDGET FOR 1957**

<table>
<thead>
<tr>
<th>Appropriation section</th>
<th>Purpose of appropriation</th>
<th>Original amount voted</th>
<th>Supplementary estimates</th>
<th>Transfers concurred in by the Executive Board</th>
<th>Revised appropriation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PART I: ORGANIZATIONAL MEETINGS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. World Health Assembly</td>
<td></td>
<td>199 200</td>
<td>-</td>
<td>10 315</td>
<td>209 515</td>
</tr>
<tr>
<td>2. Executive Board and its Committees</td>
<td></td>
<td>111 130</td>
<td>-</td>
<td>3 380</td>
<td>114 510</td>
</tr>
<tr>
<td>3. Regional Committees</td>
<td></td>
<td>52 180</td>
<td>-</td>
<td>2 920</td>
<td>55 100</td>
</tr>
<tr>
<td><strong>Total — Part I</strong></td>
<td></td>
<td>362 510</td>
<td>-</td>
<td>16 615</td>
<td>379 125</td>
</tr>
<tr>
<td><strong>PART II: OPERATING PROGRAMME</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Central Technical Services</td>
<td></td>
<td>1 740 512</td>
<td>25 500</td>
<td>(22 973)</td>
<td>1 743 039</td>
</tr>
<tr>
<td>5. Advisory Services</td>
<td></td>
<td>7 314 826</td>
<td>163 000</td>
<td>(81 415)</td>
<td>7 396 411</td>
</tr>
<tr>
<td>6. Regional Offices</td>
<td></td>
<td>1 527 388</td>
<td>117 200</td>
<td>53 973</td>
<td>1 698 561</td>
</tr>
<tr>
<td>7. Expert Committees and Conferences</td>
<td></td>
<td>131 900</td>
<td>-</td>
<td>-</td>
<td>131 900</td>
</tr>
<tr>
<td><strong>Total — Part II</strong></td>
<td></td>
<td>10 714 626</td>
<td>305 700</td>
<td>(50 415)</td>
<td>10 969 911</td>
</tr>
<tr>
<td><strong>PART III: ADMINISTRATIVE SERVICES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Administrative Services</td>
<td></td>
<td>1 130 624</td>
<td>19 300</td>
<td>33 800</td>
<td>1 183 724</td>
</tr>
<tr>
<td><strong>Total — Part III</strong></td>
<td></td>
<td>1 130 624</td>
<td>19 300</td>
<td>33 800</td>
<td>1 183 724</td>
</tr>
<tr>
<td><strong>SUB-TOTAL — PARTS I to III</strong></td>
<td></td>
<td>12 207 760</td>
<td>325 000</td>
<td>-</td>
<td>12 532 760</td>
</tr>
<tr>
<td><strong>PART IV: UNDISTRIBUTED RESERVE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Undistributed Reserve</td>
<td></td>
<td>1 057 660</td>
<td>-</td>
<td>-</td>
<td>1 057 660</td>
</tr>
<tr>
<td><strong>Total — Part IV</strong></td>
<td></td>
<td>1 057 660</td>
<td>-</td>
<td>-</td>
<td>1 057 660</td>
</tr>
<tr>
<td><strong>TOTAL — ALL PARTS</strong></td>
<td></td>
<td>13 265 420</td>
<td>325 000</td>
<td>-</td>
<td>13 590 420</td>
</tr>
</tbody>
</table>

---

1. As voted by the Ninth World Health Assembly (resolution WHA9.59, *Off. Rec. Wld Hlth Org. 71, 41*) and adjusted in accordance with the authority vested in the Director-General by paragraph IV of the resolution.

2. Appropriated by the Tenth World Health Assembly (resolution WHA10.7, *Off. Rec. Wld Hlth Org. 79, 21*).

Annex 8

STRUCTURE OF THE HEADQUARTERS SECRETARIAT

THE DIRECTOR-GENERAL — Offices of the Director-General

Departments

Office of Programme Co-ordination
Office of Programme Evaluation

Divisions

Malaria Eradication
Communicable-Disease Services
Organization of Public-Health Services
Environmental Sanitation
Education and Training Services
Epidemiological and Health Statistical Services
Therapeutic Substances
Editorial and Reference Services
Administrative Management and Personnel
Budget and Finance

Sections

Planning
Programme
Tuberculosis
Venereal Diseases and Treponematoses
Endemo-epidemic Diseases
Veterinary Public Health
Public-Health Administration
Nursing
Social and Occupational Health
Health Education of the Public
Maternal and Child Health
Mental Health
Nutrition
Fellowships
Exchange of Scientific Information
Assistance to Educational Institutions
Epidemiological Studies
Statistical Studies
International Classification of Diseases and Causes of Death
International Quarantine
Biological Standardization
Pharmaceutical
Addiction-producing Drugs
Health Laboratory Methods
Technical Publications
Health Legislation
Official Records
Translation
Library and Reference Services
Administrative Management
Personnel
Conference and Office Services
Supply Services
Budget
Finance and Accounts
### Annex 9

#### NUMBERS AND DISTRIBUTION OF THE STAFF¹

**1956-1957**

<table>
<thead>
<tr>
<th>Distribution</th>
<th>Staff as at 30 November 1956</th>
<th>Staff as at 30 November 1957</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Technical Assistance</td>
</tr>
<tr>
<td><strong>Headquarters</strong>²</td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>247</td>
<td>45</td>
</tr>
<tr>
<td>locally recruited</td>
<td>235</td>
<td></td>
</tr>
<tr>
<td><strong>Regional offices</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Africa</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>15</td>
<td>3</td>
</tr>
<tr>
<td>locally recruited</td>
<td>45</td>
<td></td>
</tr>
<tr>
<td><strong>The Americas</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>29</td>
<td>10</td>
</tr>
<tr>
<td>locally recruited</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td><strong>South-East Asia</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>21</td>
<td>29</td>
</tr>
<tr>
<td>locally recruited</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td><strong>Europe</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>21</td>
<td>10</td>
</tr>
<tr>
<td>locally recruited</td>
<td>28</td>
<td></td>
</tr>
<tr>
<td><strong>Eastern Mediterranean</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>29</td>
<td>10</td>
</tr>
<tr>
<td>locally recruited</td>
<td>31</td>
<td></td>
</tr>
<tr>
<td><strong>Western Pacific</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>21</td>
<td>10</td>
</tr>
<tr>
<td>locally recruited</td>
<td>48</td>
<td></td>
</tr>
<tr>
<td><strong>Area and zone offices</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>locally recruited</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td><strong>Field staff in countries</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td>453</td>
<td>290</td>
</tr>
<tr>
<td>locally recruited</td>
<td>6</td>
<td></td>
</tr>
</tbody>
</table>

¹ Excluding consultants
² Including Liaison Office with the United Nations, New York, and Tuberculosis Research Office, Copenhagen
<table>
<thead>
<tr>
<th>Distribution</th>
<th>Staff as at 30 November 1956</th>
<th>Staff as at 30 November 1957</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Technical Assistance</td>
</tr>
<tr>
<td>Other offices</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNICEF Liaison</td>
<td>4</td>
<td>—</td>
</tr>
<tr>
<td>Epidemiological Intelligence Station, Singapore</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>internationally recruited</td>
<td></td>
<td></td>
</tr>
<tr>
<td>locally recruited</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuberculosis Immunization Research Centre, Copenhagen</td>
<td>3</td>
<td>—</td>
</tr>
<tr>
<td>UNRWA</td>
<td>3</td>
<td>—</td>
</tr>
<tr>
<td>International Children’s Centre, Paris</td>
<td>1</td>
<td>—</td>
</tr>
<tr>
<td></td>
<td>1394</td>
<td>404</td>
</tr>
<tr>
<td>Staff not paid from WHO funds</td>
<td>13</td>
<td>—</td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>1407</td>
<td></td>
</tr>
</tbody>
</table>

1 Appointed on reimbursable basis
### Annex 10

#### COMPOSITION OF THE STAFF BY NATIONALITY

as at 30 November 1957

<table>
<thead>
<tr>
<th>Country</th>
<th>Grades</th>
<th>Total</th>
<th>Source of funds</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>P5 and above</td>
<td>Pl to P4</td>
<td>Technical Assistance</td>
</tr>
<tr>
<td>Argentina</td>
<td>1</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>Australia</td>
<td>1</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Austria</td>
<td>-</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Belgium</td>
<td>1</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Bolivia</td>
<td>-</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Brazil</td>
<td>1</td>
<td>20</td>
<td>21</td>
</tr>
<tr>
<td>Canada</td>
<td>7</td>
<td>43</td>
<td>50</td>
</tr>
<tr>
<td>Ceylon</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Chile</td>
<td>5</td>
<td>11</td>
<td>16</td>
</tr>
<tr>
<td>China</td>
<td>5</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>Colombia</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Costa Rica</td>
<td>-</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Cuba</td>
<td>-</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Czechoslovakia</td>
<td>2</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Denmark</td>
<td>3</td>
<td>37</td>
<td>40</td>
</tr>
<tr>
<td>Ecuador</td>
<td>-</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Egypt</td>
<td>1</td>
<td>21</td>
<td>22</td>
</tr>
<tr>
<td>Finland</td>
<td>-</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>France</td>
<td>8</td>
<td>36</td>
<td>44</td>
</tr>
<tr>
<td>Germany</td>
<td>1</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Greece</td>
<td>1</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Guatemala</td>
<td>-</td>
<td>1</td>
<td>1</td>
</tr>
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The above table does not include the following:

- Language staff: 68
- Short-term consultants: 79
- Professional staff on loan, or not paid from WHO funds: 14
- Locally recruited staff: 593

**Total** 754
THE WORK OF WHO, 1957

ANNUAL REPORT OF THE DIRECTOR-GENERAL

TO THE

WORLD HEALTH ASSEMBLY AND TO THE UNITED NATIONS

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