7. SOCIO-ECONOMIC ASPECTS OF WHO'S PROGRAMME

Assistance given by WHO is closely integrated with national development plans for social and economic progress.

A full comprehension of the socio-economic impact of WHO activities demands a study of the total list of WHO-assisted projects in Part III of this report. However, a few outstanding examples may be cited, such as the results arising from successful malaria eradication programmes, since malaria has so long been a predominant cause of wastage and devitalization of human effort. Also, recent advances in the treatment of tuberculosis have greatly improved the outlook for the individual sufferer, but the need for provision of long-term in-patient care has imposed a heavy strain on the public economy. In this context the research project on the adaptation of modern therapeutics to domiciliary care promises a considerable economic gain.

In the field of environmental sanitation WHO's contribution to the provision of safe and adequate water supplies in rural areas has helped towards the removal of an obstacle to rural progress.

8. RADIATION AND ISOTOPES

A five-week course for health physicists was conducted in the Department of Atomic Energy, Bombay. Fourteen participants from the Department attended the course, and a further nine candidates from countries in South-East Asia and the Western Pacific participated. The course director and two lecturers were provided by the Atomic Energy Commission of the USA, and a lecturer from the Atomic Energy Authority of the United Kingdom assisted during the last week of the course. The staff of the Department of the Atomic Energy Commission, Bombay, took part in the training.

Three WHO fellows who were awarded international one-year fellowships in different aspects of the subject completed their studies. Placement was arranged for a candidate who was granted a Government of India fellowship in health physics.

9. ASSISTANCE TO RESEARCH

As a result of the resolutions of the World Health Assemblies in 1958 and 1959, WHO is planning to widen the sphere of its assistance to research programmes. In the meantime activities have been continued on the established pattern of direct assistance mostly to field research and of indirect assistance to research laboratories through the supply of standard biologicals, the interchange of biological specimens, the dissemination of information and the provision of training facilities.

In epidemiological and field research, help is given to pilot projects in trachoma and leprosy control designed to try out various therapeutic regimens. In the field of tuberculosis, especially, important investigations on treatment and control are continuing, with WHO co-operation, in Madurai and Madanapalle.

Field studies in India in protein malnutrition and on the public health aspects of anaemia have continued; a final report on the former study was produced and published during the year.