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REPORT OF THE HEALTH DEPARTMENT OF THE UNITED NATIONS  
RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES

The Regional Director has the honour to present to the Thirteenth Session of the Regional Committee for the Eastern Mediterranean the Annual Report of the Health Department of the United Nations Relief and Works Agency for Palestine Refugees, covering the period 1 July 1962 - 30 June 1963.

UNITED NATIONS RELIEF AND WORKS AGENCY  
FOR PALESTINE REFUGEES

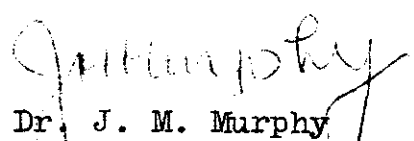
REPORT OF THE DEPARTMENT OF HEALTH

1 July 1962 - 30 June 1963

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UNRWA Headquarters  
Beirut - Lebanon  
July, 1963.

  
Dr. J. M. Murphy  
Acting Director of Health  
UNRWA

UNITED NATIONS RELIEF AND WORKS AGENCY

FOR PALESTINE REFUGEES

REPORT OF THE HEALTH DEPARTMENT

1 July 1962 - 30 June 1963

I. GENERAL

No major change has taken place during the period of review in the level of standards of the Agency's health services. The total annual cost of preventive and curative services, including services and benefits provided under the environmental sanitation programme and also under that of supplementary feeding and milk distribution, has been held to \$5.5 million, the same total as for 1961-1962. This means that the improvements mentioned below were largely made possible by economies resulting from better organization and administration.

Although a substantial proportion of this sum of \$5.5 million was spent on the curative programme, an increasing emphasis was given to preventive services, particularly in respect of the four main priorities established for 1963, namely (a) a more comprehensive health programme for children under six, (b) health education in schools, (c) in-service training of personnel and (d) environmental sanitation in camps. The World Health Organization continued to support UNRWA in the technical direction of its health services through the secondment of certain senior staff, including the Agency's Director of Health. The UNRWA/WHO Agreement was extended by the 16th World Health Assembly until the end of the Agency's present mandate.

The Agency's health programme continues to be carried on in harmony with those of the host Governments, by means of regular meetings between Agency Field Health Officers and officials of the national Health Ministries, to exchange information and ensure coordination. Within UNRWA, the orderly planning and execution of the health programme was improved by regular meetings held at the Health Department Headquarters and by an intensive schedule of field visits. A number of technical instructions on the treatment of current diseases and on serological tests were published or under preparation. Medical services in all four host countries were the subject of a comprehensive audit and corrective action is being taken wherever indicated.

Generous assistance continued to be received from the host Governments and from universities, voluntary societies, private firms and individuals. This has taken the form of the provision of personnel, free hospital and laboratory facilities, services in maternal and child health centres, medical supplies, vaccines, layettes, and supplementary food items, and of help in mass immunization campaigns and nutrition surveys. Monetary contributions have been received for the rehabilitation through physical training of crippled children, and two voluntary societies have continued to maintain a programme, now of some years' duration, under which a series of orthopaedic surgeons visit the area according to a carefully planned schedule. Funds have also been received for scholarships for refugee students, particularly in basic nursing education, while other donations have been used to improve clinic premises and to purchase equipment.

## II. CURATIVE AND PREVENTIVE MEDICAL SERVICES

### (a) Clinics, Hospitals and Laboratories

In the past year the Agency operated or subsidized 103 static and 11 mobile clinics. The static clinics provide both curative and preventive services, including doctors' consultations, dressings, injections, eye treatments, dispensing of medicines, maternal and child health care, dental attention and health education. An administrative reorganization at certain locations in Lebanon, Jordan and the Syrian Arab Republic has permitted the more economical and efficient use of medical personnel leading to an improved service. A polyclinic has been established in Amman, Jordan, where treatment is available for all adult refugees living in that town and in the surrounding camps. In general, clinic maintenance and replacement have been continued within budgetary limitations and established standards of medical services maintained. As may be seen from table I of the annex, a normal average of 5.8 visits per refugee were paid to the clinics during the year.

The Agency's hospital policy continued to be one of using local facilities, where available, by subsidizing beds in institutions operated by Government or local authorities, universities, voluntary societies or private individuals. At present the only hospitals operated directly by UNRWA are two tuberculosis sanatoria (one in conjunction with the Government authorities), one cottage hospital and one small camp hospital. The number of hospital beds maintained by, or reserved for, the Agency was reduced from 2,035 in 1962 to 2,001 in 1963, the decrease being due mainly to the closure of one small camp hospital and to a reduction in the number of beds subsidized in a private sanatorium. Two new wards added by the Agency

to the Bureij Tuberculosis Hospital in Gaza have relieved the previous overcrowding in the other wards of the hospital without increasing its total bed capacity. Considerable attention was paid to plans for the transformation of the present Augusta Victoria Hospital in Jerusalem into a reference hospital with corresponding adjustment in the number of beds subsidized in other hospitals. This proposal, the preparation of which has reached an advanced stage, should result in substantial savings without affecting standards of medical care. In general, satisfactory services have been maintained in the hospitals and an adequate number of beds have been available.

Laboratory services covering diagnostic, clinical and public health needs were provided by Government, university or private laboratories, in certain instances free of charge but mostly on a flat payment or service cost basis. The Agency continues to operate one central laboratory in the Gaza Strip and two small clinical laboratories in Lebanon.

The bulk of medical supplies continue to be purchased by the Agency through UNICEF on a world-wide basis, though increasing use is being made of local facilities wherever the prices obtained are favourable and the time of delivery shortened. New accounting procedures have been introduced in Agency clinics and hospitals which permit a stricter control of the use of medical supplies. The UNRWA Medical Formulary has been reviewed and amended, and a new edition has been published

#### (b) Control of Communicable Diseases

The number of cases of communicable diseases recorded among the refugee population during the period of review is shown in table 4 of the annex, from which it will be seen that communicable eye diseases and dysentery constitute the bulk of infections, followed by the infectious diseases of childhood, such as measles, chickenpox, mumps and whooping cough. The advent of potent chemo-therapeutic agents has much facilitated the treatment of communicable eye diseases. In the Syrian Arab Republic, two successful seasonal campaigns have been carried out among schoolchildren by the teachers, under the supervision and guidance of the school medical officer. A pilot scheme has been completed in the Gaza Strip with encouraging results and a similar scheme is planned in Jordan. There has been a slight increase in the reported cases of poliomyelitis and a moderate increase in the incidence of infective hepatitis. The number of cases of enteric group fevers reported show a sharp decline as does also the number of cases of tuberculosis. A small outbreak of cutaneous leishmaniasis has occurred in Ein El Tal near Aleppo in the Syrian Arab Republic. There has been little change in the

reported incidence of syphilis and that of gonorrhoea is low. Very few cases of diphtheria and cerebrospinal meningitis have occurred, while no case of the six "Convention" diseases (smallpox, plague, cholera, yellow fever, epidemic typhus and louse-borne relapsing fever) has been reported. In the Gaza Strip there has been a considerable decrease in the number of malaria cases reported as compared with the previous year and in all cases the source of infection was believed to be exogenous. In Lebanon two limited outbreaks involving a few refugees occurred amongst the local population, one in the late autumn and the second in the following spring but in a different place. A similar outbreak involving one refugee occurred in the Syrian Arab Republic, while in Jordan 4 cases were diagnosed. The situation in all these areas continues to be kept under observation by those **responsible**.

The Agency has continued its programme of active immunization against diphtheria, whooping cough, tetanus and the enteric group fevers. Smallpox mass vaccination campaigns have also been conducted, generally in cooperation with the Health Ministries of the host countries. An immunization campaign against poliomyelitis, using oral vaccine, has been carried out by the Government authorities in the Gaza Strip for children under six. In Jordan and the Syrian Arab Republic Salk vaccine has been provided by the Health Ministries for a limited number of children.

#### (c) Tuberculosis Control

Hospital facilities and out patient services continued to be maintained or subsidized by the Agency. In Jordan, the Syrian Arab Republic and the Gaza Strip, such services are closely integrated with those of the Governments concerned. The present trend in favour of domiciliary as opposed to institutional treatment has been reflected in the decreasing need for hospital beds, which has permitted the Agency to reduce substantially the number of beds maintained or subsidized in Lebanon, Jordan and the Syrian Arab Republic. At the invitation of the UNRWA Director of Health, the WHO Regional Advisor on Tuberculosis visited the Gaza Strip to advise on the present tuberculosis control programme operating in that area. Her findings and recommendations are at present under study by the Agency and by the Government health authorities.

Adequate medical supplies have been provided and in addition all out patients under treatment are given double basic rations on the recommendation of the supervising tuberculosis specialist.

(d) Maternal and Child Health

Maternal and child health services continued to be provided substantially at the same rate and standard as during the previous year. The 83 centres spread throughout the four host countries serve each of the Agency's organized camps and other localities where large numbers of refugees are found.

Supervision and guidance are given to mothers before and after delivery, layettes are issued and supplementary rations authorized. Infants under two years of age are kept under monthly supervision and given prophylactic immunizations against smallpox, diphtheria, whooping cough, tetanus and the enteric group fevers.

Since gastro-enteritis is common among infants and young children during the warm weather, a special menu with appropriate medication for the maintenance or restoration of electrolyte balance and of body fluids is provided for all cases referred by the treating medical officer. In addition, a number of daytime rehydration centres have been established in Jordan, the Syrian Arab Republic and the Gaza Strip for the treatment of infants and young children suffering from gastro-enteritis with an associated mild or moderate dehydration, or nutritional disturbance.

The school health programme includes the examination of school entrants and the follow-up of special cases, immunization campaigns in schools, surveys of diseases especially prevalent among schoolchildren (ringworm infections, acute eye infections, ankylostomiasis) and of nutritional status; and the sanitary inspection of school premises. The Agency maintains two school teams in Jordan and one in each of the three other host countries.

(e) Nursing Services

In addition to the nursing staff employed in clinics and hospitals subsidized by UNRWA, 153 nurses and 317 nursing auxiliaries were employed by the Agency in its preventive and curative services. Their contribution to the health programme continued to be of paramount importance, particularly in the fields of maternal and child health, school health, home visiting, tuberculosis and overall disease control, health education, mass immunization campaigns and the care of the sick in clinics and hospitals.

(f) Health Education

Health education of the refugees has continued on the general lines established during previous years. A special summer programme is concerned with environmental sanitation, domestic and personal hygiene and the prevention of common summer diseases, such as gastro-enteritis and infective eye conditions; while a winter programme covers specific aspects of nutrition and the Agency's related programme of supplementary feeding, special diets, school milk and the distribution of milk to vulnerable groups. Use is made of health committees, particularly in schools, and of lectures, discussions, demonstrations, exhibitions, competitions, health films, flannel-graphs, film strips, pamphlets, posters and a health calendar. Steps have been taken to integrate health education into the training curriculum in the Agency's teacher training centres.

III. NUTRITION AND MILK AND  
SUPPLEMENTARY FEEDING PROGRAMME

Since the basic rations given to the refugees are dietetically inadequate, vulnerable groups such as infants, young children, and expectant and nursing mothers have been nutritionally protected, as in the past, through the milk and supplementary feeding programme. The Agency provides a daily issue of whole milk/skim milk mixture for babies aged 6-12 months, and for non-breast fed infants under 6 months. An issue of skim milk is made on 6 days a week to children aged 1-15 years and to mothers from the fifth month of pregnancy to the end of the twelfth month after delivery. Through the school milk programme, a daily issue of skim milk is made to all schoolchildren up to the age of 12 years. A programme of "open feeding" has been introduced, under which nutritionally balanced hot meals are made available, within a total ceiling of 50,000 beneficiaries, to all children under 6 years of age living near supplementary feeding centres and, on medical selection, to schoolchildren. Previously the hot meals, which are provided on 6 days a week, had been given to children under 6 only on medical recommendation. Special diets are provided for severely under-nourished children and for those suffering from diarrhoea. Vitamin A and D capsules are issued to those attending supplementary feeding centres and to elementary schoolchildren. On medical certification, extra dry rations are issued to expectant and nursing mothers and to tuberculous out-patients.

In order that infants and pre-school children living in large camps may have easier access to the feeding centres, the programme has been organized to include four additional milk and supplementary feeding sub-centres in the Gaza Strip and three in Jordan. To prevent as far as possible sales of liquid milk by the refugees, the issue of milk through milk centres is now made only on presentation of the family ration



card and the corresponding skim milk card; this has resulted in a considerable decrease in issues, especially in the Gaza Strip and in Jordan. Attendances under the school milk programme, where children drink milk on the spot, have considerably increased in all four host countries.

Over the past two years, three full-scale nutrition surveys were carried out in conjunction with the United States Interdepartmental Committee on Nutrition for National Defence and in cooperation with the government authorities in Lebanon, Jordan and the Gaza Strip. These surveys covered both the refugee and non-refugee population in these countries. The findings of the first survey are already published and those of the second and third may be expected before the end of 1963. In general, it can be stated that the nutritional status of the refugee population has been found to approximate to the standard of nutrition of the local population.

#### IV. ENVIRONMENTAL SANITATION

The environmental sanitation programme, primarily concerned with the provision of safe and adequate water supplies, sanitary waste disposal, drainage and vector control was maintained at the established level. Its services were adjusted to include approximately 470,282 officially accommodated refugees, about 26,319 "squatters" on the outskirts of the camps, and refugees living in towns and villages of the Gaza Strip. In camps in Jordan, water shortages resulting from successive years of low rainfall continue to be critical but have been relieved largely by the development of new water sources by the Jordan Central Water Authority and by a co-operative effort on the part of UNRWA and the Government and Municipal Authorities in supplying water for the camps. In the Syrian Arab Republic, a water supply and road works scheme was installed in Yarmouk village and a water supply scheme was made operative in Nairab Camp. Community participation on the part of the refugees has increased, especially in relation to the construction of basic sewage-removal systems, the execution of certain improvements to water supply systems and the promotion of the construction of family latrines.

#### V. MEDICAL EDUCATION AND TRAINING OF REFUGEES

The number of students undergoing professional training in the medical sciences at university level during the year was 185. Five fellowships tenable at the American University of Beirut were awarded to Agency staff members, three in sanitation and two (financed by outside contributions) in public health nursing. Study leave without pay was granted to one medical officer to enable him to attend a post-graduate course in Public Health at Harvard University. Financial assistance was granted by UNRWA to the

school of nursing in Damascus run by the Palestine Arab Refugee Institute and to the nursing school attached to the Augusta Victoria Hospital, Jerusalem, where 35 and 14 refugee students respectively are receiving basic nursing education. Scholarships were awarded or other assistance provided to 3 students of basic nursing education attached to other schools. Seventeen students completed a six-month course in medical dispensing given by the Agency in Gaza.

A two-year course in pre-nursing training has been established at UNRWA's vocational training centre for girls at Ramallah in Jordan. Sixteen students have been enrolled in this course.

A programme of in-service training of staff has also been maintained. A significant number of the Agency's senior medical officers were enabled to attend the thirteenth Middle East Medical Assembly, the third Middle East and Mediterranean Pediatric Congress, and the first Social Pediatric Seminar in Beirut. Moderate funds have been made available for the in-service training of medical officers, nurses and health education workers. In-service training courses have been given to nurses in Syria, to midwives in Gaza and to male practical nurses in ophthalmic nursing in Jordan. The quarterly Health Department Bulletin continued to be circulated to the health staff of the Agency.

\* \* \* \* \*

## HEALTH STATISTICS

Table 1

NUMBER OF VISITS TO UNRWA AND SUBSIDIZED CLINICS 1 JULY 1962-30 JUNE 1963

	Lebanon	Syrian Arab Republic	Jordan	Gaza	Total
Population served by medical services	<u>127,122</u>	<u>114,595</u>	<u>606,673</u>	<u>263,213</u>	<u>1,111,603</u>
General Medical Cases	343,556	344,273	672,197	470,315	1,830,341
Injections	268,745	266,484	530,994	316,757	1,382,980
Dressings and Skin	251,986	154,187	696,206	485,725	1,588,104
Eye Cases	181,402	80,960	741,226	598,458	1,602,046
Dental	<u>30,598</u>	<u>11,379</u>	<u>27,096</u>	<u>16,121</u>	<u>85,194</u>
TOTAL	1,076,287	857,283	2,667,719	1,887,376	6,488,665

Table 2

HOSPITAL FACILITIES AVAILABLE TO PALESTINE REFUGEES, 1962 - 1963

Hospital beds available for refugees in each country during the year were as follows :-

	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Jordan</u>	<u>Gaza</u>	<u>Total</u>
Population served by medical services (1)	<u>127,122</u>	<u>114,595</u>	<u>606,673</u>	<u>263,213</u>	<u>1,111,603</u>
<u>No. of beds available</u>					
General	143	77	599	319	1,138
Tuberculosis (2)	74	22 a	117 b	150	363
Maternity	6	7	56	74	143
Pediatrics	17	10	166	53	246
Mental	59	2	50	0	111
Total	<u>299</u>	<u>118</u>	<u>988</u>	<u>596</u>	<u>2,001</u>
Beds per 1000 population	2.35	1.02	1.62	2.26	1.80

- 1) Figures based on the Registration Statistical Bulletin for second quarter of 1963.
- 2) (a) 2 Tuberculous beds were occupied by refugees from Syrian Arab Republic in Bhanne~~s~~ (Lebanon) Sanatorium.
- (b) 7 Tuberculous beds were occupied by refugees from Jordan in Bhanne~~s~~ (Lebanon) Sanatorium.

No. of Hospitals

Government and Local Authorities	26
Voluntary and Private Societies	42
Agency	4
	<u>72</u>

In addition there are 3 maternity centres in Jordan and 7 in Gaza.

The number of patient days utilized during this and the previous reporting period was as follows :-

	<u>Present Period</u>			<u>Previous Period</u>		
	<u>No. of bed days available</u>	<u>No. of patient days used</u>	<u>% used of total bed days available</u>	<u>No. of bed days available</u>	<u>No. of patient days used</u>	<u>% used of total bed days available</u>
Lebanon	111,739	114,809	103	126,748	117,484	93
Syrian Arab Republic	47,544	34,348	72	47,895	34,945	73
Jordan	364,122	291,334	80	364,649	289,749	79
Gaza	211,118	173,068	82	196,729	168,096	85
	<u>734,523</u>	<u>613,559</u>	<u>84</u>	<u>736,021</u>	<u>610,274</u>	<u>83</u>

Hospitals

Table 2 (Continued)

Of the patient days used, the number of bed days used per 1,000 refugees were as follows :-

<u>Country</u>	<u>Patient Days</u>	<u>Population</u>	<u>Patient Days per 1,000</u>
Lebanon	114,809	127,122	903
Syria	34,348	114,595	300
Jordan	291,334	606,673	480
Gaza	173,068	263,213	658
	<u>613,559</u>	<u>1,111,603</u>	<u>552</u>

Table 3

## LABORATORY SERVICES

During the year 1 July 1962 - 30 June 1963, 72,360 tests were carried out. The most significant of these were as follows.

<u>Services</u>	<u>No. examined</u>	<u>No. positive</u>
Blood		
Films for malaria and relapsing fever	2,140	
Malaria		53
Relapsing fever		0
Widal	1,377	318
Weil Felix	634	0
STS	28,333	517
Stools		
Ova and Parasites	36,554	
Ascaris		7,714
Taenia		1,128
Ankylostoma		563
Trichiuris Trichiura		2,333
Amoebae Hist. (Cysts. or Troph)		2,522
Smears and Cultures		
Coryn. Diphtheria	208	2
Neisser. Gonorrhea	56	21
Mycobact. Tuberculosis	3,058	542

Table 4

INFECTIOUS DISEASES RECORDED AMONG PALESTINE REFUGEE POPULATION  
1 JULY 1962-30 JUNE 1963

	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Jordan</u>	<u>Gaza</u>	<u>Total</u>
Population	<u>127,122</u>	<u>114,595</u>	<u>606,673</u>	<u>263,213</u>	<u>1,111,603</u>
Plague	0	0	0	0	0
Cholera	0	0	0	0	0
Yellow fever	0	0	0	0	0
Smallpox	0	0	0	0	0
Typhus (louse borne)	0	0	0	0	0
Relapsing fever (louse borne)	0	0	0	0	0
Relapsing fever (endemic)	0	0	5	0	5
Diphtheria	1	2	5	0	8
Measles	615	1,303	4,151	3,460	9,529
Whooping cough	1,228	83	294	637	2,242
Chickenpox	1,386	789	3,589	1,318	7,082
Mumps	1,113	883	1,910	2,401	6,307
Meningitis (cerebro-spinal)	4	3	7	3	17
Poliomyelitis	16	7	49	4	76
Enteric group fevers	7	205	56	49	317
Malaria	12	1	4	39	56
Bilharziasis	0	0	1	85	86
Ankylostomiasis	38	0	5	217	260
Tuberculosis	90	65	77	189	421
Syphilis	64	8	21	126	219
Gonorrhoea	1	0	3	12	16
Scarlet fever	0	0	0	0	0
Rabies	0	1	0	0	1
Tetanus	1	0	4	1	6
Tetanus neonatorum	1	0	3	31	35
Brucellosis	0	0	0	0	0
Infective hepatitis	70	87	171	277	605
Leishmaniasis cutaneous	0	91	0	0	91
The following statistics show the number of clinic attendances in respect of the diseases indicated:					
Dysentery	13,325	3,606	4,460	13,995	35,386
Trachoma	577	125	17,075	15,705	33,482
Conjunctivitis	13,088	11,361	56,302	30,278	111,029

Table 5

## MATERNAL AND CHILD HEALTH

Ante-natal services	Lebanon	Syrian Arab Republic	Jordan	Gaza	Total
No. of ante-natal clinics	<u>20</u>	<u>25</u>	<u>29</u>	<u>9</u>	<u>83</u>
No. of pregnant women newly registered	5,514	2,865	12,064	14,731	35,174
Average monthly attendance	1,604	940	3,805	4,386	10,735
No. of STS performed	1,937	1,482	5,401	13,263	22,083
No. of cases positive serology	67	18	22	145	252
No. of home visits (ante-natal care)	<u>1,845</u>	<u>1,308</u>	<u>1,754</u>	<u>277</u>	<u>5,184</u>
<u>Infant Health Care</u>					
No. of infant health centres	<u>20</u>	<u>25</u>	<u>27</u>	<u>9</u>	<u>81</u>
No. registered 0-1 year monthly average	4,270	3,040	8,281	11,452	27,043
No. attended 0-1 year, monthly average	3,879	2,559	7,208	9,968	23,614
No. registered 1-2 years, monthly average	3,773	2,979	6,863	8,216	21,831
No. attended 1-2 years, monthly average	1,474	1,119	4,198	3,666	10,457
No. of smallpox vaccinations <sup>a</sup>	5,106	2,564	6,009	13,505	27,184
No. of TAB immunizations completed <sup>a</sup>	2,544	1,570	4,284	5,061	13,459
No. of triple vaccine immunizations completed <sup>a</sup>	3,538	2,916	7,489	6,602	20,545
No. of home visits (infant care)	<u>12,270</u>	<u>10,024</u>	<u>23,941</u>	<u>2,510</u>	<u>48,745</u>
<u>School Health Service</u>					
No. of school teams	<u>1</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>5</u>
No. of children examined	3,522	10,040	20,983	6,579	41,124
No. of schools inspected	172	128	171	156	627
No. of TAB boosters given <sup>a</sup>	22,010	46	5,459	55,618	83,133
No. of diphtheria boosters given <sup>a</sup>	3,323	584	14,016	6,629	24,552

<sup>a</sup> In addition to vaccinations carried out in IHCs and in schools there are periodic vaccination campaigns referred to in the text of the report



Table 6

## UNRWA SUPPLEMENTARY FEEDING PROGRAMME

Average number of beneficiaries 1 July 1962-30 June 1963

Country	Daily cooked meal beneficiaries				Monthly dry ration beneficiaries				
	Average for the year				Average for the year				
	No. of feeding centres	0-2 yrs	2-15 yrs and special cases	Total	Pregnant women	Nursing mothers	TB out patients	Total	Grand Total
Lebanon	22	549	3,989	4,538	1,366	3,283	82	4,731	9,269
Syrian Arab Republic	18	495	4,206	4,701	841	2,166	177	3,184	7,885
Jordan	48 23 <sup>a</sup>	1,761 196	16,360) 1,259)	19,576	3,359	11,872	569	15,800	35,376
Gaza	<u>16</u>	<u>1,293</u>	<u>10,875</u>	<u>12,168</u>	<u>4,555</u>	<u>9,767</u>	<u>421</u>	<u>14,743</u>	<u>26,911</u>
	127	4,294	36,689	40,983	10,121	27,088	11,249	38,458	79,441

<sup>a</sup> Centres operated by voluntary societies.

Table 7

## UNRWA MILK PROGRAMME

Average number of beneficiaries 1 July 1962-30 June 1963

Country	Number of milk centres		Daily number of beneficiaries Average for the year			Total
	Preparation and distribution	Distribution only	Milk distribution centres	Schools	Orphanages, medical pre- scriptions etc	
Lebanon	23	7	29,893	7,121	193	37,207
Syrian Arab Republic	22	0	26,923	10,980	44	37,947
Jordan	84 29 <sup>a</sup>	6	48,948) 1,695)	24,952	29	75,624
Gaza	<u>16</u>	<u>0</u>	<u>18,124</u>	<u>29,440</u>	<u>0</u>	<u>47,564</u>
	174	13	125,583	72,493 <sup>b</sup>	266	198,342

<sup>a</sup> Centres operated by voluntary societies.<sup>b</sup> Average for the scholastic year.

Table 8

Training Programme

The following is a summary of the training of medical and para-medical personnel in the universities and nursing training schools per country of residence

	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Jordan</u>	<u>Gaza</u>	<u>Total</u>
Medicine	12	22	80	42	156
Dentistry	1	0	7	0	8
Pharmacy	0	4	5	9	18
Sanitation	1	1	0	1	3
	<u>14</u>	<u>27</u>	<u>92</u>	<u>52</u>	<u>185</u>
<u>General Nursing</u>					
A.V.H. School	0	0	14	0	14
PARI School	0	35	0	0	35
A.U.B. School	5	0	0	0	5
	<u>5</u>	<u>35</u>	<u>14</u>	<u>0</u>	<u>54</u>
	<u>19</u>	<u>62</u>	<u>106</u>	<u>52</u>	<u>239</u>