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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 Sixteenth 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 1965 to 30 June 1966.

UNITED NATIONS RELIEF AND WORKS AGENCY

FOR PALESTINE REFUGEES

REPORT OF THE HEALTH DEPARTMENT

1 July 1965 - 30 June 1966

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August, 1966.

UNITED NATIONS RELIEF AND WORKS AGENCY

FOR PALESTINE REFUGEES

REPORT OF THE HEALTH DEPARTMENT

1 July 1965 - 30 June 1966

I. HEALTH SERVICES

The Agency has continued to provide a comprehensive health programme comprising both preventive and curative services. Though designed within an extremely limited framework, these services have over the years effectively safe-guarded the health of the refugee community. They are designed to keep in line as closely as possible with services provided by the host Governments for economically comparable sections of the local population in their countries. Within the stringent budgetary restrictions imposed by UNRWA's limited financial resources, no substantial expansion of services was possible during the year under review. Such improvements as did take place were achieved either through economies made by streamlining certain of the medical care services, or through the receipt of specific donations. Thus it was possible to replace a number of old, unsatisfactory clinic buildings with entirely new structures and to establish an additional number of rehydration/nutrition centres for the day-time treatment of infants and young children suffering from gastro-enteritis and malnutrition. The UNRWA/Swedish Health Centre, established in the Gaza Strip as a result of a special governmental contribution, began to function in September 1965.

The Agency's health programme is carried out with the help of the World Health Organization which, by virtue of a mutual agreement, provides advisory and consultative health services as required in the planning of UNRWA's total health programme and supervises the technical aspect of the programme, which is directed by a WHO staff member provided on loan to UNRWA as Director of Health. Cordial relations have been maintained with the Ministries of Health of the host Governments and cooperation with these Ministries has been particularly fruitful in such fields as tuberculosis control and mass immunization campaigns. As in previous years, the host Governments, universities, charitable organizations, business firms and individuals have given assistance in such forms as the provision of personnel, free hospital, X-ray and laboratory facilities, services in maternal and child health centres, medical supplies, vaccines, layettes and supplementary food items, as well as help in mass vaccination campaigns. Funds have also been provided for the training of refugee students, particularly in basic nursing education.

## II. CURATIVE AND PREVENTIVE MEDICAL SERVICES

### (a) Clinics, Hospitals and Laboratories

Curative and preventive medical services continued to be provided at 122 places, either directly by UNRWA (at 105 places) or at centres operated by Governments or voluntary societies and subsidized by the Agency. The curative services comprise medical consultations, laboratory examinations, dressings, injections, eye treatments, the dispensing of medicine and dental services, as well as referrals, where indicated, to specialists and hospitals. The preventive health services include communicable disease control, prophylactic immunizations, pre-natal, natal and post-natal care, infant health care, school health and health education of the public. Tables 1, 2 and 3 give a statistical summary of clinic attendances according to the different services provided.

The total number of hospital beds available for refugees during the period of review was 1,837, of which the majority were in Agency-subsidized governmental, university or private institutions. The Agency, however, maintains directly two hospitals, both in Jordan (a tuberculosis hospital and a cottage hospital), nine camp maternity wards, for the most part located in the Gaza Strip, 15 rehydration/nutrition centres situated in all four host countries and a small paediatric ward which forms part of the UNRWA/Swedish Health Centre in the Gaza Strip. In addition, UNRWA and the Government health authorities jointly operate a tuberculosis hospital in Gaza. Rising costs of hospital services have been reflected in the increased subsidies which the Agency has been obliged to pay during the period of this report. Statistical details in respect of the number of beds available are shown in table 2.

The Agency maintains a central laboratory in the Gaza Strip and two small clinical laboratories in Lebanon. All other laboratory services, whether of a clinical or public health nature, are obtained from Governments, university or private laboratories, usually on a subsidy or cost for service basis, but in certain instances free of charge.

### (b) Control of Communicable diseases

No case of any of the six quarantinable diseases (cholera, plague, louse-borne relapsing fever, smallpox, typhus and yellow fever) was notified among the refugee population during the period of report. Cases of relapsing fever considered to be of the tick-borne variety have, however, been reported, six in Jordan and one in Gaza. In close co-operation with the Health Ministries of the host countries, plans were drawn up and certain precautions taken in anticipation of a possible outbreak of cholera, which had appeared

in a number of the neighbouring States; fortunately the necessity to carry out these plans did not arise. Programmes of prophylactic immunizations continued to be maintained against smallpox, diphtheria, whooping cough, tetanus, the enteric group fevers and poliomyelitis. A donation of measles vaccine has been received from WHO and a vaccination campaign has begun in Jordan and Lebanon and will be extended to the other fields later. A mass tuberculosis survey, towards the cost of which the Agency is making a substantial contribution, was in the process of being carried out in the Gaza Strip by the health authorities of the United Arab Republic, while in the remaining three host countries, there was close co-ordination of Agency and governmental tuberculosis control services. The incidence decreased of dysentery, malaria, infective hepatitis, poliomyelitis, measles, whooping cough, ankylomyeliasis, venereal disease and communicable eye diseases. That of pulmonary tuberculosis showed a moderate increase revealed mainly by the special survey being conducted in the Gaza field. Other diseases with increased incidence include enteric group fevers, cerebro-spinal meningitis, mumps and chickenpox. A localized outbreak of cutaneous leishmaniasis in certain parts of the SAR was effectively controlled and the number of new cases reported was very low.

Throughout the Gaza Strip, malaria control measures continued to be carried out jointly by UNRWA and the government health authorities. In the three other fields responsibility for similar measures is entirely that of the host government, the Agency co-operating and providing such assistance as may be required within the refugee camp area.

(c) Maternal and Child Health

UNRWA continued to devote special attention to the health care of expectant and nursing mothers, infants, pre-school children and school children. Supervision, advice and guidance were given at the 80 pre-natal and 78 infant health clinics, which were also used for the distribution of layettes, the authorisation of supplementary rations and the carrying out of prophylactic immunizations suitable for infants and young children. Fifteen day-time rehydration/nutrition centres were in operation for the treatment of mild and moderate cases of gastro-enteritis and nutritional disturbances. Close observation was maintained of the incidence of underweight among children attending the infant health clinics, where mothers were given advice and were encouraged to ensure that their children benefited from the Agency's daily hot meal programme. UNRWA's aim is that babies under the age of one year should be brought to the infant health clinics once every month; and that children under two years, and those under three years who require special attention, should attend the clinics every other month.

The school health programme, which comprises entrance and routine medical examinations, inspection of school premises and

routine immunizations, continued to be carried out by special school health teams. In the case of schools in camps, these services were provided by the medical staff of the camps health centres.

(d) Nursing Services

At the end of the period of report, UNRWA was employing 158 graduate nurses and midwives 303 auxiliary nurses and 119 traditional midwives ("dayahs"). The clinics and hospitals subsidized by the Agency also employ a substantial nursing staff. UNRWA's nursing staff participate in a wide range of health activities, and play a particularly valuable part in maternal and child health care, home visiting, communicable diseases control, mass immunization campaigns and health education.

(e) Health Education

The programme of health education is directed to all sectors of the refugee population, but particularly to large assembled groups through maternal and child health clinics, schools and youth activity centres. Health education is also provided for whole communities through the monthly health promotion drives carried out in camps, as well as through the weekly health promotion days, on which the camp medical officer and his staff visit various sectors of the community to stimulate interest in health matters, encourage community self-help and generally promote health education. Wide-spread use is made of visual media, such as posters, pamphlets, health calendars, flannelgraphs and health films. During the year under review the subject of health education of the public was introduced into the curricula of UNRWA's teacher training centres. It is hoped that this will do much to promote health education in the area by stimulating interest in the subject among the future teachers in Agency and other schools.

### III. NUTRITION AND SUPPLEMENTARY FEEDING

The monthly basic rations contain no items of fresh food nor any animal protein. UNRWA's programme of supplementary feeding and milk distribution is accordingly designed to protect the health of certain beneficiaries among the more vulnerable groups of refugees, notably infants and children in the pre-school age group, schoolchildren, pregnant women, nursing mothers and tuberculous patients under domiciliary treatment.

A daily issue of a mixture of whole and skimmed milk is available for babies from the age of six to twelve months and for those under six months who cannot be breast fed (a total of 5,932 beneficiaries). A portion of skimmed milk is made available on 26 days a month to children aged from one to fifteen years (87,423 beneficiaries) and to expectant and nursing mothers (8,243 beneficiaries). Skimmed milk is also issued on 22 days a month during the school year to children attending UNRWA/UNESCO schools (89,945 beneficiaries). During the year under review, the school milk programme was suspended for some months, and the issue of skimmed milk to other beneficiaries temporarily reduced by 50 per cent, because of uncertainty concerning the receipt of adequate supplies. The future maintenance of the milk programme in general is dependent on the continued availability of donated milk supplies.

Throughout the year under review, the Agency provided, through supplementary feeding centres in its camps and in other places where large numbers of refugees reside, a nutritionally balanced hot meal on six days a week. This service is available for a maximum of 45,000 beneficiaries, drawn largely from children below the age of six, although some older children are also admitted on medical certification. In order to facilitate attendance, seven sub-centres have been opened in larger camps, in addition to the main feeding centres. Over and above the varied standard menus, a special bland high-protein menu is provided for the treatment of infants and young children suffering from gastro-enteritis and malnutrition. Vitamin A and D capsules are issued to children attending supplementary feeding centres and to elementary school children. On medical certification, extra dry rations are issued to expectant and nursing mothers and to tuberculous out-patients.

The Agency's serious financial situation led it to apply to the World Food Programme in April 1966 for assistance to maintain the supplementary feeding programme. The Intergovernmental Committee of the World Food Programme, however, decided that it could not meet this request.

#### IV. ENVIRONMENTAL SANITATION

This programme continued to be chiefly concerned with the provision of safe water supplies, sanitary waste disposal, and the control of disease vectors in the Agency's 54 camps. During the year under review, water supplies were improved in several instances by connecting the camp water distribution systems with public or private water company mains, which also permitted the establishment of private domiciliary connections at the refugees' expense. In other cases, the Agency has constructed water systems to meet the needs of individual camps. These improved water supplies have, however, created a problem of waste water disposal in a few camps situated within or near municipal boundaries. No solution has yet been found to the refuse disposal problems which also occur in these camps. A number of sewage schemes are under implementation by local authorities, with financial assistance from UNRWA. The construction of family latrines continued to be encouraged by the Agency and approximately one-third of all refugee families living in camps now have private latrines. In the sphere of disease vector control, close co-operation was maintained with the Government health authorities both in national malaria eradication programmes and in more localized projects, such as a programme for the control of cutaneous leishmaniasis in certain areas in the Syrian Arab Republic. Fly control continued to be based principally on the prevention of fly breeding through the use of biological methods.

#### V. MEDICAL EDUCATION AND TRAINING

As will be seen from table 8(a), 248 refugee students held scholarships in the field of health awarded under the Agency's university scholarships programme during the academic year 1965-1966. Of these, 206 were studying medicine, 36 pharmaceutical chemistry, five dentistry and one veterinary medicine. One hundred and five students were receiving training in nursing and midwifery, including 63 in basic nursing, 36 in mental nursing, five in midwifery and one in tuberculosis nursing for practical nurses. Thirty-one students were being trained as health inspectors, 38 as assistant pharmacists and 25 as laboratory technicians. One post-graduate scholarship in paediatrics was granted to a refugee doctor and an Agency medical officer received a fellowship to enable him to take a diploma course in public health. Two Agency nurses completed a course in public health nursing. An active programme of in-service training of staff, including doctors, nurses and environmental sanitation personnel, continued to be carried out.



Table 1

## HEALTH SERVICES

NUMBER OF VISITS TO UNRWA AND SUBSIDIZED CLINICS 1 JULY 1965-30 JUNE 1966

	Jordan	Gaza	Lebanon	Syrian Arab Republic	Total
Population Served by Medical Services	<u>656,394</u>	<u>288,764</u>	<u>138,031</u>	<u>125,810</u>	<u>1,208,999</u>
General Medical Cases	653,350	390,694	414,011	362,764	1,820,819
Injections	531,305	363,031	218,192	216,581	1,329,109
Dressing and Skin Treatments	544,685	426,802	239,920	154,328	1,365,735
Eye Cases	548,741	429,302	156,286	59,011	1,193,340
Dental	28,400	19,140	21,106	10,483	79,129
<b><u>TOTAL:</u></b>	<b>2,306,481</b>	<b>1,628,969</b>	<b>1,049,515</b>	<b>803,167</b>	<b>5,788,132</b>

Table 2

HOSPITAL FACILITIES AVAILABLE TO PALESTINE REFUGEES, 1965-1966  
(Statistics refer to the actual situation as at 30th June 1966)

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
Population served by Medical Services (1)	656,394	288,764	138,031	125,810	1,208,999
<u>No. of Beds Available</u>					
General	483	320	166	82	1,051
Tuberculosis(2)	114	150	33	20	317
Maternity	44	68	5	7	124
Paediatrics	114	67	21	-	202
Mental	75	-	67	1	143
TOTAL	830	605	292	110	1,837
Beds per 1000 population	1.26	2.09	2.11	0.87	1.51

1) Figures based on the Registration Statistical Bulletin for second quarter of 1966.

2) (x) An average of 4 Tuberculosis beds in Bhannes (Lebanon) Sanatorium were occupied by refugees from Jordan.

No. of Hospitals

Government and Local Authorities	31
Voluntary and Private Societies	38
Agency	2
	<u>71</u>

In addition the Bureij Tuberculosis Hospital is operating jointly with Government Hospital Authority.

In addition there are maternity centres, 1 in Syria, 2 in Jordan and 6 in Gaza.

Rehydration/Nutrition Centres

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
No. of Centres	<u>5</u>	<u>4</u>	<u>3</u>	<u>3</u>	<u>15</u>
No. of Beds	<u>58</u>	<u>68</u>	<u>23</u>	<u>21</u>	<u>170</u>

Hospitals

Table 2 (Continued)

The number of bed days utilized by refugee patients during this and previous reporting period was as follows:-

	Present Period			Previous Period		
	No. of bed days available	No. of bed days used	% used of total bed days available	No. of bed days available	No. of bed days used	% used of total bed days available
Jordan	305,419	240,144	79	306,876	234,036	76
Gaza	220,089	186,596	85	217,905	182,562	84
Lebanon	102,814	102,814	100	109,146	109,112	100
Syrian Arab Republic	40,084	29,125	73	40,517	30,373	75
	668,406	558,679	84	674,444	556,083	82

The number of bed days used per 1,000 refugees were as follows:-

<u>Country</u>	<u>Bed Days</u>	<u>Population</u>	<u>Bed Days per 1,000</u>
Jordan	240,144	656,394	366
Gaza	186,596	288,764	646
Lebanon	102,814	138,031	745
Syrian Arab Republic	29,125	125,810	231
	558,679	1,208,999	462

Table 3

LABORATORY SERVICE

During the year 1 July 1965 - 30 June 1966, 47,914 tests were carried out. The most significant of these were as follows:-

Services	No. Examined	No. Positive
<b>Blood</b>		
Films for malaria and relapsing fever	1,779	
Malaria		23
Relapsing Fever		7
Widal	1,441	378
Weil Felix	713	0
STS	11,869	118
<b>Stools</b>		
Ova and Parasites	29,871	
Ascaris		5,934
Taenia (mostly Saginata)		633
Ankylostoma		100
Trichiuris Trichiura		2,257
Amoebae Hist. (Cysts or Troph)		2,213
<b>Smears and Cultures</b>		
Coryn. Diphtheria	171	3
Neisser. Gonorrhoea	43	14
Mycobact. Tuberculosis	2,027	343

Table 4

INFECTIOUS DISEASES RECORDED AMONG PALESTINE REFUGEE POPULATION  
1 JULY 1965 - 30 JUNE 1966

	Jordan	Gaza	Lebanon	Syrian Arab Republic	Total
Population	<u>656,394</u>	<u>288,764</u>	<u>138,031</u>	<u>125,810</u>	<u>1,208,999</u>
Cholera	0	0	0	0	0
Plague	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
Ankylostomiasis	0	65	9	0	74
Bilharziasis	0	26	0	0	26
Brucellosis	0	0	0	0	0
Chickenpox	4,067	1,459	1,410	1,045	7,981
Conjunctivitis	29,842	8,567	8,081	9,307	55,797
Diphtheria	0	0	1	4	5
Dysentery	2,497	1,980	4,193	1,156	9,826
Enteric Group Fevers	14	81	0	128	223
Gonorrhoea	0	7	3	1	11
Infectious Hepatitis	175	405	64	95	739
Leishmaniasis Cutaneous	0	0	0	8	8
Malaria	4	17	0	2	23
Measles	1,842	2,462	1,274	529	6,107
Meningitis (cerebrospinal)	0	10	7	4	21
Mumps	4,484	922	2,354	958	8,718
Pertussis	135	37	337	51	560
Poliomyelitis	5	16	10	9	40
Rabies	0	0	0	0	0
Relapsing Fever (endemic)	6	1	0	0	7
Scarlet Fever	0	0	0	1	1
Syphilis	1	29	48	7	85
Tetanus	4	0	1	2	7
Tetanus Neonatorum	0	21	1	0	22
Trachoma	2,528	700	436	720	4,384
Tuberculosis (pulmonary)	104	213	31	36	384
Typhus (endemic)	0	0	0	0	0

Table 4

## MATERNAL AND CHILD HEALTH

Ante-Natal Services	Jordan	Gaza	Lebanon	Syrian Arab Republic	Total
No. of Ante-natal clinics	<u>29</u>	<u>9</u>	<u>18</u>	<u>24</u>	<u>80</u>
No. of pregnant women newly registered	9,894	13,670	4,210	2,647	30,421
Average monthly attendance	3,121	3,868	1,363	762	9,114
No. of STS performed	3,366	2,490	1,500	686	7,929
No. of cases positive serology	1	17	46	4	68
No. of home visits (pre-natal care)	<u>627</u>	<u>98</u>	<u>982</u>	<u>1,054</u>	<u>2,761</u>
<u>Infant Health Care</u>					
No. of infant health centres	<u>27</u>	<u>9</u>	<u>17</u>	<u>24</u>	<u>77</u>
<u>Number registered 0-1 year</u>					
monthly average	8,964	13,429	4,485	2,590	29,468
No. attended 0-1 year, monthly average	6,193	7,349	2,974	1,224	17,740
<u>No. registered 1-2 years,</u>					
monthly average	8,901	9,926	4,261	3,069	26,157
No. attended 1-2 years, monthly average	3,314	2,212	1,391	897	7,814
No. of smallpox vaccinations	6,270	12,752	3,818	3,155	25,995
No. of TAB immunizations completed	8,046	7,805	3,203	1,965	21,019
No. of triple vaccine immunizations completed	9,965	8,047	4,386	3,026	25,424
No. of home visits (infant care)	<u>19,109</u>	<u>5,721</u>	<u>10,586</u>	<u>8,018</u>	<u>43,434</u>
<u>School Health Services</u>					
No. of school teams	<u>2</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>5</u>
No. of children examined	26,068	6,790	4,537	23,973	61,368
No. of school inspections	138	313	90	169	710
No. of TAB boosters given	46,621	54,639	4,858	2,476	108,594
No. of diphtheria boosters given	11,833	6,527	3,194	2,196	23,750

Table 6

UNRWA SUPPLEMENTARY FEEDING PROGRAMME

Average Number of Beneficiaries 1 July 1965 - 30 June 1966

Country	Daily Cooked Meal Beneficiaries				Monthly Dry Ration Beneficiaries				Grand Total
	Average for the Year				Average for the Year				
	No. of Feeding Centres	0-2 Yrs.	2-15 Yrs. & Special Cases	Total	Preg-nant Women	Nursing Mothers	TB Out Patients	Total	
Jordan	48	1,651	14,586	16,741	2,836	11,443	503	14,782	31,523
	* 6	154	350						
Gaza	23	1,405	12,631	14,036	3,451	9,667	484	13,602	27,638
Lebanon	18	481	3,975	4,456	1,092	3,360	110	4,562	9,018
Syrian Arab Republic)	17	396	3,751	4,147	659	1,671	110	2,440	6,587
	112	4,087	35,293	39,380	8,038	26,141	1,207	35,386	74,766

\* Centres operated by voluntary societies

Table 7

UNRWA MILK PROGRAMME

Average Number of Beneficiaries 1 July 1965 - 30 June 1966

Country	Number of Milk Centres		Daily Number of Beneficiaries Average for the Year			
	Preparation and Distribution	Distribution only	Milk Distribution Centres	Schools <sup>*</sup>	Orphanages, Medical prescrip- tions etc.	Total
Jordan	74	7	32,431	32,855	233	66,132
	<sup>x</sup> 10	-	613			
Gaza	23	-	18,991	35,536	132	54,659
Lebanon	20	3	25,689	8,155	277	34,121
Syrian Arab Republic )	20	3	23,176	13,400	55	36,631
	147	13	100,900	89,946	697	191,543

x Centres Operated by Voluntary Societies

\* Average for the Scholastic Year (Average of 3 months in Jordan, Gaza and Syria  
Average of 4 months in Lebanon. (See para.10))



Table 8(a)

EDUCATION AND TRAINING PROGRAMME

The following is a summary of the training of medical and para-medical personnel in universities, nursing training schools and vocational centres per country of residence during the academic year 1965/1966:

I. BASIC TRAININGA. Universities

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
Medicine	107	47	20	32	206
Dentistry	3	1	1	-	5
Pharmacy	19	10	2	5	36
Veterinary	1	-	-	-	1
Sub-Total	130	58	23	37	248

B. Vocational Training & Other Centres

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
i) Public Health Inspector (Siblin VTC)	-	-	31	-	31
ii) Laboratory Technician (Govt. Lab. Amman & VTC Damascus)	9	-	-	16	25
iii) Assistant Pharmacist (VTC Damascus)	-	-	-	38	38
Sub-Total	9	-	31	54	94

Table 8(a) (Cont'd.)

I. BASIC TRAINING (Cont'd.)

C. Schools of Nursing, Midwifery & Others

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
<u>1) General Nursing</u>					
AVH School, Jerusalem	23	-	-	-	23
PARI School, Damascus	-	-	-	8	8
AUB School, Beirut	1	-	3	-	4
Baptist Hospital, Gaza	-	12	15	-	27
Ankara	-	-	1	-	1
<u>ii) Midwifery</u>					
(At Government Midwifery School, Damascus)	-	-	-	5	5
<u>iii) Mental Nursing</u>					
(At Lebanon Hospital for Mental & Nervous Disorders)	-	-	36	-	36
<u>iv) Tuberculosis Nursing</u>					
(At Hamlin Sanator- ium, Lebanon)	-	-	1	-	1
Sub-Total	<u>24</u>	<u>12</u>	<u>56</u>	<u>13</u>	<u>105</u>

II. POST GRADUATE TRAINING

	<u>Jordan</u>	<u>Gaza</u>	<u>Lebanon</u>	<u>Syrian Arab Republic</u>	<u>Total</u>
Public Health	-	-	-	1	1
Paediatrics	1	-	-	-	1
Personnel Administration (Short Course)	-	-	1	-	1
Sub-Total	<u>1</u>	<u>-</u>	<u>1</u>	<u>1</u>	<u>3</u>
<u>Grand Total</u>	<u>164</u>	<u>70</u>	<u>111</u>	<u>105</u>	<u>450</u>