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UNITED NATIONS RELIEF AND WORKS AGENCY FOR PALESTINE REFUGEES

The Regional Director has the honour to present to the Ninth Session of the Regional Committee for the Eastern Mediterranean the report of Dr. J.S. McKenzie Pollock, Chief, Health Division and WHO Representative to the United Nations Relief and Works Agency for Palestine Refugees, for the period 1 July 1958 - 30 June 1959.

UNITED NATIONS RELIEF AND NORMS AGENCY FOR PALESTINE REFUGEES

REPORT OF THE HEALTH DIVISION 1 July 1958 - 30 June 1959

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UNRJA Headquarters Beirut, Lebanon. August, 1959 Dr. J. S. McKenzie Pollock Chief, Health Division & WHO Representative UNRWA

HEALTH SERVICES

1. ORG..MIZATION AND STAFF

- The organization of the Agency's health services has remained substantially unchanged during the period under review. The World Health Organization, by agreement with the Agency, continues to be responsible for the technical direction of these services and for providing certain of the senior staff including the Chief Medical Officer of the Agency. This satisfactory arrangement has now lasted a full decade.
- A well-balanced preventive and curative health programme has been maintained and due care has been taken to ensure that the changes or developments which have taken place are in accordance with the planned health programmes of the host countries, with whose Health Ministries a close liaison has been maintained in a cordial spirit of mutual cooperation and understanding.
- It is considered apposite here to point out that, in any future development in the health fields of the Near East countries, the existence of a large, trained, and experienced cadre of medical and para-medical personnel, such as the present Agency Health Division Staff, can be an important factor in assisting such expansion.
- 4. Emphasis continues to be laid on the preventive aspects of the Agency's health programme and on the value of health education as effective means of improving the state of health of the refugees, who are being made aware of what can be done and what they themselves can do towards achieving a positive state of health. Of paramount importance is the education of the mothers in all matters appertaining to the well-being of their families.

Table 1 below records the number of staff employed in the Agency's health services (including persons seconded by MMO) as at 30 June 1959. The table does not include the many workers employed in hospitals and clinics subsidized by the Agency for the provision of health services to the refugees.

Table 1

	IIQ	Lebanon	Syria	Jordan	Gaza	Total
Internation Staff						
Doctors Nurses Public Health Engineer Nutritionist Supply & Materials	4 1 1	1 1 0 0	1 1 0 0	1 0 0	1 0 0	3 5 1 1
Officer (medical) Area Staff	1	0	0	0 Sub-T	0 otal	$\frac{1}{16}$
Doctors, full-time Doctors, part-time Dentists, full-time Dentists, part-time	0 0 0	19 0 1 0	13 1(a) 1 4	42 5 0 1*	16 0 1 0	90 6 3 5
Nurses (nurse midwives & public health nurses) Auxiliary nurses (practical, aid, CBA) Midwives Sanitation and Laintenance	l	21	14	46	18	100
	0 0	32 7	33 2	196 1	65 3	326 13
Officers Food Supervisors Laboratory Technicians Pharmacist and Pharmaceutica	0 0 0	3 1 2	2 1 1	3 3 3	2 1 3	10 6 9
Technicians Health Educator Others: Medical Sanitation & Maint. Suppl.Feed/Milk	1 25 1 0	1 0 28 9 7	1 0 20 6 5	1 0 68 14 13 Sub-T	1 0 48 46 28	5 1 189 76 53 892
Labour category					0002	0,7~
Medical Sanitation & Maintenance Supplementary Feed/Milk	1 0 0	39 143 121	38 62 103	106 613 503 Sub-T		269 1,408 959 2,636
				Grand T	otal	3,544

^{*} There are in addition 7 private practitioners hired on a contractual basis.

⁽a) There are in addition 2 private specialists hired on a contractual basis.

2. CLINICS. HOSFITALS AND LABORATURIES

- 6. The number of clinics operated directly by the Agency are 91 of which 31 are static and 10 mobile, the latter covering 29 points of service. In addition are utilized the services of 7 subsidized Government static clinics and 5 static and 3 mobile voluntary societies' clinics (the latter covering 6 points of service) as well as the outpatient facilities of large hospitals in the host countries.
- 7. In general, satisfactory services were maintained throughout the year, though the public unrest in Lebanon over a period of several months resulted in some disruption of normal communications. Thanks to the devotion of the health division staff, sometimes at considerable personal risk, the basic health services were maintained with little or no interruption. In Jordan the fuel crisis during the Autumn months necessitated the restriction of ambulance services to the transport of emergency cases to hospital. In the Syrian Region of the United Arab Republic, the small clinic building at Darbashieh village was destroyed during a border skirmish.
- 3. The following table shows the number of visits paid by patients to Agency and subsidized clinics during the period under review:-

Table 2

Description	Lebanon	Syria	Jordan	Gaza	Total
Population served by medical services	118,674	102,776	560,826	236,430	1018,706
General medical cases Dressings and skin Eye cases Dental	163,606 176,108 144,648 176,461	124,148 114,240 99,445 117,486		268,989	1511,389 1287,188 975,555 1113,115
Total	660,823	455 , 319	2412,611	1363,494	4892,247

9. The hospital policy of the Agency is to use, as far as possible, the services of those hospitals which are already in existence and are operated by governments, local authorities, voluntary societies, or administered privately. Only where, for geographic or other reasons, these hospitals cannot meet the needs of the agency, does the latter establish its own institutions. A statistical summary is given hereunder of the numbers of hospitals used by the agency at the end of the period of review:

Table 3

No. of Hospital Available	Govt. & Local authorities	Vol. Socs. & Private	Agency	Total
Lebanon Syrian Region of U.A.R Jordan Gaza	. 11 3	19 5 16	1 1 3 1*	20 17 27
Total	23	41	6	70

^{*} Administered in cooperation with the Government. In addition to the above, the Agency operates 8 maternity centers in Gaza, 3 in Jordan, and 2 medical detention posts in the Syrian Region of the United Arab Republic.

10. The number of hospital beds maintained by or reserved for the Agency increased from 2102 in June 1958 to 2116 in 1959. In Lebanon, Syria and Jordan there has been a moderate increase in the number of beds available for refugees, mainly to cover the needs of general, paediatric, and mental patients, while the decrease, which appears in the Gaza District only, is apparent and not real and is due to a reclassification of bed reservations, as between refugees and Gaza residents; the total number of hospital beds in the Gaza District available to refugees remaining unchanged during the period of review.

Table 4

No. of beds available		Lebanon	Syria	Jordan	Gaza	Total
General T.B. Naternity Paediatric Mental		163 150 20 26 51	92 45 11 18	627 140 66 140 	264 150 80 23	1,146 485 177 207 101
	Total	410	166	1,023	517	2,116

In Jordan with the opening at Hebron of the new Government hospital in which the Agency subsidizes 50 beds, it was possible for the Agency to close its 5t. Luke's Hospital in the same town on 31 october 1958. There was a moderate increase in the number of beds reserved in the Italian and Sisters of Nazareth Hospitals at Amman and in the Arab Evangelical Hospital at Nablus. Because of the sufficiency of tuberculosis beds elsewhere, it was possible to reduce from 50 to 40 the number of beds reserved in the Barachah Sanatorium at Arroub. In the Syrian degion of the United Arab Republic, a small increase also took place in the beds subsidized in St. Louis, the Italian, and Sadat hospital in Damascus. The Linistry of Health kindly allocated 20 beds in Kadamous Sanatorium for the admission of tuberculous refugee patients as required.

12. Laboratory services continue to be provided by Agencyoperated, university, governmental or subsidized private Laboratories. In Lebanon the Government Public Health Laboratory deals
with all public health specimens as well as such materials derived
from clinical cases as may be referred to it. In addition,
facilities for the culture of sputum have recently been established
in this laboratory. In Jordan a new agreement has been reached
with the Ministry of Health under which the Government will provide both a public health and a clinical laboratory service for
all refugees in Jordan, on payment of any annual subsidy by the

Agency to the government to cover the cost of non public health laboratory examinations. In the Syrian Region of the United Arab Republic, a subsidized private laboratory in Damascus is used while in Gaza the Agency has its own laboratory. Occasional use was also made of the laboratory of the Malaria Institute of India for the purpose of reporting upon special malaria specimens.

3. PATERNAL AND CHILD HEALTH

- During pregnancy professional care is provided through the maternity clinics which are held regularly in special centres throughout the four countries. Here medical and nursing supervision is given and any abnormalities discovered are referred for investigation and treatment. Simple health instruction is given and a readymade layette or layette materials issued. In addition to the physical examination, the urine is checked, the blood pressure is recorded and a serological test for syphilis is carried out. A daily issue of skim milk and a monthly issue of supplementary dry rations are authorized from the beginning of the 5th month of pregnancy till the end of the 12th month after delivery. Delivery normally takes place in the home or in the camp maternity centres, hospital care usually being reserved for complicated cases.
- In general, services were maintained satisfactorily throughout the year except for some limitation in certain areas in Lebanon due to the public unrest. The monthly supplementary issue of extra dry rations continued to act as a powerful stimulus to attendance as evidenced by the 118,523 visits made to the clinics during the year under review by the 33,824 pregnant women inclusive of those still on the register at the end of the previous review period and those newly registered during the present period of review.

out on the 25,669 newly registered pregnant women 166 proved to be positive i.e. 0.98%. The completion of these tests ensures early discovery of the disease where it exists and permits of the immediate institution of adequate treatment with subsequent surveillance as well as the investigation of the marital partner and other family members. The epidemiological trend of syphilis occurring among refugee pregnant women attending maternity clinics during the last eight years is shown by the following statistics (figures for 1953/54 not available):

1951/52 1952/53 1954/55 1955/56 1956/57 1957/58 1958/59 Number of ante-natal 19,458 21,223 20,800 18,629 18,463 17,538 STS performed Number of positive STS 577 557 342 259 256 1,032 166 Percentage 3.0 2.6 1.64 1.39 1.4 0.98 positive 5.9

- 16. The child health service provides simple advice to mothers regarding the care of their infants and young children, especially in respect of breast feeding, weaning, diet, bathing, clothing, and the prevention of infection. Prophylactic immunizations against smallpox, diphtheria, pertussis, tetanus and enteric group fevers are carried out. Beneficiaries of supplementary feeding in the 0-2 years age group are selected mainly through these clinics. The total number of attendances during the period under review was 381,799 (monthly average 31,816) compared with 338,617 attendances (monthly average 28,218) during the corresponding period of the previous report.
- 17. As in all warm countries, summer diarrhea and gastroenteritis among infants and young children constitute a serious problem during the hot weather and instructions are given to

mothers at the clinics concerning the preventive measures to be adopted in respect of these conditions e.g. adequate personal hygiene, careful food preparation and protection, general cleanliness, and fly control.

- 18. After a careful study that has now extended over two years the Agency has evolved a regime for the treatment of infants suffering from summer diarrhea. This regime is based on the maintenance or restoration of body fluid electrolytic balance, treatment by suitable chemotheraputic agents and the provision through the supplementary feeding centres of a special menu for a period of 10 days or longer as required. In order that the regime may operate satisfactorily, very careful preparations have to be made before the onset of the warm season e.g. training of staff in techniques, drawing up of menus, instruction of supplementary feeding centres staff, orientation of health education workers, and by no means least, the teaching of the mothers. The careful follow-up of each case is most important and necessitates a very active programme of home visiting by the nursing staff and health education workers. The regime has been operating in Jordan for over two years, in Gaza for one year and has been extended to Lebanon and the Syrian megion of the United Arab mepublic in the summer of 1959.
- 19. There are two school health teams operating in Jordan and one in each of the three remaining countries. Their function and duties include the review of the state of health of the school population, routine medical examination especially of new entrants, referral for treatment of school children discovered to be suffering from remediable defects, follow-up of such cases, selection of school children needing supplementary feeding, participation in prophylactic immunization campaigns, medical examination of school teachers, supervision of environmental

sanitation in schools and health education. During the period of review 74,854 school children and 1,595 teachers in agency schools were examined.

4. NUTRITION

- The calorie value of the basic rations supplied to refugees continued unchanged throughout the year at about 1,500 calories per day in summer and about 1,600 calories per day in winter, and with a total vegetable protein content of 41.7 and 44.2 grams respectively. The constituents also remained unchanged except that in Jordan during 2 winter months burghol was issued in lieu of rice and in December 1958 there was an issue in all 4 countries of 400 grammes of flour in lieu of 500 grammes of dates. No fresh food items are included in the basic rations.
- 21. Under the supplementary feeding programme provision continued to be made for the protection of the most vulnerable groups in the refugee population. The average monthly number of expectant and nursing mothers in receipt of the special supplementary rations issued from the beginning of the fifth month of pregnancy to the end of the twelfth month after delivery and having a value of 500 calories per day was 28,325. This same group together with all children up to the age of 15 years are entitled to a daily issue of milk and amounted to an average daily number of 192,241 beneficiaries. In addition milk was issued to schools and orphanages. During the scholastic year the average daily number of such beneficiaries was 39,570. Further, a substantial nutritionally-balanced hot meal, which included, besides the dry ration constituents, items of fresh food such as meat, eggs, vegetables, fruit, was provided on six days a week to a daily average of 42,703 persons mostly children selected on medical

grounds as being in need of supplementary feeding. The calorie value of the meal varies from 200 to 650 calories according to the age of the recipient and is provided, in the first instance, for a period of three months, which may however be extended on medical certification. Fish oil capsules were issued regularly through supplementary feeding centres and to school children attending the Agency's elementary schools. An average number of some 1,500 outpatients suffering from pulmonary tuberculosis were in receipt of double basic rations. Hospital rations remained unchanged. In the Gaza District a daily issue of milk was made to some 12,000 Gaza non-refugee residents through the Agency milk centres on behalf of the voluntary society CARE.

- 22. Apart from some difficulties experienced in and around Beirut during the period of public unrest, the supplementary feeding and milk distribution programme continued smoothly in all countries with a gradual increase in the number of beneficiaries as the year advanced, especially in respect of expectant and nursing mothers in Jordan and Gaza, and also of school children, particularly in Lebanon, receiving milk in schools. In the Syrian Acgion of the United Arab Republic, a proportion of the milk distributed had been in the form of milk powder but with effect from 1 October 1958 this procedure ceased and subsequently all milk issues throughout the Agency were in liquid form. Several new supplementary feeding centres were established in Jordan and Gaza and in other instances better premises have been built or are at present under construction at centres already in operation.
- 23. Following a recommendation made by the Chief, Mutrition Section, MHO Geneva, a survey of the gain in weight during pregnancy of refugee women was commenced in Jordan during August 1958 and was extended to the other three host countries in January 1959. It is not expected to be completed until the late summer of 1959. A small

health survey was carried out in Jordan during December 1958 by a visiting team of doctors from Johns Hopkins University Hospital under the auspices of NEDICO, a branch of the International Rescue Committee. 585 school children aged 7-12 years selected from two refugee camps and one non-refugee town school were reviewed. the comprehensive examination form was recorded the nutritional state of the children examined and other medical data. completed forms have been despatched for analysis and assessment of the findings, a report on which is still awaited. Inile no extensive nutritional survey has been carried out during the period of the report, it has to be borne in mind that the refugee population is under constant medical surveillance by the camp medical officers, school health doctors and the home visiting nursing staff. From their reports it can be stated that in general the nutritional state of the refugee population is not unsatisfactory.

5. COMMUNICABLE DISEASES CONTROL

A list of infectious diseases recorded among the refugee population for the period under review is given in the following table:

Table 5

	Lebanon	Syria	Jordan	Gaza	Total
Population *	118,674	102,776	560,826	236,430	1018,706
Plague Cholera Yellow fever Smallpox Typhus (louse borne) Typhus (endemic) Relapsing fever Diphtheria Measles Whooping Cough Chicken Pox Mumps Meningitis (cerebro-spinal Poliomyelitis Enteric Group Fevers Dysentery	0 0 0 0 0 0 1 4 581 1,242 432 1,041 1 30 17,543	0 0 0 0 0 0 0 2 451 398 347 635 1 3 164 15,563	0 0 0 0 0 12 17 3,336 1,055 1,595 20 32 89 14,840	0 0 0 0 0 0 249 101 260 1,952 7 0 135 20,918	0 0 0 0 0 13 23 4,617 2,619 2,094 5,223 29 418 68,864

Table 5 (Cont'd.)

	Lebanon	Syria	Jordan	Gaza	Total
Population *	118,674	102,776	560,826	236,430	1013,706
Malaria Bilharziasis Ankylostomiasis Trachoma Conjunctivitis	1 0 48 ** 3,552 ** 15,501	173 0 0 438 7,789	508 0 0 78,172 105,536	55 107 695 12,463 16,117	737 107 743 94,625 144,943

^{*} Figures are based on the Registration Statistical Bulletin for the second quarter of 1959.

- 25. No case from the six "convention" diseases occurred among the refugees during the period under review. Thirteen cases of relapsing fever were reported but were considered on epidemiological grounds to be tick-borne. All except one of these cases occurred in Jordan. Dysentery and eye diseases are still the most prevalent infections but the number of reported cases has not increased. Due to the improvement of sanitation, preventive inoculation coverage and diffusion of health education, the incidence of enteric group fever cases showed a progressive decline.
- Although the Asiatic influenza outbreak was not as widespread as that of 1957, greater severity and more complicated cases were noted among the refugees.
- 27. Fewer cases of poliomyelitis were reported in all four fields and data are collected in every instance for an epidemiological study of the disease.
- 28. Following the campaign launched last year in Gaza against ankylostomiasis, the incidence of this disease among the refugee population in the District is decreasing. Effective follow-up procedures in the cases treated is being maintained.

^{**} Attendances and not cases.

- The measles outbreak has been mild during the period of review. In Aleppo, where some complicated cases had occurred two years ago, precautionary measures were taken to meet a possible cyclical wave.
- 30. In Jordan, in contrast to the 70 cases of diphtheria of the previous reporting period only 17 were reported during the present period. A vigorous health education campaign is designed to attract the refugee to make use of the immunization facilities offered in the agency's clinics.
- 31. In all Agency clinics active immunization campaigns against the related communicable diseases were carried out. The total numbers of routine injections given during the period under review were as follows:-

	Lebanon	<u>Syria</u>	J ordan	<u>Gaza</u>	<u>Total</u>
TAB Smallpox Diphtheria Pertussis Tripple Vaccine	10,395 5,495 8,074 - 2,753	42,379 4,048 1,138 913 785	60,074 1,381 9,077 2,556 7,241	93,247 10,178 10,370	206,095 21,102 28,659 3,469 10,779

32. <u>Malaria Control</u>. The following gives a summary of the Agency's anti-malaria activities during the year.

Table 6

		Residua	l spraying campa	nigns
Country	Camps sprayed	Villages sprayed	Sq. meters sprayed	Population protected
Jordan	-	50	1,521,081	25,148

Larvicidal Campaign (Jordan)

Estimated number of square meters of water surfaces treated during the period April-November 1958 inclusive: 41,692,525

Number of litres DDT 2.5%, pineresin 2% mixed with solar oils:

104,930

Drainage (Jordan)

Number of linear metres cleared 173,810
Number of cubic metres dug as drains 17,520
Number of square metres dried 841,650

- 33. In Jordan, early in May 1959 and in accordance with the agreement signed in 1954, the Agency handed over the Yarmuk Jordan Valley Antimalaria Project to the national malaria eradication team, after an evaluation survey of the Agency's antimalaria activities of the past five years. Materials and equipment used by the Agency for this programme have been transferred to the national team.
- 34. Except for an early start of operations (16 March instead of 1 April) and the replacement of dieldrin by D.D.T., there has been no change in the techniques employed during the period of review. Ditches were cleaned, some frontier villages sprayed and all potential breeding places were treated with larvicidal agents.
- 35. In view of the handover mentioned above and as part of the evaluation survey, an epidemiological investigation was carried out in cooperation with the national malaria eradication team. Among the 552 infants examined, only one blood slide was found positive for malaria. On investigation, it was found that the patient had contracted the disease outside the project area. Likewise 2,974 school children were examined and the parasite rate was found to be 1.04%.
- 36. In Lebanon and the Syrian Region of the United Arab Republic, also, active national malaria eradication campaigns are under way. The Agency co-operates in this work within the camp areas.
- 37. In Gaza district 55 cases of malaria were reported during the period but after investigation it was presumed that they were all infected outside the district.

- 38. Under the insect control programme periodic changes in the formulation of the anti-fly insecticide mixture have produced good results during this period. Nevertheless more and more reliance is being placed on sanitation measures and health education of the public to effect control of fly breeding.
- 39. Anti-louse measures continued to be carried out in all fields using 1% BHC (lindane). No case of louse-borne diseases was recorded in the Agency area of operations during the past five years.
- 40. Until very recently, bedbug control was carried out with limited success. Following an experimental study made in the autumn of 1958, an eradication campaign against bedbugs was started in May 1959 in the Gaza district employing an organo-phosphorous compound used under strict safety precautions. Judging from the data so far collected, encouraging results have been obtained.
- 41. Tuberculosis Control, The advent of the newer antituberculosis drugs has had a profound influence on the methods adopted in the treatment and control of tuberculosis. A high proportion of patients suffering from this disease can now be treated very effectively as outpatients or require a much shorter stay in hospital. In the Agency programme, during the last three years, there has been a gradually increasing emphasis on domiciliary treatment and this method has proved to be so satisfactory that waiting lists for hospital admission have practically been abolished and in Jordan it has again been possible to reduce the number of sanatorium beds reserved for refugees, this year from 150 to 140. In Lebanon, the 150-bed wing at Bhannes Sanatorium is more than adequate to meet the requirements of refugees living in that country and consequently has in addition received patients from the Syrian Region of the United Arab Republic, Jordan and Gaza requiring

thoracic surgery. In Gaza the number of beds available in Bureij Sanatorium are sufficient for the needs of both the refugees and the Gaza residents while in the Syrian Region the Ministry of Health of the United Arab Republic has kindly made available in Kadamous Sanatorium a further 20 beds, as required, and in addition to those already available at Ibn Nafis and Ibn Rushd Sanatoria.

- 42. So far as the medical supervision of outpatients was concerned, two major changes have taken place in Jordan where, in the Hebron Area, following the closure of St. Luke's Mospital where the Agency maintained a tuberculosis outpatient centres, an agreement was concluded with the nearby Barakah Sanatorium for the introduction of diagnostic and outpatient services for refugees with effect from 1 November 1958. Jith the opening of the Government JNO Tuber-culosis Centre at Jerusalen, an agreement was also concluded with the Ministry of Health for the provision of like services for refugee patients living in the Jerusalem, Jericho, and Ramallah areas. This agreement is similar to the agreement already in operation for more than 2 years in respect of the supervision at Government/JNO Tuberculosis Centre at Amman of the tuberculous refugee patients living in East Jordan.
- 43. In the Syrian Region of the United Arab Republic a committee appointed by the Hinistry of Health investigated the tuberculosis situation among the refugees living in Damascus area at Khan Es Shieh, Khan Dannoun and Jaramana camps and Barzeh village and found the incidence of the disease to be very low. A statistical summary of the findings is as follows:

	Population	<pre>found to be tuberculous</pre>
Khan Es Shieh	2,894	0.4
Khan Dannoun Jaramana	944 1,432	0:0 1.7
Barzeh	210	0.0

In a report made in July 1958 by the Agency's Field Health Officer in Gaza of a survey of almost 25,000 school children between the ages of 5 and 15 years, the number discovered to be suffering from tuberculosis was only 0.0%. The medical services of the United Nations Emergency Force assisted in this survey. It is to be noted that all pulmonary tuberculosis patients undergoing domiciliary treatment continue to receive double basic rations.

6. ENVIRON DUTAL SANITATION

- Water supplies in camps were maintained satisfactorily during the period of review, despite the public disturbances in Lebanon and the severe drought that prevailed early this year in the Syrian Region of the United Arab Republic and Jordan. These emergencies and minor shortages in supplies were met by the provision of water tankers. There has been considerable improvement to existing facilities as well as substantial construction of new water supply systems. These were mainly in Burj el Shamali and Burj Barajneh camps in Lebanon, Bureij and Nuseirat camps in Gaza, and Fara'a and Jericho camps in Jordan.
- 45. Excreta disposal has also been considerably improved during the year with the construction of an additional number of septic tank latrines especially in Jordan and of private family latrines in both Jordan and Gaza. Garbage and refuse has either been removed by the local municipalities against payment, or disposed of by the Agency by composting or by burning in incinerators.

7. NURSING SERVICES

46. While the care of the sick in clinics and hospitals and curative activities in general require much of the time and effort of the nursing services, nevertheless increased emphasis continues

to be laid on the development of the very essential contribution which the nursing services can make to the preventive aspects of maternal and child health, school health, tuberculosis control, home visiting, health education and prophylactic immunization.

Of particular importance is the influence of the nurse in advising and educating the mothers in all matters connected with the health of their families.

- Afference has already been made in paragraphs 17 and 18 of this annex to the special regime that has been evolved for the treatment of infants suffering from summer diarrhea. The successful implementation of this regime depends to a very great extent on the efforts of the nursing services in teaching the mother the details of the regime, in the follow-up of the individual patient, in observing the progress made during the home visiting, and in encouraging the mother to attend the clinic regularly until her infant's health is restored to normal.
- 48. A staff of 100 nurses and 326 nursing auxiliaries is employed by the Agency in its preventive and curative services. This number does not include the large group of nursing staff employed in clinics and hospitals subsidized by the Agency.

8. HEALTH EDUCATION OF THE PUBLIC

This programme has now been in operation for four years. In that time it has become established as an integral and important part of the general health programme of the Agency. Gradually there has developed, not only among the refugee population and the Agency's employees, but also among the members of the surrounding communities, public leaders, local authorities, large business concerns, a realization and an appreciation of what can be achieved in the prevention of disease and in raising the standard

of health of the community by health education of the public.

Talks, discussion groups and lectures to mothers attending maternal and child health clinics, to school children, to teachers, to community leaders, and Agency employees have been instituted. Audio-Visual Aids such as posters, flannel graphs films, health calendars, mobile health and nutrition exhibitions, have been used to stimulate interest. Special campaigns directed towards fly and bedbug control, dental hygiene, cleanliness weeks etc. have been designed to give special emphasis to what can be accomplished by the individual and by the community with the means available.

9. HEDICAL EDUCATION AND TRAINING

51. The following table shows the continuation of the training of medical and para-medical personnel in the different universities and nursing training schools.

Table 7

	Egypt	Lebanon	Syria	Iraq	Total
Universities					
Aedicine Pharmacy Dentistry Veterinary medicine	79 8 7 3 97	13 2 2 - 17	12 1 3 - 16	6 1 7	110 11 13 3 137
Nursing	Lebanor	n <u>Syria</u>	Jordan	Gaza	Total
General Nursing (Local School) General Nursing (UK Schools) Midwifery Child Birth Attendants Assistant Pharmacists	1 6 - -	- 1 - -	24 3 6 -	4 - 10 25	29 10 6 10 25

- 52. In addition to the above, a three-months ophthalmic training course was given at St. John's Ophthalmic Hospital,
 Jerusalem, to two groups of male auxiliary nurses. An in-service course in maternal and child health of 3 months duration was given at Jericho to 7 qualified and 10 auxiliary nurses. In the Syrian Region of the United Arab Republic, an in-service refresher course of the same length was given to similar groups of nurses. In Gaza a first-aid and dressing course was given to 14 nursing auxiliaries.
- 53. The Medical International Corporation, known as MEDICO. a branch of the International Rescue Committee, sponsored the visit of a team of medical and surgical specialists from Johns Hopkins University Hospital who gave a series of lectures and technical demonstrations to doctors and nurses in Jordan. The nurse anaesthetist attached to the team also gave lectures and similar demonstrations on anaesthesia to group of nurses from Government, voluntary societies and Agency hospitals. In Jordan a three months in-service Health Education Course was given at Jericho to 3 students.
- The 1959 session of the "Journees Medicales de Beyrouth" took place in March 1959 and was attended by a number of the Agency's Medical Officers. The Agency contributed to the cost of the 9th Hiddle East Medical Assembly held in May 1959 which 50 doctors of the Agency's staff or from Agency-subsidized hospitals attended.

10. IEDICAL SUPPLIES

55. In general, throughout the period of review, the provision of medical supplies has been satisfactory, the bulk of items being purchased by the Agency through UNICEF, on a world tender basis. Relatively few items, and these in small amounts only, were bought locally. On the clerical side, a major change

has been the mechanization of control and accounting procedures in the Base Jarehouse Medical Stores and in the Field Pharmacies. Jhile the procurement of Marcotic drugs continues to be arranged centrally, the drugs themselves are now delivered directly by the suppliers to the Field Pharmacy concerned.

11. GOVERNEENTS AND VOLUNTARY SOCIETIES

56. High tribute must continue to be paid to the various governments, universities, voluntary societies, privite firms, and individuals for the very generous and valuable contribution which they have made to the health work being carried out amongst the refugees from Palestine. This assistance has been in the form of personnel, free hospital beds, services in outpatient and mobile clinics, maternal and child health centres, assistance in mass immunization campaigns, medical supplies, layettes, X-ray equipment and supplementary food supplies. In certain instances, funds were provided to cover the cost of specific nursing training courses. All such supplementary assistance has been of great help to the Health Division of the Agency in operating its extensive and complicated health programme.

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