

tuberculosis. The cure of this disease is expensive and many countries cannot afford the necessary treatments, but prevention can be offered at a relatively low cost per child. A high degree of protection can be given by the vaccine BCG (Bacillus-Calmette-Guérin). Children are tested to see whether they have tuberculosis or have developed a natural resistance. Those with a negative reaction are given an injection, and the chances are four out of five that they will be protected thereafter. Up to the end of 1953, 42 million children have been tested. The UNICEF share of this programme consists of the vaccine, the imported equipment necessary for the campaign including the transportation and the payment of foreign professional staff. WHO gives technical approval of the programme and recruits the necessary foreign medical personnel. The local governments are responsible for the local costs for personnel and facilities and for organizing the campaign. Local doctors and nurses must be available to carry on, after training by a small international staff.

The original BCG campaigns were provided with vaccine from the Danish laboratories but because of the limited period of effectiveness of BCG, local sources of supply had to be established for campaigns in countries distant from Europe. UNICEF, therefore, has assisted certain countries with equipment to make possible the local production of BCG.

Mass campaigns have also been used to combat yaws, an extremely crippling disease which attacks children through any simple scratch and which eats away the flesh, then bone and then tendon. Modern medical science has made it possible to cure most cases with one shot of penicillin. In the last four years nearly 3 million children have been treated for this disease under UNICEF programmes and there is reason to hope that within five or ten years the disease will be under control in many countries where it has been a burden for centuries.

Malaria Campaign

Malaria claims about 300 million victims a year and kills about 3 million. DDT spraying has proved a most effective weapon to combat this disease. Teams of workers spray the houses once or twice a year to kill the infected mosquito. UNICEF supplies DDT, sprayers, vehicles and other essential equipment, WHO gives technical advice and supervision and the local government provides organization and labour. The Fund in 1953 was assisting campaigns in thirty countries which gave protection to an estimated 17 million people. The results have been so encouraging that other agencies and governments are undertaking to carry on this work on an unprecedented scale. There is hope that in time malaria may cease to be a major cause of illness and death in the areas where it is most prevalent.

The Fund has also contributed on a smaller scale to campaigns against whooping cough, diphtheria, trachoma and leprosy.

The basic health education which accompanies any campaign against a particular disease can have important results for the general health of a country and UNICEF is becoming increasingly active in assisting the development of child health services, mainly through the setting up of rural health centres. The work is less spectacular than the mass campaigns, but quite as fundamental. Approval has been given for the provision of supplies and equipment for over 5,300 maternal and child welfare centres mostly in rural areas. Here it is hoped