



*Cobalt beam unit in a Ceylonese hospital.*

There are also many social needs to be met in South and South-East Asia in the fields of health, education and housing. Associated with the low standards of living prevalent in many areas are high death rates, lack of medical facilities, inadequate housing, considerable illiteracy and lack of schools. These deficiencies cannot be fully remedied until economic development provides enough resources to meet the cost involved but, at the same time, economic progress requires healthy, educated individuals. Social welfare must therefore be attended to as well as economic development.

All the countries in the area covered by the Colombo Plan have drawn up development plans or programmes of one kind or another. These programmes attempt to mobilize scarce resources and direct them into the most urgent projects, with the aim of bringing about development according to the country's needs. Surveying the first set of development plans drawn up by Colombo Plan countries in 1950, the various Ministers from member countries (who formed the Consultative Committee of the Colombo Plan) observed that if they were to be carried out, two grave difficulties must be overcome: shortage of trained manpower and shortage of capital.

It has been recognized from the beginning of the Colombo Plan that by far the greater part of the effort to overcome the serious economic problems of South and South-East Asia must be made by the people of the area themselves. It has also been recognized that they cannot succeed without some outside assistance except, possibly, over a long period of time. But there is very little time available: the people of Asia are no longer prepared to accept a low standard of living, so easily comparable in this age of rapid communications to more prosperous conditions elsewhere, and there is an urgent pressure upon their Governments to show that progress is being made.