

## UNICEF AND NEPAL

by

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### Introduction and short history

United Nations Children's Fund (UNICEF) began at the close of World War II, with emergency aid for the children of war-torn Europe. The acute stage past, it became apparent that, for the majority of world's children, desperate need was chronic. The Latin America remain trapped in a self-perpetuating cycle of hunger, disease, ignorance and poverty. In answer to this awakening the nations of the world again made their voices heard through the United Nations in 1950. The General Assembly directed UNICEF to begin providing long-range assistance for programmes benefiting children in the developing countries. The arm of the United Nations Children's Fund (UNICEF) is to co-operate with developing countries in their efforts to improve the condition of their children and youth and prepare them to contribute to the progress of their society.

UNICEF is part of the United Nations proper, but it has a semi-autonomous status, with its own governing body and secretariat. It is governed by a thirty-nation Executive Board, ten members of which are elected each year for a three-year term by the Economic and Social Council of the United Nations. In line with its emphasis on a "country" approach and flexibility UNICEF offers a considerable range of assistance. This does not mean, however, that each country receives aid for any different kinds of projects. For one thing, UNICEF favours aid for "multi-purpose" projects which combine or co-ordinate a number of related activities, and which involve joint planning by several ministries or departments. UNICEF is now aiding 117 countries and some 500 projects. The classification of the main fields aided by UNICEF, as described below is arbitrary to certain extent since the more comprehensive the project, the more services it will include from various fields.

Bearing this in mind, the main fields of UNICEF aid are

(i) **Health Services:** As part of basic health organizations, involving especially networks of Maternal and Child health services, Environmental Sanitation (including water supply for small rural communities), and Health Education. Family planning may be aided when included by the Government in MCH services. As part of MCH networks, the

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paediatrics and maternity services of hospitals may be assisted, as well as Public Health Laboratories and the production of vaccines. Aid is given for training at all levels, with particular emphasis on the training of auxiliaries and those who will supervise their work. UNICEF also assists in **control of diseases** which take a heavy toll in child mortality or sickness (such as malaria, tuberculosis, leprosy and trachoma.) Most of the disease control campaigns need to be organized on a large scale and carried out continuously over a number of years if they are to be successful. The objective ultimately is to integrate the specialised campaigns into the work of the permanent health services.

(ii) **Nutrition** including (a) **applied nutrition projects**, the objective of which is to improve the diets of rural mothers and children through foods which families can produce. Included in these projects are training schemes and nutrition education combined with demonstration production of various protective foods through school, community and family gardens, village fishponds and poultry and small-animal raising schemes; (b) **development and local production of low-cost protein-rich food concentrates** (soya products, cottonseed, peanut or fish fl-ur etc.) to enrich staples or to formulate into weaning foods for toddlers and pre-school age children in urban and peri-urban areas; (c) **aid for local milk-collecting stations and processing plants** to make safe, low-cost milk available to a community, with special emphasis on availability to children; and (d) **provision of milk powder or a blended high-protein food for distribution** through maternal and child health centres, and in school-feeding activities which are part of a nutrition education programme.

(iii) **Education**, which includes assistance for basic teacher training; for refresher courses for school teachers (especially for the many teachers who have not attended teachers' colleges); and for teaching materials and texts, or aid for their local production; and for supervision (e.g. transport for supervisors). Equipment, paper, pencils and other expendables may be provided to schools whose teachers have been trained or up-graded.

(iv) **Vocational training** which includes aid for programmes which provide practical orientation beginning in the primary schools, and vocational training guidance for older children. Aid is also given for training that will bridge the gap between school and work for early school leavers and provide additional skills to the youngest group of wage earners.

(v) **Family and Child welfare** includes aid through channels such as neighbourhood and community centres, combined health-and-welfare units, day-care services, and activities for youth. While special provision may be made to **protect abandoned and neglected children**, emphasis is directed, in an increasing number of projects, toward helping the family adapted to changed social conditions and improving parental understanding of children's needs and methods of child-rearing through parent education, family counselling and group activities involving mothers. A co-ordinated community approach in providing social services included those involving women's activities which, in a number

of countries are called "mothercraft/homecraft" or "animation rurale."

(iv) *Planning and project development* includes help to countries to assess the needs of their children and young people and to plan programmes, within the context of national development, designed to meet needs which warrant high priority. In addition, aid may be provided for national conferences and workshops, training, studies and advisory formulating national development plans.

(vii) *Emergency aid* for mothers and children in cases of disaster is provided by UNICEF when it is not available from other source or when UNICEF is in a better position than others to render aid, or when other aid is insufficient. Wherever possible, UNICEF prefers to help in the restoration of permanent services, after the main relief burden has eased.

(viii) *Training* of national personnel is a very important feature of UNICEF-aided projects. It constitutes about 30 per cent of all programme assistance. UNICEF aid for training is available for all categories of personnel who furnish services relating to the welfare of children and mothers and for all levels of work-planning, directing, teaching, professional and auxiliary. The major emphasis in UNICEF aid is for within-country training schemes for middle-level and auxiliary staff but supervisory and other high-level staff are also trained with UNICEF aid.

Since 1964, UNICEF has been co-operating with His Majesty's Government of Nepal in the fields of health, education, planning, rural drinking water and direct children organization. In the field of health, the objective of the programme had been in the beginning, i.e. in 1964, to promote Maternal and Child Health Centres in Kathmandu valley as well as training of MCH personnel meant to staff such centres from 1965 onward. UNICEF interest has extended to compromise other facets of the building up of comprehensive integrated health services in Nepal, i.e.

- (a) to give assistance for the establishment and extension of training facilities for nurses, assistant nurse midwives and auxiliary health workers;
- (b) to provide basic supplies for the permanent health infrastructure on district and zonal level to district health centres with attached district hospitals, and zonal health offices with attached zonal hospitals;
- (c) to contribute some materials and vaccine to be utilized in campaigns of pilot character for fighting TB, smallpox and leprosy as part of the general health services;
- (d) to spread MCH services as an integral part of Basic Health Services.

Following is year to year break down of UNICEF assistance in Nepal in the field of health:

1954/65	26,500 dollars
1965/66	103,000 "
1967	no recommendation
1968	162,000 "
1969	166,135 "
1970/72	240,000 "

Since 1964, UNICEF has been providing continuing support to the efforts being given by H.M.G.'s Department of Health Services towards the developments of a net-work of mother and child health centres with supporting hospital services, health education activities, the training of para-medical and auxiliary health personnel, and in collaboration with the Department of Irrigation and Water Works, the development of rural community water supply and environmental sanitation projects. World Health Organization provides technical assistance to these health activities.

In 1970, UNICEF Executive Board made a commitment of 240,000 to carry out UNICEF assisted health programmes in Nepal until 1973. This includes assistance in the further development of a basic health services infrastructure with the emphasis for MCH and Family Planning services, training, disease control activities and supervision. The major single item requested under this category is a construction grant of 50,000 from UNICEF to extend auxiliary health workers school, thus UNICEF has been successfully co-operating with His Majesty's Government of Nepal in its endeavour to uplift the health standard of its people and prepare them to a healthy human resources.