

**Table 5.—Additional annual premium cost of "left-employ" contracts, late 1958**

Type of "left-employ" contract	Number of plans	Additional annual premium cost	
		Median	Range
Plans not reducing benefits.....	57		
One-person.....	1 56	\$9.60	\$0-55.56
Family.....	1 56	10.44	0-115.92
Plans reducing benefits.....	22		
One-person.....	22	7.80	1.20-18.60
Family.....	2 21	7.20	1.80-40.20

<sup>1</sup> Rates not available for 1 plan in which they vary by locality.

<sup>2</sup> Excludes 1 plan where group family rate is higher than "left-employ" family rate; not comparable since "left-employ" members are subject to an 80/20 coinsurance clause and receive lower maternity benefits.

are reduced, the difference between the two types of rates is lower. The greatest difference for a family contract is less than \$3.50 a month.

In 1956 the additional annual cost for a family for a "left-employ" contract in more than half the plans ranged from \$6 to \$15, or from \$0.50 to \$1.25 a month. In 1958 in half the plans the additional cost to "left-employ" members was less than \$1 a month (table 5).

During 1958 no changes were made in premium rates by 50 of the 79 plans. (Most of these plans had raised their rates before 1958.) Among the 29 plans (30 percent of all the plans) that raised rates in 1958, the majority increased the premium on all three types of contracts — group, "left-employ," and nongroup—as the following tabulation shows.

Changes in premiums	Number of plans
Total .....	79
None .....	50
Increase:	
Group, "left-employ," and nongroup contracts .....	20
Group and "left-employ" contracts .....	3
"Left-employ" and nongroup contracts .....	4
Nongroup contracts .....	1
Rates for "left-employ" contracts varying by locality .....	1

## UNICEF's New Program for Children\*

In a significant first step outside the health field and into the field of

\* Prepared by Katherine Bain, M.D., Deputy Chief, Children's Bureau

child welfare, the Board of the United Nations Children's Fund (UNICEF) at its March meeting approved a plan for aid to children's institutions and day-care centers.

In response to a resolution introduced by the United States Delegation in March 1958, a study was undertaken of the possibility of UNICEF aid in this field. A UNICEF staff member, acting as special consultant to the United Nations Bureau of Social Affairs, visited a number of countries and developed a report<sup>1</sup> that formed the basis for the proposed program. The World Health Organization supplemented this analysis with a special report on the health aspects.<sup>2</sup>

The main report was strongly supported at the Board meeting as being sound both in its general philosophy and in the specific principles that it established. Designed to serve as a basis for planning child welfare projects suitable for submission for UNICEF aid, it should also serve as a valuable resource to countries interested in evaluating existing services to children and planning for their improvement.

The report stresses the importance of training for all levels of workers—a recommendation heartily endorsed by the Board. Services that reach the most vulnerable age groups—infants and young children—are high on the priority list, as are the preventive services, such as day care, which might enable children to live in their own homes. While recognizing that institutional care is not ideal for children deprived of home life, the Board also recognized that in many countries institutions will need to be used for many years to come. Improvement of existing institutions and stimulation of planning for services that strengthen home life are the aims of the program. As the report states, "aid would not be justified unless it were conceived of as a beginning toward a broader and more fundamental objective, namely that of aiding countries develop well-organized national systems of social

services which would help preserve and strengthen family life, and foster opportunities for the healthy growth of the personality, abilities, and social habits of the child."

Just as UNICEF relies on the World Health Organization and the Food and Agriculture Organization for technical advice in areas of their competence, so it will receive technical advice on this new program from the Bureau of Social Affairs. Though the sum allotted for the first year is small—\$135,000—the development of even a few sound projects will require the full-time services of a competent child welfare worker in the Bureau. UNICEF is authorized to assist in paying such a staff member until the Bureau of Social Affairs can incorporate the position in its budget.

Which countries will wish to have assistance for projects in this field and what the projects will be like is unknown. The program will be watched with interest, however, as the first excursion of UNICEF outside the field of health.

This departure into the field of child welfare is renewed evidence of the dynamic quality of UNICEF's program. Initiated in 1946 to meet emergency needs for food and clothing of children in wartorn countries, UNICEF has changed and continues to change to meet new challenges. By resolution of the United Nations General Assembly in December 1950, UNICEF shed its exclusively temporary character and was directed to use its resources "for the purpose of meeting, through the provision of supplies, training, and advice, emergency and long-range needs of children and their continuing needs, particularly in under-developed countries."

Taking a broad view of the "needs of children," UNICEF has developed in the short space of 8 years an imaginative and flexible program for stimulating and assisting countries to meet those needs. A narrow approach might have limited aid to the traditional field of maternal and child health as conceived in a Western country where other categorical programs provide other segments of service. The planners, however, with a clear awareness of the needs of children around the world, have built

<sup>1</sup> UN Economic and Social Council, E/ICEF/377—30 January 1959.

<sup>2</sup> UN Economic and Social Council, E/ICEF/378—18 February 1959.

a more realistic program. Aid under UNICEF goes, of course, to basic maternal and child health services, but the services may include environmental sanitation projects, equipment for pediatric and obstetric wards in hospitals, and programs for premature infants, as well as the more traditional features.

Disease control, which might have been limited to diseases primarily affecting children, has been directed into mass campaigns against general scourges—yaws, leprosy, tuberculosis, malaria—which are also great killers of children. For its part in the world program to eradicate malaria, UNICEF contributes almost half its own total resources. Its attack on disease has extended beyond the treatment of the individual to the equipping of plants to produce treatment materials, such as DDT, penicillin, sera, and vaccines.

In extension of its early interest in hungry children, UNICEF has added to its feeding programs a long-range attack on malnutrition. Some 177 milk-processing plants have been aided; the latest allocation was for \$1 million to equip the milk plant in Bombay, for which the Government has set aside \$5 million. To “pay back” UNICEF, Bombay will provide free or subsidized milk to the value of \$1.5 million for mothers and children.

In September 1957 an expanded program of aid to nutrition was approved by the Board to provide for surveys, train personnel at all levels, and aid nutrition activities at the village level. School gardens, village fish ponds, nutrition education for teachers, nurses, and midwives, and poultry and small animal raising—all as part of community-development programs—are among the many kinds of projects for which UNICEF provides imported equipment, supplies, and transport and sometimes training stipends. At the last Board session in March, allocations for such projects were made to Uganda, India (Orissa), Indonesia, Ethiopia, Israel, and Turkey.

By making aid possible for so many kinds of programs UNICEF has become an adaptable tool for meeting a variety of needs. With the existing differences in levels of development among the countries of the world, a

more circumscribed program would have accomplished less than has this very diversified program. Any country can find something in the UNICEF armamentarium on which it is ready and able to embark. Stimulated by international assistance it will invest its own funds in something that may require long-range support. No overall international pattern is imposed, but each country is free to select from a variety of programs the one most suited to its needs.

The range of assistance is from the very simple, such as distribution of dry skim milk, to the very complex, such as aid to pediatric education. This latter aid, accepted by the Board as a new program in March 1957, is intended to upgrade the teaching of pediatrics in medical schools, through assisting in the establishment of full-time departments. Only four such projects thus far have been approved—three in India and one in Uganda. Although it is a very specialized kind of aid, it can provide for the country ready to use it an enormous boost to both the quantity and quality of medical care.

Against this background of past activity, the vote at the March Board meeting to extend aid to “Social Services for Children with Particular Reference to Institutions, Day-Care Centers and Other Methods of Care of Children Outside Their Own Homes” is a natural step forward in the evolution of UNICEF.

Another proposed departure from the field of health fared less well at the hands of the Board. Extension of UNICEF Aid to Primary Education, developed in response to a resolution of the Pakistan delegation, was not accepted by the Board in the form recommended by the administration. The program would have provided for cooperation with UNESCO for aid in training teachers and in broadening the scope of primary education to enable children to adjust to community life.

Proponents of the plan made the point that health, welfare, and education are interrelated. The Executive Director called attention to the United Nations *Report on the World Social Situation*, which pointed out the corollary to this “inter-relationship of needs,”—that is, that an at-

tack on any one of the evils of hunger, illness, or ignorance has proved less successful than a simultaneous attack on all three. Though impressed with these arguments the Board was also impressed with the vast amount of unmet need in the fields of health and nutrition that UNICEF is currently attempting to deal with. Rather than spread UNICEF resources too thin, the Board decided against expansion into primary education at this time. Some greater effort was authorized in teacher training in subjects falling within UNICEF’s traditional fields of interest, such as health, nutrition, hygiene, and home economics.

Though not accepted at this time, aid in the fight against illiteracy will undoubtedly be the subject of future Board consideration, as will other areas of children’s needs. The “tradition” of UNICEF is to face and deal with changing emphases in program.

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### General

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Theory of advisory councils, experience in State employment security programs, and analysis of their effectiveness.

CAMPBELL, WILLIAM J.; LEIZER, RAYMOND R.; and YUKER, HAROLD E. *A Study of the Adaptability of Disabled Workers*. (Human Resources Study No. 3.) Albertson, N. Y.: Human Resources Corp., Division of Abilities Inc., 1958. Various paging. \$1.

The final report of a 2-year study of a subcontracting industrial enterprise employing only disabled persons at prevailing wages.

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