

Foreign and Commonwealth Office London SW1A 2AH

14 December 1982

Dear John,

UNICEF

I enclose briefing for the Prime Minister's meeting with Mr Grant on Thursday. I understand that Mr Grant will go straight from his meeting with the Prime Minister to his press conference at the Foreign Press Club, where he will introduce UNICEF's annual report on the State of the World's Children. In these circumstances, he may wish to ask Mrs Thatcher for a specific indication of her support, which he could quote, for the package of four low-cost measures to reduce infant mortality which the report seeks to promote.

Your eve (J E Holmes Private Secretary

A J Coles Esq 10 Downing Street

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BRIEF FOR A MEETING BETWEEN THE PRIME MINISTER AND MR JAMES GRANT, EXECUTIVE DIRECTOR OF UNICEF, AT 4pm ON THURSDAY 16 DECEMBER 1982 OBJECTIVES To reaffirm our support for UNICEF. 2. To express our confidence in the UK Committee for UNICEF. POINTS TO MAKE 1. Glad that Mr Grant could come to London to launch UNICEF's annual report on the State of the World's Children. Remain strong supporters of UNICEF and its objectives. 2. Continue to be concerned about plight of mothers and children in Third World and impressed by relevance of UNICEF's programmes. 4. Understand that main thrust of 1982-83 Report is the promotion of a package of four low-cost measures to reduce child mortality: oral rehydration salts, immunisation, breast feeding and child growth charts. This accords with our own policy on primary health care and we support it. 5. Hope to maintain UK contribution at £6 million in cash terms. Regret that, because of constraints on all public expenditure, not possible to do more. (defensive) Our (voluntary) contribution represents about 6.8 per cent of the total of contributions by all governments. This is substantially greater than our (assessed) contribution to the United Nations (about 4.5 per cent). Pleased to be re-elected to Executive Board this year, so that we may play full part in UNICEF's activities. Have close and cordial relations with UK Committee for UNICEF which does a good job in fund-raising and publicising UNICEF's work.

BACKGROUND

1. United Nations Children's Fund

Origins

1. The United Nations (International) Children's (Emergency) Fund (UNICEF) was created in 1946 by the UN General Assembly to provide immediate assistance to children who were victims of World War II. In the 1950's, the Fund's emphasis was changed towards longer term programmes of assistance to children in developing countries. The words ''International'' and ''Emergency'' were dropped, although the well known initials were retained. In 1965, UNICEF was awarded the Nobel Peace Prize.

Status and organisation

2. UNICEF is an integral part of the United Nations, but it is semi-autonomous and has its own Secretariat. It is governed by an Executive Board of 41 government representatives, 13/14 members of which are elected each year for a three-year term by the UN Economic and Social Council. The United Kingdom's current term of membership expires on 31 July 1985, our having been elected earlier this year after an absence from the Board of one year. We play an active part in the Executive Board's annual meeting, held over a period of two weeks in May, where policies are determined and programmes are approved. We also retain close links with UNICEF's European Office and the UK Committee of UNICEF. Only 25% of UNICEF staff are located in New York. The representatives working in the field liaise closely with government officials in planning the projects for which UNICEF aid is sought.

Programme

3. The bulk of UNICEF funds is allocated to long term programmes of assistance to mothers and children in over 100 developing countries. These include establishing health services for mother and child, improving nutritional standards, raising educational standards through both formal and non-formal education, and training local personnel in all these areas. UNICEF's intention is to act as a catalyst, cooperating with developing countries in their efforts to improve the conditions in which children grow up. Where appropriate UNICEF works closely with other agencies, such as the World Health Organisation and the Food and Agriculture Organisation. UNICEF also provides emergency aid following natural disasters, and it makes special appeals for the additional funds which are required for that purpose. Most recently, it has been active in relief operations in the Lebanon. Wherever possible, emergency aid provides a basis for longer term programmes once immediate needs have been mat.

Funding and UK contribution

- 4. UNICEF is funded by voluntary contributions from governments, non-governmental organisations and individuals. In 1981 it received \$230m for its regular programme, \$49m for specific projects and \$22m for Cambodian relief. We consider it to be one of the best of the UN development organisations, with a good field programme operating in sectors to which we attach a high priority; and we have always been among the largest donors to its regular Programme. The UK contribution (paid by ODA) rose from £3.3m in 1977 to £5.8m in 1979, the International Year of the Child. It now stands at £5.9m. We have also contributed considerable sums to specific projects (over £2m in 1979 and £1.46m in 1980).
- 5. We understand that Mr Grant feels that the UK would pay more if contributions to the regular Programme were made on an assessed basis, instead of being voluntary. That assumption is incorrect. In 1981 the UK contribution was recorded as \$11.6m, which represented 6.84 per cent of the \$169.5m contributed by all Governments. For comparison, our assessed contribution to the United Nation in the same year was 4.46 per cent.

National Committees for UNICEF

6. The Fund is supported by UNICEF National Committees which, in nearly all developed countries, form its main link with the public. Their main functions are fund-raising and the dissemination of information about UNICEF's activities. The status of the National Committee varies, with some being semi-official bodies with government representation while others, like the UK Committee (Chairman, Sir Bernard Ledwidge), are purely private organisations.

Executive Director

7. The Executive Director of UNICEF is Mr James Grant (USA) who took up the job on 1 January 1980. A personality note is attached. Mr Grant is visiting the UK on 16 and 17 December under the auspices of the UK Committee, and immediately after his meeting with the Prime Minister he will give a press conference to launch the Fund's Annual Report on the state of the World's Children. In the evening, he is dining with the Minister for Overseas Development at the House of Commons.

2. The Annual Report on the State of the World's Children UNICEF prepared this report in order to focus on specific problems affecting children in the developing world. Mr Grant is coming to the UK to launch the 1982-83 Report, which is being published in book form by OXFAM. A summary, prepared for the press conference, is attached. The report aims to promote a package of four low-cost feasible activities which will improve the nutrition and survival of infants. These are:-Oral rehydration therapy for dehydrated infants, usually caused by diarrhoea or pyrexial illnesses; universal immunisation of children; promotion of breast feeding; and the widespread use of infant growth charts. Technically the ODA agrees completely with the importance of all four activities which, in the Department's major policy thrust towards providing primary health care, would be included as simple, effective and completely acceptable interventions. The following notes deal with each of the proposed inputs in more detail. Oral Rehydration Salts (ORS) (i) There is no doubt that the oral replacement of fluid loss by a solution of sodium, potassium salts and glucose, preferably given early before the child is severely dehydrated, is an effective means of reducing mortality. WHO has provided an energetic programme to provide ORS. UNICEF has established production units producing foil-wrapped ORS which have been widely distributed in tropical countries. Eventually it is hoped that the salts could be produced locally in the villages themselves, and that early rehydration would become a part of folklore and therefore treatment at the community level, usually without the need for medical intervention. ODA supports the International Centre for Diarrhoea Disease Research in Dhaka, Bangladesh, where the principles of ORS were first formulated and where much valuable operational research is still being conducted. (£110,000 p.a. since 1980). (ii) Immunisation The Expanded Programme on Immunisation (EPI), technically directed

by WHO and heavily supported by UNICEF, is one of the most promising aspects of providing Primary Health Care around the world. It offers immunisation to infants against diphtheria, pertussis, tetanus, polio, measles and tuberculosis, and protects pregnant women and their babies against tetanus.

One of the greatest problems, largely now overcome, has been the establishment, improvement and research into the Cold Chain, the system of keeping vaccines at their optimum storage temperature from manufacture to administration.

ODA has supported the Cold Chain Unit in WHO Geneva at a level of approximately £50,000 per year. This Unit has tested equipment, occasionally contracting this testing to the Consumers Association in Britain, designing appropriate systems of refrigeration, vaccine potency indicators and devising appropriate training for cold chain personnel.

ODA, through its Joint Funding Scheme, also supports various non-Governmental organisations, such as the Stop Polio Project of Save the Children Fund, which are aimed at improving all immunisation and supporting the Global EPI.

(iii) Breast-feeding

The DHSS and ODA strongly support the principle of breast-feeding as the method of choice in infant feeding.

Accordingly, they supported the WHO initiative in drawing up a code of practice on the marketing of infant milk formulae as breast milk substitutes. Breast-feeding, by its cleanliness, its nutritive value and the transfer of immunity from mother to child, has for at least the first few months of the child's life marked advantages over any alternative.

The DHSS, through its own advice in Britain, its support to the WHO, its conduct of surveys and of training courses, strongly encourages its use.

(iv) Child growth charts are used in the first two years of the infant's life to record growth, immunisation and significant medical problems. They form a record kept by the parents.

Much of the initial work on growth charts in the developing world was done by Professor Morley at the Institute of Tropical Child Health, which is supported by ODA joint funding.

More recently, an improved growth chart has been developed by Dr Nabarro at the London School of Hygiene and Tropical Medicine/SCF,

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supported again by ODA funding. This new chart is being widely tested and initial results are encouraging. United Nations Department (B) Overseas Development Administration Foreign and Commonwealth Office 13 December 1982

PERSONALITY NOTES ON MR JAMES GRANT AND SIR BERNARD LEDWIDGE
GRANT, JAMES P

Executive Director of UNICEF since beginning of 1980 Rank: USG

- 2. US National Born 1922 in China, studied at Berkeley, California and Harvard. Worked with the UN Relief and Rehabilitation Administration in China after the war, and in the fifties was Regional Legal Counsel for US aid programmes in South Asia, and subsequently Director of the US Aid Mission in Ceylon. Joined US Aid in 1958 dealing mainly with South Asia and the Near East. Assistant Administrator of AID 1967-68. Succeeded Henry Labouisse as Head of UNICEF at the beginning of 1980, having previously spent ten years as President of the Overseas Development Council, a non-profit organisation based in Washington.
- 3. Grant adopts a dynamic campaign-trail style. Had highly ambitious expansionary plans for UNICEF but failed to persuade major Western donors (including UK) that these were soundly based and in particular that Gulf Arab countries would pay for them. For the first time the Executive Board in 1981 postponed endorsement of the budge proposals. Grant's handling of affairs was widely criticised. This sharp lesson went home. By 1982 Grant had moderated his approach and basic confidence between himself and the Board appeared to have been restored.

LEDWIDGE, SIR BERNARD, KCMG

4. Sir Bernard Ledwidge was educated at the Cardinal Vaughan School, King's College, Cambridge, and Princeton University, USA. he served in the Indian Army from 1941-45 and held appointments in the India Office from 1946-47. In 1948 Sir Bernard joined the Diplomatic Service, in which he had a distinguished career in many posts including the USA, Afghanistan, Berlin and Paris, where he was Minister from 1965-69. From 1969-72 he was British Ambassador to Finland after which he became Ambassador to Israel until his retirement at the end of 1975. He became Chairman of the United Kingdom Committee for UNICEF in May, 1976.

