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I THE STATE OF THE WORLD'S CHILDREN 1987

Capacity and morality

We now have the knowledge to enable parents to protect child health at very low cost. And we now have the capacity to communicate that knowledge to the majority. The time has therefore come to decide that it is just as unacceptable for so many millions of children to die every year of needless malnutrition and infection as it is for them to die in the sudden emergencies of drought or famine.

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A new attack on poverty

Despite. economic recession, progress can still be maintained if the great aims of human development are broken down into achievable goals and if governments decide to mobilize existing capacity – and especially the new capacity for communications – to put relevant knowledge at the disposal of all.

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Mobilizing all for child health

A summary of the scientific information which could enable parents to protect the lives and normal growth of their children at a cost which both they and their nations can afford. All families now have a right to be empowered with such knowledge by means of every possible channel.

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The take-off of ORT

The 1980s effort to put knowledge of oral rehydration therapy (ORT) at the disposal of the majority is now estimated to be saving the lives of half a million children each year. By 1995, the number of young lives saved each year could surpass 3 million.

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Towards universal immunization

The spread of low-cost immunization in the 1980s is already preventing approximately 1 million child deaths a year in the developing world. Seventy-seven nations, with over 90% of the developing world's births, have now committed themselves to the target of universal immunization by 1990.

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Social mobilization and continuity

Social mobilization to achieve specific health goals can be a practical way of moving towards permanent and comprehensive primary health care – if this is planned for in advance.

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Going for growth

With the spread of primary health care, it is now becoming possible to regularly monitor the growth of the majority of children in the developing world. Growth-checking, along with low-cost child protection methods, can inform and involve parents in using today's knowledge to protect the normal health and growth of children.

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Conclusions

The strategy of social mobilization means that almost every individual and organization, in both industrialized and developing nations, could now become involved in the task of reaching one of the greatest milestones in the human story—the overcoming of the worst effects of absolute poverty on our planet in our times.

II THE RECESSION

Adjustment with a human face

The worst economic recession for fifty years has lowered living standards in many parts of the world during the 1980s. To try to restore growth and cope with balance-of-payments crises, a large number of developing countries have been forced to adopt economic adjustment policies—often involving further hardships for the poorest sections of the community, who have the least scope for making economies. This chapter, a summary of a special report to be issued by UNICEF in 1987, makes proposals to both industrialized and developing countries for an alternative adjustment strategy—aimed at restoring economic growth while at the same time protecting the growing minds and bodies of the next generation.

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III FORTY YEARS OF PROGRESS

The human factor

To mark the fortieth anniversary of the founding of UNICEF, Varindra T. Vittachi surveys the main changes in the state of the world's children, and in the work of UNICEF, over these last four decades.

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Graphic panels

A graphic presentation of the state of the world's children in 1986 and of the progress made since 1946. Thirty specially researched colour charts summarize past changes and today's facts on child population, births and deaths; life expectancy; food availability; school enrolment; literacy; water supply and sanitation; the availability of maternal and child health care; the incidence of low birth-weight and maternal death; the spread of oral rehydration therapy; the progress of immunization; the prevalence of breast-feeding; the relationship between birth spacing and child survival; the extent of anaemia and iodine deficiency; the proportion of families living in poverty; and the relationships between health and wealth.

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IV STATISTICS

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