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362.7  
A265

CHILD CARE

UNITED STATES ECONOMIC ASSISTANCE TO VIET NAM, 1954-1975

VIET NAM TERMINAL REPORT

PREPARED BY THE ASIA BUREAU

AGENCY FOR INTERNATIONAL DEVELOPMENT

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SECOND DRAFT

HUMANITARIAN ASSISTANCE  
CHILD CARE

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As a result of mounting concern at the disruption of family life, an increase in child abandonment resulting from the war and the inadequacy of child care institutions to cope with a rising orphan population, the U.S. Congress in its FY 74 Foreign Assistance program earmarked at least \$5 million for child care in South Vietnam. The USAID project which resulted totalled \$7.5 million and an additional \$10 million was budgeted for similar purpose in FY 75.

Several factors led up to the Congressional action in earmarking the funds for child care. There was a Mission to Saigon in 1971 which reported most poignantly on the situation of children and recommended action in which the U. S. should make an important contribution. This was followed in 1973 by a second report by the Senate Judiciary Sub-committee dealing with Refugees and Escapees, particularly in testimony given before the Committee by Dr. James Dumpson and Mr. Wells Klein. Another contributing factor was the deterioration of the South Vietnamese economy following the cease-fire and the departure of the American troops. This led to unemployment particularly in Saigon and other cities and to some increase in child abandonment as a result. Also, while American troops were in Vietnam, many contributed both in cash, materials and services to help different orphanages. The orphanages counted on this support from the GIs and missed it very greatly after their departure.

To have a better realization of just what was involved in child care needs in South Vietnam one should bear in mind that of a total population of almost 18 million about half are under the age of 15, that is about 9 million children. Of this child population the Government of South Vietnam estimated that about 680,000 were orphans, that is, they had lost one or both parents. However, the overwhelming majority of these children, an estimated 855,000, were living with their surviving parents or with relatives who took over the child under the extended family system.

Thus only 25,000 were actually living in orphanages, 5,000 in non-registered orphanages and 20,000 in orphanages receiving assistance from the Government of Vietnam. Of the children in government-assisted orphanages, about half had relatives who maintained some contact with the child and visited the orphanage. These children, therefore, were generally not adoptable. Of the remaining 10,000, about half lived in orphanages which do not allow adoptions. This leaves some 5,000 in the adoptable category, and even of these, some were not adoptable either because due to their age or illness or handicaps they were difficult to place, so we come down to a group of about 3 to 4,000 who were considered adoptable.

There was much in the American press and in a television film called "Sins of the Fathers" about the large numbers of children in Vietnam who have American fathers. No one knows for certain

how many of these children had American GI fathers or fathers of other allies, such as the Australians, who were helping the Vietnamese. The estimate is that the figure did not exceed 25,000. A survey conducted in 1974, however, revealed that the vast majority of these mixed blood children were living with their mothers or other relatives. Only 770 among the 20,000 children living in orphanages could be classed as "abandoned". Of these an estimated 500 had white fathers and 276 had Black American fathers.

Prior to the signing of the Child Care Project and Grant Agreements in Fiscal Year 1974, there was no discrete child care program per se supported by AID. This is not to suggest, however, that AID had ignored the well-being of children prior to that time. Indeed, since just over 50% of the population of South Vietnam during the entire period of AID's economic assistance program, was composed of persons under 15 years of age, one can logically assert that children were the direct or indirect beneficiaries of at least half of our total program throughout those years. While children tended to be the indirect beneficiaries of the bulk of this program. At least as early as 1966 (see Saigon 11681 dated November 26, 1966) the USAID had begun to define the special needs of children and to suggest how these needs might best be met. During the 1960's the GVN (with AID assistance) also embarked on major programs expanding health care and education on a massive scale (see preceding Sector narratives on Public Health and Education

Over the next six years the GVN with USAID assistance began to undertake increasingly more child welfare activities under the aegis of, first, the Social Welfare project, and, subsequently the War Victims Relief and Rehabilitation -project. Largely confined during 1968 to orphanage support, a small day-care center effort and a PL480 Title II children and widows feeding program, the range of these activities was expanded in later years to include, for example: Family Assistance for Widows and Orphans; Adoptions (initially only

for Racially Mixed Children); Family Service (to prevent infant aid to abandonment);/Handicapped Children; A Pilot Social Services Referral Center; subsidies for Foster Parents; and a Center for Plastic and Reconstructive Surgery (for children - see preceding PH Sector narrative). During this same/period the level of effort in orphanage support, day-care centers and PL 480 feeding was gradually increased; and the number of PVOs receiving AID support for non-PL 480 child care activities increased from one to nine. The PL 480 feeding program registered the greatest increase in numbers of persons benefited during this period. The following table provides an indication of the rate of increase in this particular program for selected years:

<u>Category of Recipients</u>	<u>Number of Recipients</u>		
	<u>CY 1969</u>	<u>CY 1972</u>	<u>CY 1973</u>
School Lunch	211,500	595,000	1,200,000
Widows and Orphans	250,000	-	-
Orphans	-	-	19,000
Day Care Centers	-	-	14,000
Maternal Child Health	-	450	10,000
Other Child Feeding (War Victims, Montaguards & Day Care)	-	480,566	-
TOTALS	<u>461,500</u>	<u>1,076,016</u>	<u>1,243,000</u>

During the last half of CY 1973, all of the on-going child care activities being undertaken as a part of the War Victims project were greatly increased with greater reliance being placed

on PVOs to serve as action agents in implementing many of these activities. In addition, a follow-on, three-year child care project per se was presented to the GVN and AID for approval. This project again expanded both the range and the level of child care activities, provided a framework for coordinating them, and suggested the relative priorities to be accorded each.

Since virtually all of the activities proposed under the child care project in FY 1975 were, in fact, initiated under the War Victims project in FY 1974, the essential features of the Child Care project per se are indicative of what was undertaken in FY 1974. An abstract of the Child Care project description taken from the USAID's Field Budget Submission dated December, 1973 outlines these features:

"The principal thrust of the child care program will be to prevent child neglect, child abandonment or placement of children in orphanages by offering alternatives to economically pressed families, while at the same time improving the health, nutrition, and general well being of orphans and upgrading the facilities and management of orphanages. To the extent practicable the various project activities will be administered under the auspices of private voluntary agencies. The child care project also will include special programs for handicapped children, pediatric care and training, and assistance to volags concerned with inter-country adoption. The following programs are designed to support this general purpose.

A. Prevention of Child Neglect and Abandonment

1. Day care centers for the benefit of children of working mothers. This activity will provide equipment, food allowances and staff training to 275 existing centers and 190 new centers. A planned total of some 88,000 children will be helped.

2. The foster care program will be expanded to reach a total of 4,500 children. Foster families will be provided funds to cover food, clothing and medical expenses for each child.

3. Home nursery assistance will be given to homes providing care to children of pre-day care center age. It is planned that this program will reach 9,500 children.

4. Nutrition support to seriously malnourished children will be provided by expanding three existing nutrition centers and establishing nine additional centers capable of caring for some 7,800 children.

5. Subsidies and counselling services will be provided to mothers in an attempt to prevent infant abandonment. A case load of 1,200 mothers and infants is planned.

B. Assistance to Orphans and Orphanages

It is recognized that for some children there is no alternative to the orphanages. Therefore, assistance to orphans and orphanage improvement is given emphasis in the child care program. Assistance in the form of food and clothing allowances, health care, equipment, improvement of facilities and staff training will be provided to 130 institutions caring for some 20,000 children.

C. Programs Serving Special Groups or Needs

1. Handicapped children will receive improved custodial care and therapy. This assistance will be provided to some 2,000 children undergoing care in seven centers.

2. Pediatric clinics will be established. With a grant provided by USAID, the International Rescue Committee will establish and administer a pediatric intensive care unit in the Saigon area. This became a contract with IRC. This unit will serve mainly those children being processed for adoption; however, other children will be cared for.

Two additional units in other cities of Vietnam are planned. It is estimated that a total of 1,200 children will be assisted.

3. Inter-country adoption programs will be assisted through grants to two agencies (International Social Service and Holt). Grants were given to two additional agencies, Catholic Relief Services and Friends for All Children. They will use these grants to expand and improve their inter-country adoption programs and related child welfare activities.

4. MSW programs, including assistance, to 25,000 children through their widowed mothers and training of child welfare workers will be supported.

5. Improved pediatric care and coverage will be achieved through providing special in-country pediatric training for midwives."

If the Ministry of Welfare had had more trained and capable people, the bulk of the funds provided for the child welfare program would have been channelled to and through the Ministry. However, in agreement with the Minister of Welfare, it was decided that 2/3rds of the funds in the 1974 program would instead be channelled through American voluntary agencies in Vietnam and the USAID proceeded to make grant agreements with nine of these agencies to implement various aspects of the package. For example, Catholic Relief Services was charged with the program for the improvement of orphanages, CARE was given responsibility for the improvement of existing day care centers and the creation of new centers, the HOLT Children's Service undertook family assistance programs and so on. About 1/3 of the \$7.5 million made available in FY 74 was channelled to the Ministry of Welfare and Ministry of Health for child welfare and health programs.

It took some time to develop grant agreements with the voluntary agencies but most of these programs were well underway when the fall of Saigon came. Of course only a brief start was made on the obligation of the \$10 million provided for Care activities in fiscal year 1975. Had this program been realized, a larger share of the money available would have been granted to the Ministry of Welfare and Ministry of Health. It is tragic that more could not have been accomplished but a good start was made and hopefully some of the reforms introduced will be carried on under the new regime.

Much of the interest in the Welfare of Vietnamese children was based on simple humanitarian concern for disadvantaged children. But it cannot be denied that a certain measure of that interest came from couples seeking to adopt a child. The number of such prospective parents far outweighs the number of children available in the U.S. particularly in the infant age group. Some children in Korea and other overseas countries are available for adoption but the supply has been dwindling. When those seeking children heard about the number and plight of orphans in Vietnam they naturally concluded that they might have an opportunity to adopt some. Now adoption is not a common practice in Vietnam. There is an adoption law, but it is primarily for purposes of inheritance and married couples cannot adopt a child unless they are at least 35 years of age or older and have no other children. The policy of the Government has always been that the best solution for a child is in its

own country. Nevertheless, seven American voluntary agencies with experience in overseas adoption matters were licensed by the Vietnamese Ministry of Welfare for several years prior to the Government's fall there had been a flow of children for adoption in the United States and other countries. The total rose steadily until during 1974 it reached 13-- children. Adoption is a complicated process requiring a careful case study and analysis of the child, a medical examination and often medical and nutritional buildup so that the child can qualify for adoption. At the same time there has to be an approved home study in the United States, including scouting of the family wishing to adopt a child. All of this is a time-consuming process, and as it became clearer that the Government of Vietnam might fall, the adoption agencies concerned, the adoptive parents in the United States, the Hill, the press and others brought pressure to bear to accelerate the movement to the U.S. of children already in the adoption pipeline. This was the rationale for Operation Babylift, which is described in another report produced by the Agency for International Development. Some 2600 children were moved to the United States of whom 2,000 remained in this country and about 600 went on to other countries (mostly to Canada and Western European countries).

It has been earlier noted that 276 of the children available for adoption were of Black GI fathers. The Black community in the United States was concerned because most of the part-black children being adopted through the sponsorship of the seven agencies in Vietnam were going to white American homes. As a result the Interagency

Committee for Adoption from Vietnam (known as IVAC was formed to stimulate home finding among the Black population, to work with the Black social service agencies throughout the country, and to help the American agencies in Vietnam to accomplish more placements in Black homes. IVAC received a grant from AID toward its administration costs and a program grant from the Health, Education and Welfare Department toward the home finding expenses.

The General Secretary of IVAC visited Vietnam in January 1975 at the time of the International Conference on Children and Development, and consulted with the various agencies, visited orphanages, talked with Vietnamese and USAID OFFICIALS and then returned to the United States to launch the program. Unfortunately, it was late in the game, and although IVAC succeeded in stimulating awareness in the Black community through its journals, churches, lodges, social clubs and groups and did manage to locate a number of additional homes it was really too late for home studies to be made and for the agencies to make use of these before Saigon fell. IVAC never became a legal entity. The grants from AID and HEW which went to support it were channelled through Traveler's Aid-International Social Services of America, one of the seven voluntary agencies licensed for adoption by the Vietnamese Government. About 17 placements in Black homes were achieved through IVAC home finding efforts.

The International Children's Conference mentioned in the preceding paragraph was a first class effort on the part of the Minister of Welfare and his staff to bring together all elements in Vietnam

concerned with the health, education and welfare of Vietnamese children. Over a thousand persons from all parts of Vietnam attended, as well as over 100 international agency, USAID and voluntary agency representatives attendance included citizens of over 25 countries.

The papers presented at this conference and also the resolutions which came out of it and the transcripts of some of the important meetings are an extremely valuable resource because they tell probably better than anything else the mood and temper of the Vietnamese in relation to problems in the child care field, including the orphanage question, foster care, day care, juvenile delinquency and adoption. The sessions on adoption were especially lively. In one case a Buddhist nun said she would rather see a child dead than leave Vietnam. Others, however, thought more reasonably, and the conclusion was that while overseas adoption was certainly not a preferred solution, it was nevertheless an alternative that should be kept in mind if there was no adequate way to care for a child in its own home in Vietnam and overseas adoption appeared to be in the best interest of the child. It is interesting to note that the voluntary agencies which specialized in adoption found themselves involved increasingly in family assistance and other programs designed to discourage child abandonment and help find alternatives within the country for the child. Many were successful in discouraging mothers from child abandonment. Many lives were saved in the halfway houses. It should be borne in mind that often

the sickest and most neglected children were brought to these adoption agencies as a last resort.

The strong American interest in adoptions tended at times to obscure the very real needs for child welfare in Vietnam. As John and Jean Thomas put it in a report that they wrote in 1974 "we must not let the tail of adoption wag the dog of child welfare". Under the child welfare program that was adopted, AID did provide grants to the four of the leading adoption agencies but this help was primarily to assist them in maintaining halfway houses in Vietnam where they could provide interim care to undernourished children while their adoption was being processed. Some of these children in fact were never adopted and remain in Vietnam. In its 1974 legislation Congress wisely decreed that no more than 10% of the funds provided for child welfare should be applied to adoption work. The remainder should be used to help children within Vietnam. This, in fact, was reflected in the budgeting for the child care program and in the segments of the program undertaken by the PVO grantees as well as the two GVN ministries concerned.

An indication of the relative priority attached to each of the activities undertaken in FY 1974 and proposed for FY 75 is provided by the dollar funding tables which follow. It should be noted that the effective dates shown on the FY 1974 funding table reflect the dates on which the Grant or Contract Agreements were signed, in the case of the PVOs. The dates on which the activities were actually initiated either coincided with the signature date or followed thereafter.

**ALLOCATION OF FUNDS**

<u>PROJECT</u>	<u>AGENCY</u>	<u>FUNDS</u>	<u>DATE EFFECTIVE</u>
* Intercountry Adoption and Related Child Care Services	Traveler's Aid-International Social Services of America.	224,000.00	11/01/73
	Holt International Children's Service	225,000.00	04/25/74
	Catholic Relief Services	143,000.00	06/01/74
	Friends for All Children	100,000.00	06/01/74
	Interagency Vietnamese Adoption Committee	24,200.00	03/06/74
Orphanage Support and Improvement	--do--	90,000.00	05/15/74
	Catholic Relief Services	25,000.00	01/31/74
Supplementary Rice Allowance for Orphanages	--do--	1,355,000.00	04/15/74
Medical Care for Selected Orphanages	Ministry of Social Welfare	134,579.43	02/20/74
Day Care Centers	Ministry of Social Welfare	53,883.83	06/28/74
Pediatric Clinics	Cooperative for American Relief Everywhere	1,180,000.00	04/15/74
	International Rescue Committee	234,187.00	12/16/73
Family Assistance and Foster Care	World Relief Commission	28,467.74	06/15/74
	Holt International Children's Service	500,000.00	06/01/74
Home Nurseries	Catholic Relief Services	417,000.00	06/01/74
	World Vision Relief Organization	200,000.00	06/01/74
Nutrition Centers	Catholic Relief Services	410,000.00	06/01/74
	World Vision Relief Organization	200,000.00	06/01/74
Prevention of Infant Abandonment	Catholic Relief Services	25,000.00	06/01/74
Handicapped Children	Ministry of Social Welfare	200,000.00	06/28/74
CVN's General Child Care Program	Ministry of Social Welfare	1,177,580.00	01/01/74
Child Health Services	Ministry of Health	324,000.00	06/26/74
Three Personal Services Contracts	USAID	16,552.00	11/15/73
		32,750.00	05/22/74
		24,000.00	09/01/74
Technical Assistance	USAID Personnel	118,000.00	07/01/74
		<u>7,468,200.00</u>	

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Summary of FY 75 Child Care Program

A. <u>Project</u>	<u>Ministry of Social Welfare</u> (\$000)	<u>Voluntary Agencies</u> (\$000)	<u>Total</u> (\$000)
Adoption		1,000	1,000
Day Care	450	1,180	1,630
Nutrition		610	610
Nurseries		450	450
Family Assistance	700	700	1,400
Orphanages	450	1,000	1,450
Family Service*	150	100	250
Handicapped Children (MOH)**	450		450
Medical Support/ Orphanages (MOH)**	100		100
Youth	300	300	600
Information and Referral	200		200
Child Health (MOH)**	795		795
Misc. Program Support		321	321
Sub-Totals	3,595	5,661	9,256
B. <u>Other Costs</u>			
USAID Personnel			127
Contract Services			589
Participants			20
Commodities (Milk)			8
Sub-Totals			744
TOTAL (A + B)			\$10,000

\*Previously "Prevention of Infant Abandonment"  
 \*\*Ministry of Health

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ATTACHMENT A

(2)

REFUGEE AND SOCIAL WELFARE FUNDING SUMMARY

In Millions of US Dollars (FY)

	<u>FY 1968</u>	<u>FY 1969</u>	<u>FY 1970</u>	<u>FY 1971</u>	<u>FY 1972</u>	<u>FY 1973</u>	<u>FY 1974</u>
AID Budget (Obligations)	9.4	7.1	5.8	3.8	2.4	31.0	85.0
PL-480 Title II (as programmed)	33.2	38.6	39.4	10.0	4.7	7.8	0.6
US Vol Agencies (Est.)	22.4	25.9	22.4	19.4	16.8	19.4	19.4
Other Donors (Est.)	<u>3.1</u>						
TOTAL	68.2	74.7	70.7	36.3	27.0	61.3	108.1



**ATTACHMENT B**

*Attachment B  
Table 1*

*Return to Unemployment*  
**REFUGEE REGISTRATION AND RESETTLEMENT PROGRAMS (1964-1975)**

*1964-1975*

Year:	Newly registered refugees	Registrants returned home	Registrants resettled	Refugees on 30th June 1975 of year
1964	1 620 000	2 375 000	2 517 000	810 000
1965	426 000	2 315 000	2 172 000	728 000
1966	491 000	2 200 000	2 173 000	1 320 000
1967	572 000	2 183 000	2 422 000	2 620 000
1968	120 000	2 338 000	2 187 000	187 000
1969	228 000	2 274 000	2 127 000	24 000
1970	126 000	2 210 000	2 121 000	672 000
1971	65 000	2 354 000	2 113 000	223 000
1972	447 000	2 545 000	2 557 000	172 000
1973				641 000
1974				
1975				

*Several times*

- \* A single refugee may be taken more than 1 column on for several times
- \* Without aid
- \* With GVN assistance
- \* Paid all RV's along way
- \* Surveys registered and 1 month free insurance
- \* Paid all resettlement expenses
- \* With cost funds for RV program
- \* Large number of the estimated 1.37 million people forced to leave their homes at some time during 1972 were not officially registered. They were, however, included in a set of official GVN temporary files, the normal criteria for registration, but not for the normal program.
- \* Most of them
- \* Registered refugees through Aug. 31, 1975

**Best Available Document**

ATTACHMENT C

WAR VICTIM CASUALTY  
AND  
PROPERTY DAMAGE CLAIMANTS

1968-1975 (1)

	<u>Casualty Claimants</u>	<u>Property Damage Claimants</u>	<u>Total</u>
1968	60,000	1,010,000	1,070,000
1969	14,000	336,000	350,000
1970	13,000	185,000	198,000
1971	10,000	154,000	164,000
1972	16,700	300,000	316,700
1973	6,300	484,200	490,500
1974	3,800	173,800	179,600
1975 (2)	<u>unknown</u>	<u>unknown</u>	<u>unknown</u>
TOTALS	123,800	2,643,000	2,768,800

(1) Included under refugee programs in prior years.

(2) Quarterly statistical report not received because of emergency situation beginning in March.

ATTACHMENT D

OTHER DONOR HUMANITARIAN ASSISTANCE (PART I)

1. Following the ceasefire in January 1973, twelve nations other than the United States contributed to the resettlement and rehabilitation of refugees, according to a list obtained from the GVN Directorate General for Land Development and Hamlet Building. The countries and their contributions, with the equivalent dollar or piaster value where available are:
  - A. Japan. Equivalent of U.S. \$20 million in commodities, primarily 30,000 wooden houses, 1,000 steel frame houses; 4,200 prefabricated houses; 200,000 shovels; 200,000 hoes; 50,000 hand saws; 50,000 axes; 300 tractors; and U.S. \$1.942 million in drugs.
  - B. Republic of the Philippines. Equivalent of U.S. \$10,000 to purchase 10 steel frames for public buildings in Quang Tri.
  - C. Republic of China. 20,000 sets of farm tools; 10,000 kg of vegetable seeds and fertilizers; 15 tractors; 15 pumps; 10 insecticide sprayers; and 2,488 cartons of drugs.
  - D. Republic of Koreas. 10,000 tons of cement; 24,992 blankets; and U.S. \$1 million worth of drugs.
  - E. Denmark. 369,874 roofing sheets. U.S. \$1 million worth of roofing sheets given through UNICEF.
  - F. West Germany. 507,027 kg of corrugated iron sheets.
  - G. Great Britain. 5 steel frames for building a temporary hospital in Quang Tri; 1,623 kg of vegetable seeds and fertilizers for flood victims; and 3,000 blankets for Montagnard refugees resettled in Lam Dong.
  - H. Canada. 42,057 cartons of canned fish.
  - I. France. VN\$1.18 billion for the purchase of farm tools, tractors, and drugs.
  - J. Australia. 109,000 roofing sheets plus clothes and nylon fabrics for mosquito nets.
  - K. Laos. U.S.\$ 4,266.
  - L. New Zealand. VN\$ 65 million for rebuilding Bong Son Hospital.
2. International organization contributions listed by LDHB are:
  - A. UNICEF. 250 tents and plastic rolls; VN\$ 151 million to buy 101 steel frame houses; and VN\$ 94.9 million to repair schools in Thua Thien,

Quang Nam and Quang Ngai provinces. The following projects were approved in principle by UNICEF and piaster figures are estimated: VN\$ 160 million for a vocational training center in Quang Tri; VN\$ 1.815 billion to establish a potable water system for 25 resettlement sites; VN\$ 250 million for a Vietnamese Classic Art Training Center in Thua Thien; and VN\$ 200 million for an integrated program of child welfare in Quang Tri.

B. United Nations High Commissioner for Refugees. U.S.\$ 200,000 to assist Khmer refugees in South Viet Nam.

C. World Food Program. Proposed food-for-work project distributing VN\$ 300 million worth of food to compensate resettlers for 320,000 man-days of repairing dikes and dredging canals in Quang Tri.

D. Indochina Operations Group of International Red Cross VN\$ 500 million in cash and in commodities, primarily to reconstruct schools and clinics in Quang Tri, build a clinic in Song Pha Resettlement Center and aid flood victims and Khmer refugees.

3. Foreign voluntary agency contributions are:

A. Japanese Red Cross. 193,289 roofing sheets.

B. The Maltese Aid Service. Services to two experts for supervising the building of Hai Lang City, and construction of Hoa Minh village for 2,100 war refugees.

C. Free Swedish Church. VN\$ 55 million for Ninh Thuan resettlement sites.

4. Because there is no central clearing house for contributions and because funds or commodities are sometimes given to individual projects through international agencies, or directly to Vietnamese groups, it is likely that additional countries or organizations made contributions and that those mentioned above contributed other items as well. Of course, many U.S. voluntary agencies also provided large amounts of humanitarian assistance to a wide variety of programs throughout South Viet Nam.

## OTHER DONOR HUMANITARIAN ASSISTANCE (PART II)

1. Many ~~other~~ countries, foreign voluntary agencies and international organizations have provided humanitarian assistance to South Viet Nam over the years and have made an important impact on the areas and people they have served, whether through small commodity donations or major programs such as the building and equipping of schools and hospitals. The need for humanitarian aid is so great that Viet Nam can easily and usefully absorb contributions from many areas without being oversupplied. Country by country, project by project assessments of objectives and accomplishments in various project categories are not now available and could not be compiled without prohibitive expense of time and manpower. Information provided in Part I and this paper details the data readily available from a number of sources.
2. For a number of reasons, it is impossible to accurately categorize projects, determine exact dollar equivalents of funds and commodities, or describe all of the projects undertaken through "other donor" assistance because:
  - A. There was no central clearing house for full information on "other donor" aid.
  - B. Scattered data collected by one office or another in either the GVN or USAID was sometimes contradictory and always subject to omission.
  - C. Countries often gave aid through international organizations or a consortium. Some of these donations were then double-counted, once by the country and once by the organization, in some assistance compilations and left out entirely by others.
  - D. Overlap in the type of assistance provided sometimes leads to confusion or double-counting in categorization of projects--for example, the provision of medicines to refugees could easily come under the topic headings of either health or refugee relief.
  - E. Donations were sometimes assigned a dollar equivalent by the contributor, other times by the recipient, and still other times by various offices charged with describing assistance given.
3. Data provided in Part I covers refugee relief and resettlement aid for the Ministry of Social Welfare as well as the Directorate General for Land Development and Hamlet Building.
4. The following "humanitarian assistance" columns appear in a chart on bilateral assistance in the GVN's "Annual Statistical Report of South Viet Nam, 1973." The chart gives no descriptive information on activities undertaken, and provides no indication as to whether they are long-range or emergency. It merely lists topic headings and estimated dollar equivalents of goods and cash provided. There is undoubtedly some overlapping between categories. Some discrepancies between the chart, the information given in Part I, and the health information provided in paragraph 5., below, are readily apparent. A few examples: part of the \$20 million Japan officially agreed in 1974 to give for refugee relief and resettlement was actually provided in 1973; the GVN chart shows no health contribution from the United Kingdom, yet that nation is listed in paragraph 5 as providing 35,000 doses

of measles vaccine. At any rate, the chart shows the following aid given in calendar year 1973:

	<u>Health</u>	<u>Education</u>	<u>Refugees and Relief</u>	<u>Social Welfare</u>
Australia	\$ 249,000	-	\$ 173,000	-
Canada	1,534,000	-	408,000	-
China	100,000	-	300,000	\$ 230,000
France	200,00	\$4,968,000	-	-
Germany	3,440,000	-	4,308,000	685,000
Japan	4,086,000	216,000	-	1,002,000
Korea	2,923,000	-	926,000	-
Netherlands	-	161,000	-	-
New Zealand	462,000	-	71,000	237,000
Sweden	-	-	301,000	-
United Kingdom	-	114,000	41,000	321,000

5. In addition to the other donor assistance input mentioned in Part I, the following countries/organizations contributed money, equipment, etc. to the GVN Health Sector during CY 1973:

A. England - 35,000 doses of measles vaccine valued at 10,000 pounds sterling. This was a one time donation for immediate needs.

B. Korea - Construction was completed on the 500-bed hospital in Saigon (Cho Quan). Korea previously donated over \$US 2 million for this project.

Korea also dispatched ten physicians for short-term assignments to Ministry of Health hospitals in Saigon, Danang, Vung Tau, Bien Hoa and Can Tho.

C. Canada. Funded construction (over US\$ 1 million) of the Public Health Field Training Center in Long Xuyen. This long-term project provided a facility for field training of Public Health Assistant Technicians from the National Institute of Public Health. A Canadian advisor was also assigned to this facility.

Other donations - 1,200 metric tons of milk powder for the Maternal/Child Health program valued at 750,000 Canadian dollars; C\$700,000 worth of drugs for civilian casualties; vaccines; 256,000 doses of DT 400,000 polio and 1,800,000 DPT.

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D. Japan - Construction continued on the new Cho Ray Hospital in Saigon. Approximately 288 million yen were programmed for purchase of equipment for this facility.

Japan has also continued their neurosurgery program at Cho Ray consisting of one physician and one x-ray technician.

Twenty scholarships in nursing service and two for x-ray technicians were also offered.

E. New Zealand - Constructed an out-patient dispensary in Gia Dinh province; a nurses' dormitory at the nursing school in Binh Dinh; supplied 514 pounds of dental supplies for the Dental Technician School in Saigon; donated four ambulance boats; and supplied \$12,000 of medical equipment.

The eight member surgical team continued their efforts at the Binh Dinh Province Hospital. They made a significant input to the surgical capability at this hospital. They remained in place for more than ten years.

Scholarships in the following fields were offered: 1 in ophthalmology; 4 for dental technicians; 2 in nursing; and 2 in health inspection (sanitation).

F. Switzerland - Donated ten clinicmobiles valued at \$366,670. These vehicles arrived in Vietnam in February 1974.

G. Australia - Constructed an out-patient facility in District 8, Saigon, valued at VN\$ 112 million. (Funded in 1972.) A neurosurgical technician was assigned to Cho Ray Hospital as an advisor. Fifteen scholarships for in-service training were offered.

H. German Initiative Assistance Overseas - Began Phase I construction (15 million piasters) of a new children's out-patient dispensary at Quang Tin Province Hospital.

I. Denmark/Vietnam Association - Supplied US\$ 15,000 worth of medical equipment and supplies for hospitals.

J. Swiss Red Cross - Four sets of equipment (unknown composition) and incubators for the Danang Hospital.

K. Vietnamese Red Cross - 500 beds for planned hospitals in Bien Hoa, Can Tho and Ninh Thuan.

L. Maltese Aid Service - Continued operation of the German-Viet Nam Hospital in Danang. They planned to continue support at this facility for two more years (thru CY 76) at an expected cost of about five million dollars. Their advisory assistance at this facility was significant.

The following projects have been confirmed for CY 74:

A. Canada - 453,000 pounds of powdered milk and 1,750 pounds of skim milk powder.

B. United Nations Development Program - \$7,500 for short-term consultant

in drug quality control; one expert for advisory services in Social Development Planning (\$60,000) and one scholarship in that field (\$2,350). In anticipation of World Health Organization support of the malaria control program, UNDP has budgeted \$245,000 for this project. It will fund three advisors, 12 man-months of training and \$16,000 worth of equipment/supplies. A total of \$182,000 has been programmed for Environmental Sanitation improvements (water supplies and sewage and pollution control). This will include four advisors, equipment and scholarship. UNDP programs could have a significant impact on MOH development. However, at this time an evaluation is not possible.

6. The following "other national" or international voluntary agencies were involved in social welfare and other activities in Vietnam:

A. Community Development Foundation/Save the Children Foundation - Supported community development and self-help projects for refugees and indigent families; administered U.S. sponsored scholarships for needy children; and aided in the reconstruction of war-damaged school and homes.

B. German Initiative Assistance Overseas - Operated an orphanage and a Montagnard boarding school in Quang Tin; provided medical care for refugees and inmates of detention centers in the province.

C. Institute for International Solidarity - Provided social and youth activities and medical services at eight social centers in My Tho, Go Vap, Binh Duong, Bien Hoa, Gia Dinh and Saigon; sponsored family planning courses; assisted vocational training programs in Tan Hoa and Thu Duc; operated a juvenile correction center at Thu Duc; provided subsidies to an orphanage in Saigon, a kindergarten in Quang Ngai City, and a day care center in Quang Ngai.

D. International Social Service - Provided family counseling; processed foreign and domestic adoptions; provided foster family care for orphans; and assisted in reuniting families with mixed nationalities.

E. League of Red Cross Societies - Provided subsidies and commodity support for the relief and medical activities of the Viet Nam Red Cross Society, benefitting refugees, the indigent, and victims of natural disasters.

F. Norwegian Missionary Alliance - Provided 60 homes, a school, a church, food and medical services for 360 lepers and their families at their village (Long Thanh, Bien Hoa Province) and also constructed 16 homes for refugees and a student hostel at Binh Tuy City.

G. The Ockenden Venture - Provided food, medical services, 60 houses, a school and a church for 360 lepers and their families at Thai Thien Village (Long Thanh, Bien Hoa Province) and also constructed 16 homes for refugees and a student hostel at Binh Tuy City.

H. OXFAM - Provided grants for orphanages, day centers, vocational training schools and medical facilities.

I. Save the Children Fund - Provided medical treatment and nursing for orphans and other children convalescing from injuries or illness; and sponsored child health training for mothers.

J. SOS Kinderdorf Viet Nam - Operated "Children Villages", (modern small unit orphanage complexes), in Go Vap (Gia Dinh) and Dalat.

K. Terre des Hommes/Germany - Provided subsidies for orphanages and medical facilities, particularly the Minh Quy Hospital in Kontum.

L. World Alliance of DMCA, Viet Nam - Promoted youth activities and leadership training programs; community service projects and seminars; nutrition and self-help projects for refugees; vocational training; literacy programs and reading rooms.

7. Additional humanitarian assistance information from international organizations showed:

A. UNICEF - Contributions totaling \$791,000 in 1973 and planned for a greatly expanded program in 1974 and 1975. The program was directed toward the continuation and expansion of health services; aid to orphanages, day care centers, handicapped children's centers and the National School of Social Work; provision of water and sanitation facilities to rural maternities and primary schools; school equipment, medicines and food for refugees; emergency assistance to flood victims. UNICEF project proposals by category for 1973, 1974 and 1975 were:

	<u>1973</u>	<u>1974</u>	<u>1975</u>
Health	523,000	492,000	900,000
Education	4,000	1,890,000	1,927,000
Water Supply	-	1,380,000	2,060,000
Selected Services (social welfare, nutrition, rehabilitation)	190,000	150,000	300,000
Emergencies (relief and resettlement, etc.)	<u>68,000</u>	<u>500,000</u>	<u>900,000</u>
TOTAL	785,000	4,412,000	6,087,000

B. COREV - Cooperation to the Reconstruction of Viet Nam. funded by Catholic groups in many parts of the world, took resettlement and return-to-village as its top priority project, with other projects involving rural development, handicrafts, schools, dispensaries, emergency relief, aid to the handicapped and to prisoners, and many more. COREV committed \$5.2 million to a wide variety of projects from January 1, 1973.

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and improve their inter-country adoption programs and related child welfare activities.

4. MSW programs, including assistance to 25,000 children through their widowed mothers and training of child welfare workers will be supported.

5. Improved pediatric care and coverage will be achieved through providing special in-country pediatric training for midwives."

*Inserts B*  
*(C) + (D)*

An indication of the relative priority attached to each of the activities undertaken in FY 1974 and proposed for FY 1975 is provided by the dollar funding tables which follow. It should be noted that the effective dates shown on the FY 1974 funding table reflect the dates on which the Project Agreements were signed, in the case of Ministry of Social Welfare and the Ministry of Health, and the dates on which the Grant or Contract Agreements were signed, in the case of the PVOs. The dates on which the activities were actually initiated either coincided with the signature date or followed thereafter.

*TL*