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SUMMARY OF AMERICAN ASSISTANCE TO PUBLIC HEALTH PROGRAM IN GREECE

ATHENS -- Following is the second in a series of weekly articles summarizing achievements of American ECA in various spheres of the national recovery effort in Greece. The series will cover most of the fields in which the United States has tried to assist Greece toward national self-sufficiency, from the end of World War II to the beginning of 1952. This article concerns the field of public health.

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The strong ties of friendship between average Americans and the people of Greece are particularly evident in the field of public health. For this is a phase of the Greek recovery effort where organized Marshall Plan assistance is by no means the whole story. Much of the help given to Greek public health represents the spontaneous sympathy of hundreds of thousands of individual Americans who gave what they could to ease the plight of the Greek people, in a direct and personal basis entirely apart from the taxes they paid to help general European recovery.

Greeks were airlifted in 1940 by the Greek's spirited defense against the Italian attack, and were delighted when the smaller Greek force hurled Mussolini's legions back into Albania. Public sympathy began simultaneously in all parts of the U.S. to collect food, clothing, medicines and money to aid the Greeks. In other nations, except perhaps those France, provided such direct and overwhelming responses among the ordinary people of the United States. The reason, of course, was simple. Both Greece and Italy, small but valiant, had hurled a courageous "NO" to the demands of a powerful and contemptuous neighbor, and then had beaten the bigger power to a standstill.

It was with a sickening sense of loss, therefore, that Americans reacted to the Nazi conquest of Greece. Assistance became impossible except through International Red Cross parcels which were sent by many Americans throughout the war, and which often were the margin of short existence for whole communities. A dear ashamed an American aid to Greece, and not even news came out, except delayed and incomplete reports of some of the worst atrocities.

But when Greece was liberated finally, in 1944, a great post-fatigue tide of sympathy was liberated also, across the length and breadth of the U.S. This personal emotional response found outlet in many ways. There was general public acceptance and support of U.S. relief work, with the U.S. assuming more than 70 per cent of the costs. There was increased backing for such long-established agencies as MCDA and WHO. And there was Greek War Relief...

The main active phase and leadership for this organization came naturally from Greek-Americans, and the various philanthropic bodies and associations such as JRF, which traced ancestral ties to Greece. But the response and

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membership was general, among Americans of all creeds and circumstances and national origins. Businessmen hedged their association for contributions. Housewives held parties to raise funds. And in the schools across the nation, millions of American children scrawled pennies they had intended to spend for candy and solemnly marched up to deposit the money in milk bottles labeled "Greek War Relief."

A large share of this money went for food and clothing to keep Greeks alive. But most of it went into public health. Throughout Greece today, in large cities and small towns, there are gleaming big hospitals and small neat clinics built with Greek War Relief funds, which are permanent monuments to the spontaneous outpouring of sympathy by millions of individual Americans to the people of Greece.

These accomplishments are important in several ways. In itself, because they are substantial. In results, because hundreds of Greeks are alive today who might have died without the care those hospitals and clinics provide. As a symbol, because they are eloquent of American good-will and because the Greeks have never forgotten this manifestation of friendship in the darkest hours.

And yet these accomplishments of private American help to Greece, substantial and important as they are, constitute only a fraction of the total public health achievements of American Aid. The basic job was accomplished under the Marshall Plan, with public funds administered by the American Mission and the Greek Government, according to principles evolved in centuries of U.S. public health activities, but modified by the realities of the Greek environment.

The situation of public health organization in Greece at the end of World War II was devastatingly simple. It was nonexistent. War and occupation had smashed flat the previous facilities for dealing with public health problems. The state apparatus, already primitive in forms of modern public health machinery, had been destroyed or parasitized. Medical men in every country seem to be stubborn nationalists, a situation unpleasing to occupation authorities and to quixical Rogers. So the doctors and nurses, including those in the service for hostages and "unsavable elements."

Public health administration was in chaos. Desperate Greeks, near death from various maladies, paid enormous black market prices for medicines which in some parts of the country were soaking in water. No one knew where, or could lay hands on, drugs or equipment which in many cases were surplus to Greek needs. In other cases, not one gram existed in the entire country of needed drugs received by aid. And everywhere Greeks suffered from diseases which western science had long ago defeated.

The basic equipment of any national public health program was lacking. Hospitals had been looted or destroyed. Equipment had been stolen or stolen. The medical schools were in pathetic shape, lacking equipment, staff, and students. Greek medical libraries had been sacked by greedy "specialists" who had calmly appropriated everything of value. Surgeons were undertaking critical operations with instruments which were the best available, but which a self-respecting carpenter would have disdained.
The staff of the public health division in the American Mission, when confronted with this situation, demanded that at least they were starting with a clean slate. And then they rolled up their sleeves and plunged into a complicated and taxing endeavor. They secured the nation to find Greek colleagues who would help them in a situation which everyone admitted was virtually hopeless. They found many men and women who worked day and night to restore Greek public health. They found some colleagues whose sense of humor extended to sarcasm, but whose action was swift and sure. As the work advanced, these "cygnets" were often to be found working longer hours than the second mistresses. And balancing both extremes were the rank and files of the Greek Sanitary Bureaucrats of Greece, who worked long hours, without illusions as to overnight successes, often mildly surprised at the amount of progress made.

The public health activities of American aid eventually affected almost every phase of Greek life. The major divisions encompassed: sanitary engineering, public health nursing, tuberculosis control, straightening out the medical supply situation, training of medical personnel, health education among the people, and an extensive program of preventive medicine.

The American Mission public health division included, at its peak in 1926, seven foreign service persons on the Marshall Plan payroll, and 10 commissioned officers of the U.S. Public Health Service, joined to the Mission under a technical assistance agreement whereby their salaries and living expenses were reimbursed to the U.S. Government. These Americans worked with the Ministry of Social Welfare, the Greek Government agency responsible for the medical care of 8,000,000 persons legally defined as "indigent" (nearly half the population of Greece), and for carrying on preventive health measures for the entire population.

PREVENTIVE MEDICINE. One of the major battles in public health had already been launched by the World Health Organization of the United Nations before the Marshall Plan's inception. This was a fight to the death against malaria, traditionally the great scourge of Mediterranean countries, and especially prevalent in Greece. Malaria has now been reduced to where it no longer is considered a major public health problem.

Marshall Plan sanitary engineers advised the Greek General Directorate for Hygiene in the campaign. Squads of men with spraying machines visited thousands of Greek homes annually to dress female mosquito netting. Spraying became not only a public service but also an effective and necessary element of the total campaign. The sanitary engineers also went to the source of trouble by spraying thousands of acres of swamps which had provided breeding grounds for malaria mosquitoes. Much of this work was accomplished by hand, but in addition great expanses were covered by airplane which sprayed DDT on areas that men on foot could never have reached.

SANITATION. A major assault was made simultaneously on another disease endemic in Greece, through $3,100,000 worth of sanitation equipment including chlorinators, disinfectors, pumps and water-drilling machinery imported with Marshall Plan aid. In hundreds of villages, poor water supplies had resulted in typhoid fever. This sanitation campaign achieved results out of all proportion to the money costs, since the villagers contributed from labor to install the pipes and pumps. Out of 735 communities scheduled to receive such equipment, 295 had completed their projects by 1951, and 118 others were in various stages of construction as the year ended. The projects ranged from minor
repairs in existing water or sewage systems, to projects which brought
water as much as three miles (five kilometers).

REHABILITATION. After a decade of warfare, in which four-white was a
normal factor during thousands of homes, and land races took their toll
among both soldiers and civilians, the number of refugees in Greece is
estimated now at about 2,800,000. The two sewerage-lab projects were
unable to cope with the need of these victims. Under the Marshall Plan
thousands of new-lab projects, manufacturing equipment has been
imported. Four Greek technicians were sent abroad for training in
production of artificial limbs, and British experts were brought to Greece
for consultation and service.

Disabled war veterans and crippled children also were aided through
a rehabilitation and vocational training program sponsored by the Marshall
Plan. These foreign physiatrists were brought to Greece to help. A
foreign orthopedic surgeon spent a year in Greece as consultant.

MEDICAL SUPPLIES. When UNRRA came to Greece after the war, the
medical supply situation was chaotic. There were serious shortages in some
critical medical supplies. But large stocks of other drugs were scattered throughout the
country in inaccessible places. There was virtually no central inventory
control.

The American Mission first assisted the Greek Ministry in assaying
requirements, and placed orders for more than $8,000,000 worth of drugs and
equipment from other countries. Meanwhile, countrywide inspections
disclosed unexpected stocks of other equipment, which were promptly allocated
to medical institutions that could use them. At the same time, the Mission
public health division worked with the Greek Foreign Trade Administration
in examining 5,500 applications by private commercial importers of medical
supplies, which eventually amounted to about $5,000,000.

After the Marshall Plan began, the public health division helped
procure another $9,000,000 worth of medical supplies during the first year,
and approved commercial import of an additional $9,500,000 worth of medical
equipment and supplies. Since then, about $45,000,000 worth of additional
drugs and equipment have been imported by the Greek Government under similar
arrangements. The quantity of essential medical supplies in Greece is not
only sufficient now to meet current needs, but also provides a comfortable
margin of essential medical supplies for a long period in event of emergencies.
In some categories, in fact, such as the field of antituberculosis medications
(panisolin, etc.), the Greek physicians Greece may be considered
adequate. Additional supplies are being purchased, although not to the extent requested by
the Ministry.

One of the main factors in efficient distribution of medical supplies to
state institutions has been the establishment in 1943 of a central
warehouse in Athens. And in 1951, the supply problem was further eased by
intensive inspection of all medical supplies throughout Greece, by teams
of investigators from the Mission public health division, the Mission
controller's office, and a committee specially designated by the Prime
Minister. This program put about $1,000,000 worth of medical supplies into
NURSING. American nursing specialists have worked closely with the nursing section of the Greek General Directorate of Hygiene. With American urging, a Nurse Practice Act was adopted by Parliament in 1960, and the Hellenic Nurses' Association was revived the same year. Both actions have helped stabilize the nursing profession, enhance its prestige, and increase its usefulness to the nation.

When American aid began, the needs of nurse training were dictated by the realities of the guerrilla war. First priority accordingly went to in-service training of practical nurses already serving in hospitals. When the program was completed in 1965, a total of 1,588 practical nurses and 74 hospital supervisors had attended training courses of six to eight weeks in 46 institutions.

Second in priority but probably more important in long-range terms was the training of graduate nurses, who in every nation constitute the professional core of public health work. This training has progressed readily, assisted by more than $50,000 worth of special teaching aids imported for three nursing schools in Athens and Salonica. In Athens, a new addition to the nursing school and home was dedicated at the Greek Red Cross hospital late in November, 1961. This building is one of the most modern in Europe, providing facilities for 50 additional students. Similarly, a new nursing school and home was built with American assistance at Salonica, and is scheduled to enroll its first class early in 1962. A standard curriculum of studies was approved by the Nursing Council and is now followed by all schools of professional nursing.

A third major category was that of public health nurses. As 1962 began, the entire emphasis of the public health program was swinging more and more toward programs to improve health in the rural areas of Greece which traditionally have lacked medical attention. The key figures in such a program was the public health nurse who makes her rounds among the country people, teaching hygiene practices, assisting in routine ailments, inoculating children against common diseases, and referring serious cases to appropriate doctors.

At 1961 ended, the eleven Greek Red Cross health centers in rural Greece finally had their full complement of public health nurses, 300. Public health nursing bags, purchased through the Marshall Plan, had arrived in Greece for distribution. A public health nursing supervisor, who completed a year of postgraduate training in the United States under the technical assistance program, was added to the nursing staff of the Directorate of Hygiene. Three other nurses who completed their studies abroad in 1961 also had reassumed their posts in the Ministry.

CONCLUSION. The most spectacular and costly measure of public health achievement of American aid have been in the field of construction, with nearly 20 million dollars allocated in Marshall Plan funds to build and equip hospitals and other large-scale health institutions. Here are some of these projects which are already completed: two general hospitals in Athens which provide additional teaching and living facilities for students at the Greek Red Cross school and the State School for Nurses and Visiting Nurses;
a central medical supply warehouse in Athens, a 150-bed tuberculosis sanatorium in Sparta, one health center, St. Nicanor in the Peloponnese; and extensive repairs and renovation in the School of Hygiene in Athens.

Projects under way or nearing completion in 1952 began included three general hospitals in Piraeus, Tzavelas and Kifissia, with an aggregate capacity of 650 beds; three tuberculosis sanatoria in Salonika, Trikkala and Xanthi, with total capacity of 800 beds; a 300-bed maternity hospital in Athens; and a health center at Koropi in eastern Thessaly. Also notable were progress on construction work on a public health center at Volos, and the Venizelion Pan-Greek Sanatorium at Heraklion in Crete.

In two teaching hospitals in Athens, extensive repairs and additions were underway to improve existing facilities and increase capacity by 600 beds, and at Athens Mental Hospital, a 200-bed pavilion also had been repaired and opened for use.

Then there were, the Greek War Relief Association enterprises which included 11 modern health centers throughout rural Greece, two new hospitals which are perhaps the most modern in all Europe, a completely remodeled hospital, and a 500-bed pavilion added to another hospital. The dollar costs, by far the largest portion, were shouldered by Greek War Relief, but the American Mission furnished more than $3,000,000 in further support funds to pay local costs for labor and construction.

EQUIPMENT. Nearly all the public hospitals and medical schools of Greece have benefited from the Marshall Plan in terms of modern equipment, imported from Western nations with American aid. The list of such items covers the entire range of medical instruments, including X-ray equipment and laboratory apparatus.

ADMINISTRATION. As is nearly all fields of American aid to Greece, one of the most pressing and important aspects of the work of the Marshall Plan public health division was that of administration and proper organization. When the program began, public health was administered by the Greek Ministry of Hygiene, The Ministry later was eliminated during an administrative reorganization designed to prevent the Greek government from making decisions, and eventually became a directorate within the Ministry of Social Welfare. Meanwhile many other changes in structure occur about.

Throughout these shifts, the American public health workers concentrated on scientific planning for the future. Courses in hospital administration and maintenance were organized, using the experience gained by a number of medical technicians who were sent to the U.S. on to Western Europe under the technical assistance program. A British expert helped recognize the Athens School of Hygiene. An extensive study of medical care facilities was completed, and findings were tabulated on 121 hospitals, 250 private clinics and 14 health centers. This survey is now being used by the Greek government to plan future programs.
Public health work in Greece was undergoing a radical shift as emphasis in 1953 began. The main facilities, such as hospitals and medical schools, had been restored and expanded with American aid. Meanwhile the direction of American assistance had changed. The Mutual Security Agency, successor to the ECA, was channeling aid funds into projects of direct economic importance. Funds previously for public health projects became restricted for the most part to finishing hospitals and other large construction projects which were near completion.

In place of construction, the limited American aid funds for public health were going into two main fields, advanced training of Greek public health specialists under the technical assistance program, and projects aimed directly at controlling specific diseases and at bringing public health benefits to rural areas. During the life of the Marshall Plan, 23 physicians, nine nurses, and 10 other public health technicians in various fields had received advanced training in the United States or in western Europe. This program, potentially of enormous value to public health in Greece, continued.

A concerted campaign was begun to wipe out leprosy, venereal disease and tuberculosis, principally by use of newly developed antibiotic drugs and also by the hiring of six Greek physicians to devote full time to these objectives. Three other physicians were assigned to aid in the improvement of laboratory training and facilities, and 45 laboratory technicians were receiving special training under American aid programs. At the same time, training of X-ray technicians was underway.

But the main American effort was being directed toward improving health conditions in the areas which most needed it, the rural parts of Greece. Basically such a campaign was one of education and gradual improvement in water supply, sanitation practices, basic health measures, nutrition, and simple principles of diet. The key figure in the program was the sanitary engineer and public health nurses who would visit the villages. But essential too was an adequate supply of patriotic young doctors who might be induced to devote the building up of a deterrent to malaria in the longer efforts for two or three years in order to devote themselves to the country people. The problem was not one of logistics, the main facilities here were working hard at it as 1953 began.