

Programme Update 2007



International Federation
of Red Cross and Red Crescent Societies

Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP)

Appeal No. MAA67002
Programme Update No. 3

This report covers the period of 01/01/2007 to 30/06/2007.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



Dr. Vladimir Sert screens the thyroid gland of a young woman living in an area contaminated by radiation. Photo: International Federation/Nikolay Nagorny.

In brief

Programme Summary: In the period covered by this report, the Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP) continued to provide general medical, social and psychological assistance in the six regions of Belarus, Ukraine and Russia affected by the Chernobyl disaster. The core activity was thyroid cancer screening, targeting a priority group, specifically those who were aged 0-40 at the time of the Chernobyl accident and live in radiation contaminated areas.

The CHARP offers a high quality service which is not otherwise available to people, especially those living in remote areas. Thanks to early and precise diagnosis of thyroid cancer, proper treatment of the disease was ensured and practically all patients survived.

The Red Cross organisations in the CHARP regions actively participated in a commemoration which marked the 21st anniversary of the Chernobyl disaster. This not only involved holding meetings but also taking part in events held by local administrations and ensuring coverage of the programme in the mass-media.

In the period January – June 2007, the programme received only one donation from the Japanese Red Cross, amounting to CHF 51,500. However, the programme continued to use funds from the amount donated by the Canadian Red Cross for two years (CHF 71,677). In addition to this, the programme received the second transfer of EUR 167,000 from the funds pledged by the Irish government (in total EUR 500,000) which were allocated to the CHARP in 2006 for three years (from May 2006 to May 2009). Therefore, the funds were sufficient to cover the activities planned for the first half of 2007.

While the CHARP has been well-funded over the programme period, additional funding will be required in the years to come. Planning for the period 2008 - 09 and beyond is currently underway, and a new appeal will be launched towards the end of this year in support of this crucial programme.

Needs: The total 2006-2007 budget is CHF 1,268,411 (USD 1,053,500 or EUR 781,840) of which 109% covered.

Click here to go directly to the attached financial report.

No. of people we help: According to reports from the Red Cross National Societies of Belarus, Ukraine and Russia, from January to June 2007 about 90,600 people have benefited directly from the CHARP interventions including:

- medical screening – 45,600 people;
- distribution of multivitamins – 30,000 children;
- psychosocial support – 15,000 people.

More detailed information can be seen in the following table:

Year	Project title	Target population	Total number of people we help	Women (%)	Men (%)	Children under 18 (%)	Older persons (%)
Jan-June 2007	CHARP	Those living in the areas affected by the Chernobyl disaster (about 5 million at present)	90,600	60%	40%	33%	9%

It is expected that about 65,000 people will benefit from the CHARP's activities during the remaining six months of the current year.

Our Partners: The CHARP is implemented by the International Federation together with the Red Cross National Societies of Belarus, Russia and Ukraine in close cooperation with the Ministries of Health of all three countries.

Progress towards objectives

Disaster Management

Objective: Effective medical, social and psychological assistance is provided to targeted individuals in the six regions affected by the Chernobyl nuclear disaster.

Achievements: The objectives set for the first half of the current year were mainly fulfilled. The mobile diagnostic laboratories (MDLs) provided thousands of people living in radiation polluted areas with the opportunity to receive objective information on their health status, enabling them to undertake adequate preventative measures and treat detected diseases. Symptoms of anxiety and stress in those people affected by the disaster have diminished, due to psychosocial support provided within the programme. The distribution of multivitamins supplied by the programme improved the immune system of thousands of children living in radiation contaminated areas.

Medical screening

From January to June, the specialists of six MDLs working within the CHARP examined 45,630 people (mainly in the priority target group, i.e. individuals who were aged 0-40 at the time of the accident and who lived in remote contaminated territories). Three MDLs operated in Belarus (Brest, Gomel, and Mogilev regions), two in Ukraine (Rovno and Zhitomir regions) and one in the Russian Federation (Bryansk region). According to the recommendations of the latest evaluation the screening was focused on operational areas which had not been screened recently or were not screened at all in the past. Therefore, of those screened in the reporting period, 21,725 (about 48 per cent) were screened for the first time since the Chernobyl disaster.

In the course of thyroid screening, special attention was paid to people who were aged 0-18 at the time of the Chernobyl disaster (defined as a high risk group). For these people, who were children and adolescents in 1986 and were living in the affected areas, radioactive iodine often damaged cells of the thyroid gland especially during the first days after the accident and these damaged cells can develop into thyroid cancer years later. In the examined group, MDL specialists detected 18,515 cases of abnormal scans (i.e. pathologies). This means that about 41 per cent of all screened people have pathologies of the thyroid gland in various stages of development. This is, however, an average. In Zhitomir Region, for instance, the thyroid pathologies were detected in 56 per cent of all screened people.

The above mentioned abnormal scans can be divided into types. The three primary thyroid pathologies detected by MDLs via screening were nodular pathology (5,350 cases), diffuse goitre (4,835 cases) and thyroiditis (2,630 cases). The patients diagnosed with these thyroid pathologies are under constant monitoring by Red Cross MDLs because if left undiagnosed or untreated, there is a risk that these conditions may develop into thyroid cancer.

The Red Cross MDLs referred 3,792 patients with suspected thyroid cancer to specialised medical institutions where 78 cases were confirmed through cytological examinations. These patients have received the necessary treatment and are being monitored by the Red Cross MDLs and healthcare institutions.

Distribution of multivitamins

In December 2006, the Logistics and Resource Mobilisation Department of the Federation supplied some 800,000 multivitamin tablets with funding from the Japanese Red Cross and the Irish government. After being cleared by customs the vitamins were distributed in March-April 2007 to around 30,000 children living in radiation-contaminated areas. The multivitamins containing C, D and B groups with iron, folic acid and stable iodine, are strengthening the immunity of children living in the areas affected by the Chernobyl disaster. Regional Red Cross Committees received reports from schools, kindergartens and children's hospitals located in radiation-contaminated areas that after taking multivitamins the children complain less of fatigue and headaches, and there is a decreased chance that they are subject to acute respiratory diseases.

Psychosocial support

During the period covered in the report, Red Cross staff and volunteers continued to provide psycho-social support (PSS) to the population affected by the Chernobyl disaster. PSS was provided at medico-social centres, at places where MDLs were located and at work, as well as at places of residence. It was directed towards providing comfort, restoring the confidence and capacity of individuals to cope, and at the rehabilitation of those suffering due to stress and the traumatic nature of the disaster. This kind of assistance was primarily given to persons experiencing serious emotional suffering resulting from the crisis and to elderly people.

The Red Cross staff and volunteers informed the population of the consequences of the Chernobyl accident and methods of decreasing the risk of radioactivity and coping with stress. Mainly this was done through counselling, active listening, lectures, discussions and other PSS tools. In addition, newspaper articles were published and local radio interviews aimed at highlighting the consequences of the accident were broadcast, explaining methods of preventing stress and related diseases and social problems, as well as ways to cope with crises. The Belarus Red Cross arranged production and distribution among the populace of leaflets containing recommendations on prophylaxis of thyroid gland illnesses.

Advanced staff training

A workshop for training computer operators from the Ukrainian MDLs was held in the Kiev representation¹ on 26 February. The workshop was conducted by a specialist from the Kiev Institute of Endocrinology and Metabolism who had developed the software currently used by MDLs. After a certain period of using the software the MDL computer operators and doctors came out with proposals and requests regarding possible modifications and adjustments which would make it better suited to the specific work in the field. As a result, the computer specialist made the necessary changes in the software and provided the appropriate training for the operators.

¹ From 1 July 2007, the regional delegations have been renamed regional representations as part of the new operating model of the Federation Secretariat. The new name is used throughout this report.

In June a workshop for advanced staff training was held by the Belarus Red Cross, attended by MDL workers from Gomel, Brest and Mogilev regions of Belarus. The MDL doctors were informed about the most progressive techniques regarding the diagnosis and treatment of thyroid gland pathologies. The facilitators for these topics were leading Belarus specialists in thyroid gland illnesses. At the same time the laboratory computer operators received training in using the updated version of software installed in MDL computers, and for entering data collected in the course of medical screening. The training was provided by the computer specialist mentioned above, who was responsible for originally creating the software for the CHARP.

Constraints or challenges: There were no major constraints in implementing the CHARP during the reporting period.

Working in partnership

During the period covered by the report both the Federation's representation and the National Societies implementing the CHARP worked in close cooperation with the ministries of health, radiological centres, dispensaries and many leading experts in each country. In March, a memorandum on cooperation on implementing the CHARP in Belarus was signed by the Belarus Red Cross and the Ministry of Health. This document is the legal basis for all the CHARP activities including biopsies performed by MDL specialists (a similar memorandum between Ukraine Red Cross and Ukrainian Ministry of Health was signed at the end of 2006).

Together with the authorities, the regional Red Cross branches in all three countries fund part of the running costs of the programme: the Red Cross representation rentals, fuel and vehicle maintenance, salaries and accommodation for MDL personnel during their trips to the field. The International Federation provides financial support to National Society personnel (MDL staff's salaries and per diem), laboratory equipment and reagents, vehicles, fuel and maintenance.

There are examples of MDL doctors leaving the CHARP but continuing to support the programme. In particular the former doctors from Brest and Rovno MDLs, who are now working at stationary clinics, continue to carry out biopsies for the patients referred by Red Cross doctors.

The Federation is a member of the United Nations (UN) interagency task force for Chernobyl issues. In April, by request of the UN Coordinator of International Cooperation on Chernobyl the Federation representation in Kiev prepared material describing the CHARP activities in 2005-2006. This is to be included into the UN secretary general's biennial report on Chernobyl-related issues for the 62nd Session of the General Assembly. The report falls under the General Assembly agenda item, *Strengthening of the coordination of humanitarian and disaster relief assistance of the United Nations, including special economic assistance* and under the specific topic, *Strengthening of international cooperation and coordination of efforts to study, mitigate and minimize the consequences of the Chernobyl disaster*.

Contributing to longer-term impact

The programme is aligned with the Federation's Global Agenda, in particular with the goals of the Federation's mission to reduce the number of deaths, illnesses and impact from diseases and public health emergencies. Through thyroid screening the CHARP directly saves the lives of the most vulnerable population affected by the Chernobyl accident. Through psycho-social support and the dissemination of accurate information on the consequences of the disaster, the CHARP transfers knowledge of how to cope with the aftermath of the Chernobyl catastrophe. Special attention is paid to specific groups such as pregnant women, or children - the next generation to be living in radiation polluted lands.

The CHARP offers a high quality service which is not otherwise available to people, especially those living in remote areas. Thanks to early and precise diagnosis of thyroid cancer, proper treatment of the disease was ensured

and practically all patients survived. As mentioned above, during the reporting period MDL specialists detected 18,515 cases of abnormal thyroid scans (about 41 per cent of all those screened). Red Cross doctors gave these patients the necessary medical consultations. In the reporting period some 3,792 patients were referred to specialized medical institutions for further examinations, including hormonal testing and fine needle biopsies. Thyroid cancer has been confirmed for 78 people. All the above mentioned patients suffering from thyroid conditions will be under the constant monitoring of a Red Cross MDL specialist in the years to come.

Looking Ahead

The CHARP is an ongoing project. Based on outputs of the programme from 2006, the CHARP was working in the first half of 2007 on the same conceptual basis. The core activities were thyroid screening in remote areas of those who were aged 0-40 at the time of the disaster, psycho-social support for the affected population, and the distribution of multivitamins to children living in contaminated areas. The programme will continue this approach both in the second half of the current year - excluding the distribution of multivitamins - and as part of a more long-term perspective.

On the other hand, the CHARP is an innovative project trying to provide assistance in the areas where needs are greatest. At present the incidence of thyroid illnesses caused by radiation is still high. Therefore, thyroid screening will remain in the CHARP strategy as the main component of its activities. Along with this, the CHARP is studying the health consequences of the Chernobyl disaster in order to define what else could be included in the programme's objectives. One possible variant under consideration is breast cancer screening, planned to be included in the appeal for 2008-2009.

For further information please contact:

Country Representation in Ukraine: Nikolay Nagorny, CHARP coordinator;
Telephone + 380 44 278 61 10; Fax: + 380 44 234 50 82; Email: nikolay.nagorny@ifrc.org

Regional Representation in Moscow: Alexander Matheou, Regional Representative,
Telephone: + 7 495 126 15 66; Email: alexander.matheou@ifrc.org

Europe Zone office, Budapest: Leon Prop, Deputy Head of Zone,
Telephone: + 36 1 248 3300; Fax: + 36 1 248 331; Email: leon.prop@ifrc.org

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International Federation of Red Cross and Red Crescent Societies

MAA67002 - CHERNOBYL HUMANITARIAN ASSISTANCE & REHABILITATION

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/01-2007/06
Budget Timeframe	2006/01-2007/12
Appeal	Maa67002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	0	1,268,411			0	1,268,411
B. Opening Balance	0	339,827			0	339,827
Income						
<u>Cash contributions</u>						
<i>British Red Cross</i>		0				0
<i>Canadian Red Cross</i>		71,677				71,677
<i>DFID Partnership</i>		39,913				39,913
<i>Irish Government</i>		262,114				262,114
<i>Japanese Red Cross</i>		104,000				104,000
<i>Netherlands Red Cross</i>		8,003				8,003
<i>On Line donations</i>		14				14
<i>United States - Private Donors</i>		514				514
C1. Cash contributions		486,235				486,235
<u>Outstanding pledges (Revalued)</u>						
<i>Irish Government</i>		553,438				553,438
C2. Outstanding pledges (Revalued)		553,438				553,438
C. Total Income = SUM(C1..C6)	0	1,039,673			0	1,039,673
D. Total Funding = B + C	0	1,379,501			0	1,379,501

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	0	339,827			0	339,827
C. Income	0	1,039,673			0	1,039,673
E. Expenditure		-834,308				-834,308
F. Closing Balance = (B + C + E)	0	545,193			0	545,193

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
BUDGET (C)		0	1,268,411			0	1,268,411	
Supplies								
Medical & First Aid	306,000		232,186				232,186	73,814
Total Supplies	306,000		232,186				232,186	73,814
Land, vehicles & equipment								
Vehicles			-3,405				-3,405	3,405
Computers & Telecom	2,000		1,969				1,969	31
Office/Household Furniture & Equipm.			4,364				4,364	-4,364
Medical Equipment	37,200							37,200
Total Land, vehicles & equipment	39,200		2,928				2,928	36,272
Transport & Storage								
Storage	3,666		1,678				1,678	1,988
Distribution & Monitoring			4,005				4,005	-4,005
Transport & Vehicle Costs	110,920		70,088				70,088	40,832
Total Transport & Storage	114,586		75,771				75,771	38,815
Personnel Expenditures								
International Staff Payroll Benefits			1,670				1,670	-1,670
National Staff	130,392		111,235				111,235	19,157
National Society Staff	436,069		261,434				261,434	174,635
Total Personnel Expenditures	566,461		374,339				374,339	192,122
Workshops & Training								
Workshops & Training	59,500		16,456				16,456	43,044
Total Workshops & Training	59,500		16,456				16,456	43,044
General Expenditure								
Travel	23,560		20,316				20,316	3,244
Information & Public Relation	10,950		16,443				16,443	-5,493
Office Costs	41,654		19,567				19,567	22,087
Communications	19,396		16,430				16,430	2,966
Professional Fees	360		741				741	-381
Financial Charges	1,964		15,446				15,446	-13,482
Other General Expenses	2,333		1,692				1,692	641
Total General Expenditure	100,217		90,635				90,635	9,582
Depreciation								
Depreciation			3,405				3,405	-3,405
Total Depreciation			3,405				3,405	-3,405
Federation Contributions & Transfers								
Cash Transfers National Societies			393				393	-393
Total Federation Contributions & Tr			393				393	-393
Program Support								
Program Support	82,447		54,230				54,230	28,217
Total Program Support	82,447		54,230				54,230	28,217
Operational Provisions								
Operational Provisions			-16,036				-16,036	16,036
Total Operational Provisions			-16,036				-16,036	16,036
TOTAL EXPENDITURE (D)	1,268,411		834,308				834,308	434,103
VARIANCE (C - D)			434,103				434,103	