Avian influenza (AI) preparedness, mitigation, and response

FUNDING OF CHF 484,673 (USD 401,552 OR EUR 304,634) WAS ALLOCATED TO THE NATIONAL SOCIETIES OF RUSSIA, BELARUS, MOLDOVA AND UKRAINE TO IMPLEMENT THE ACTIVITIES DESCRIBED BELOW OVER A PERIOD OF 12 MONTHS.

In brief

Appeal history:

- Appeal launched on 20 April 2006 for CHF 17.4 million (USD 13.4 million or EUR 11 million) for up to the end of 2007
- Appeal coverage for 2006-2007: 18.3 %
- Outstanding needs: CHF 14.2 million (USD 12.2 million or EUR 11.6 million)
- CHF 8,500 was allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support National Society activities in December 2005 for three months.

Summary: During 2005, 2006 and the first two months of 2007 avian influenza (AI) outbreaks were recorded in 20 regions (out of 87 regions) on territories of four (out of seven) Federal Okrugs - the Southern, Urals, Central and Siberian Federal - of the Russian Federation, as well as in Crimea and two other regions of Ukraine (out of 25 regions). The governments of the four countries constituting the region - Russian Federation, Ukraine, Moldova and Belarus - undertook efforts to prevent further outbreaks. To complement this effort, in December 2005, the Russian Red Cross and the Ukrainian Red Cross received CHF 8,500 for three months to support information dissemination campaigns in six regions of Russia and all regions of Ukraine. A total of 85,000 leaflets were distributed along with information dissemination activities such as round tables, TV and radio broadcasts, human influenza vaccination promotion campaigns among the residents of the affected settlements and training in needs assessment techniques among the risk groups.

The current funding will effectively contribute to the national efforts undertaken to prevent Avian Influenza outbreaks spreading in the region. The objective is to mitigate the impact of AI in the most prone areas of four countries through developing and disseminating a replicable model of prevention and response to the Avian Influenza Pandemic. The project activities will be implemented in 14 areas of the region that are most prone to...
AI (six in Russia, four in Ukraine, two in Belarus and two in Moldova). The areas and districts will be selected based on a set of criteria, which includes the level of AI-related activities currently conducted or planned by other organizations in these areas; scope of the virus; and the percentage of households keeping poultry.

Target beneficiaries will be local farmers who work in close contact with live poultry, such as bird sellers and handlers, poultry households and schoolchildren living in the 14 selected AI-prone areas.

For further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please visit the Federation’s website at http://www.ifrc.org

Background

The International Federation of Red Cross and Red Crescent Societies (Federation) has already started responding to avian influenza (AI) or bird flu, based on an approach that AI and pandemic human influenza are two distinct, but closely related issues. Given the potential magnitude and unprecedented nature of the threat posed by avian influenza and its possible conversion into pandemic influenza (PI) with disastrous consequences, the Federation is committed to using its comparative global advantages to support increased efforts by its member national societies to develop and implement successful measures. It is anticipated that these initiatives would then lead to viable risk reduction and relevant national and global response capacity to AI and pandemic influenza.

Given its unique position, the Federation launched the global Avian Influenza appeal on 20 April 2006 seeking CHF 17.4 million (USD 13.4 million or EUR 11 million) to provide vital support to national societies for an initial period of 12 months. The AI Appeal is broadly designed to focus on capacity building, scaling-up of capacity and management, contingency planning for concomitant disasters, communications and service continuity planning.

This appeal was also developed on the basis of two separate strategies: negotiated partnerships and programme proposals. Negotiated partnerships seek funds to support work in connection with avian influenza, while the programme proposal strategy is based on demand-driven activities, with support allocated to selected national societies to support requests or proposals for avian influenza programmes for prevention and scaling-up of activities.

Situation Analysis

Several areas of Russia and Ukraine have been affected by avian influenza (AI) in the past three years. The virus was first noted in July 2005 and the last AI outbreak was registered on 11 February 2007 in Moscow, Russia. Moldova and Belarus, as countries which border countries that have already been exposed to highly pathogenic avian influenza (H5N1), are also at high risk if the virus spreads.
**Epidemiological situation in the Russian Federation:** Official reports from the Russian Federation’s Ministry of Agriculture and Food confirmed that between July and August and then in October 2005 at least 52 AI outbreaks were registered in the territories of four Federal Okrugs of the country: Southern, Urals, Central and Siberian Federal. Cases of poultry and wild waterfowl dying were officially registered in 120 villages, five towns, as well as in four major farms and one hunting area, covering a territory of 57 districts in ten oblasts.

In 2006, AI outbreaks reoccurred on the territory of three oblasts of the Siberian Federal Okrug (Novosibirskaya and Omskaya oblasts, Altayskiy Krai) and spread into 11 settlements of Tomskaya oblast as of April 2006. The epizootic (infection expansion) was also registered in 32 settlements and four farms of Dagestan Republic (Southern Federal Okrug) at the end of January and in February 2006.

Additional cases of AI occurred in 44 settlements of seven republics, krais and oblasts of the Southern Okrug of Russia and the other two oblasts where the cases of infected wild birds were registered in February-March 2006 (this data was presented by the Russian Red Cross, but not recorded in the World Organisation for Animal Health-WOAH-register). The last officially registered cases of AI among wild waterfowls occurred in Krasnodarsky krai in January 2007 and Moscow oblast in February 2007.

According to the Russian State Surveillance Committee on Agriculture, bird flu in poultry, classified as H5N1, which is potentially highly dangerous for humans, could have been brought to Russia from south-eastern Asia. As a result of strong measures taken to prevent AI expansion throughout Russia over 1,300,000 birds were culled (including 46,600 poultry in private husbandries, 1,290,000 in farms and 2,390 wild birds). In Russia, the outbreaks of AI have had the worst effect in Kurganskaya and Novosibirskaya oblasts, where more than 550,000 poultry was lost.

Rigorous measures have been taken to monitor the residents of affected villages, staff of the veterinary laboratories and people engaged in the slaughter and disposal of birds. This monitoring has shown no cases of human infection registered.

**Epidemiological situation in Ukraine:** In Ukraine, the AI virus appeared in November 2005 causing the death of officially registered fowl in five villages of Nyzhnyohirskiy, Sovietskiy, Dzhankoyskiy districts of Crimea peninsula. Later in December 2005, then in January, February, April and June 2006 several outbreaks of AI affected a further seven districts and three towns including Simferopol – the capital of Autonomous Republic of

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1. Sub-national entity.
2. Territories.
Crimea – and the other two oblasts (Kherson and Sumy) and a zoo in Odessa. The outbreak has spread over a total of 34 settlements, four farms and the zoo, affecting a total of 260,203 poultry, including 2,076 birds which died and 66,662 birds which were culled. Mass media also reported that the AI cases were diagnosed in 18 settlements of Mikolayiv oblast. *(Last data was not registered in the WOAH’s register).*

There have been no cases of infection among the human population of Ukraine.

**Action by the governments**

The governments of the Russian Federation, Ukraine and Moldova have emergency plans for control and prevention of highly pathogenic AI. Belarus has elaborated a complex plan of AI preventive measures for 2006, and a similar plan is being developed for 2007. The Councils of Ministers of all four countries adopted resolutions according to which Coordination Inter-agency Committees were established in 2005. The Committees are in charge of control and coordination of all AI preparedness and response measures, as well as preparedness for an AI pandemic among humans via:

- introducing quarantine or restriction measures in locations where cases of the disease have been registered;
- controlling wildlife reservoirs;
- destroying all dead birds by burning;
- controlling in-country movements;
- screening;
- zoning;
- disinfecting infected premises/establishments;
- vaccinating birds;
- vaccinating against human influenza. In Russia, a total of 81.24 per cent of the farm workers and 61.7 per cent of medical personnel have been vaccinated. In the affected areas of Ukraine the mobile teams of doctors and the staff of sanitary epidemic service carried out the vaccination of 25,000 people - over 400 people whose poultry have died of AI were under medical supervision;
- conducting activities to raise public awareness of the need to prevent contact between wild migratory birds and domestic poultry;
- daily clinical examination of birds of all species kept in private households carried out by the veterinary services in relevant districts (for example a total of 522,763 households have been inspected and disinfected in Ukraine over a period of six months from December 2005 to June 2006 by 433 veterinary mobile groups in cooperation with local authorities);
- tracking tourists arriving from the countries where cases of human H5N1 have been registered.

**Action by other organisations**

Different international organisations are providing continuous support for preparedness, mitigation and response efforts undertaken by all governments in the region. In Russia, within the framework of the programme to protect populations at risk, an international conference was held in November 2006 in Novosibirsk, where participants from all over the former Soviet Union gathered to establish formats and identify activities for development of cross-country collaboration against pandemic of human AI.

The World Health Organization (WHO) carried out an assessment mission to Ukraine to review the organization of anti-epidemic measures and provide assistance to the residents of the counties in Crimea affected by AI. Several joint meetings between the representatives of the United Nations Development Programme (UNDP) and Veterinary Service of Ukraine took place in 2006 to discuss further revision of the national *Plan of measures for influenza control prevention of pandemic among population* to ensure the document’s compliance with the best international practices. The United Nations Children’s Fund (UNICEF) in Ukraine organized training seminars on AI communication in risk-prone oblasts and published 2,000,000 leaflets called “Protect your poultry” and “Protect your family”.
In the middle of December 2006, WHO Regional Adviser on AI paid a 2-day visit to Belarus to discuss with the Government and other interested organizations Belarus’ preparedness status as regards to AI. In Moldova a group of international donors met with the Prime Minister at the end of October 2006 to discuss the national AI preparedness in the country.

**Red Cross action**

The region’s National Societies (NSs) do not possess broad or deep experience in the field of AI preparedness, mitigation and response. Only Russian Red Cross and Ukrainian Red Cross have implemented small projects to increase community awareness of the threat of an AI epidemic. Russian RC distributed 20,000 leaflets to people in eight areas affected by AI (Astrakhan, Novosibirsk, Chelyabinsk, Tambov, Tula, Tomsk, Omsk, Northern Osetia), while Ukrainian RC distributed 65,000 throughout all 25 regions of the country.

The NSs also conducted a number of informational events. Russian RC held a round table with representatives of the local branch and other non-governmental organisations (the doctors of the Omsk poultry Veterinary Union), addressing the issues related to cooperation on AI public awareness.

In 2006, Ukrainian RC organized eight media (TV and Radio) broadcasts on public awareness and a workshop on AI preventive sanitary-educational activities was held with the leadership of the regional organizations in February 2006.

Ukrainian RC ensured access of the population residing in the areas under quarantine to medical services by deploying mobile teams of nurses and mobile medico-social points. As a result 61 people have been referred to the medico-social points for medical and social support and 240 persons were vaccinated. The National Society has also distributed rubber and warm gloves to the officers of the Ministry of Emergencies engaged in culling of the poultry.

In order to prepare for the coming season, and the probable epidemics and influenza, the NSs of the region sought funding to implement a new regional project which will allow them to contribute to the Federation towards achieving Global Agenda goals. It will also contribute towards increasing the overall disaster preparedness capacities of NSs in the region - one of the four core areas defined by the Strategy 2010.

**Needs assessment and Proposed Operation**

Based on the responses from 1,538 people interviewed by the Russian RC staff in five affected oblasts of Russia in order to assess levels of knowledge on protective measures against AI, a series of discussions with community members and different stakeholders (local and national government authorities, national AI coordination bodies) in all four countries of the region took place. These discussions identified the following key areas in addressing the issues related to AI in the region:

- Lack of Avian and Human Influenza Pandemic preparedness and response (contingency) planning at the NSs in the region;
- Low level of public awareness and information dissemination knowledge and skills among the NS staff;
- Low level of NS involvement into the avian flu prevention activities and cooperation on these issues with other stakeholders in the region;
- Poor community awareness about AI and safe poultry husbandry practices, lack of basic hygiene practices to minimize the risk of transmission of AI within endemic areas;
• General lack of understanding about personal responsibility and a need to notify authorities about the cases of infected poultry;

• Common misperceptions about human influenza pandemic and how the communities could prepare themselves;

• Poor community awareness and lack of governmental regulations in terms of cross-border poultry trade (poultry peddlers and market sellers) in the bordering areas.

This programme will be implemented as part of the Regional Disaster Management (DM) programme within the Federation and the NSs structure. NS staff and volunteers working in DM and/or Health programmes will be actively involved in programme implementation. Such activities as risk mapping, needs assessment, training and public awareness campaigns will be implemented by the NS staff and volunteers involved in DM, Health or Youth programmes. Obtained knowledge and experience will be applied in future RC activities. NS Information Departments will be engaged in designing awareness materials. The other departments, such as Finance or Logistics, will be involved in reporting and distributing printed materials.

Target locations:
The project activities will be implemented in 14 areas of the region that are most prone to AI (six in Russia, four in Ukraine, two in Belarus and two in Moldova).

The areas and districts will be selected based on a set of criteria, which includes: level of AI-related activities currently conducted or planned by other organizations in these areas; scope of the AI virus; and percentage of households keeping poultry.

Target beneficiaries:
a) Community members:
• Local farmers who work in close contact with live poultry, such as bird sellers and handlers, poultry households in the selected areas;
• Schoolchildren living in the 14 selected AI-prone areas.

b) Red Cross staff and volunteers:
• Red Cross volunteers and staff members in the selected areas;

Overall Goal:
To effectively contribute to the national efforts undertaken in order to prevent Avian Influenza outbreaks spreading and protect and prepare the population for a possible Human Influenza Pandemic in the region.

Project Objective:
The impact of AI in the most prone areas of four countries is mitigated through developing and disseminating a replicable model of prevention and response to the AI Pandemic.

Expected result 1: Population at risk in 14 target areas of all four countries possess basic knowledge and skills on AI prevention and have strengthened their coping mechanisms through training.

Activities:
• To conduct training on basic ways to prevent contamination and spread of the infection among various community groups. At the second phase of project implementation a series of trainings with farmers using existing education modules of other stakeholders and training of trainers methodology will take place. In addition, round table discussions and meetings on specific topics related to AI with all stakeholders in the
region and meetings with specific high-at-risk groups (hunters, butchers, etc.) will be conducted. Follow up activities based on this will allow the Participatory Rural Approach to be used for population education in future.

- To conduct training on basic ways to prevent contamination and spread of AI infection among schoolchildren. It is expected that trained children will convey obtained information to the members of their families. Training for children on five basic rules about what to do and what not to do when handling a bird will be followed as the methodology. Also, activities will be carried out by the Red Cross volunteers and trained school teachers.
- To produce and distribute informational materials on AI (posters, leaflets, comics for children).
- To run awareness and advocacy activities devoted to AI-related issues, such as informational support during the day of vaccination for seasonal influenza at schools, radio quizzes, thematic AI drawings and poster competitions among schoolchildren, TV spots.
- To purchase and supply soap or hand sanitizer for schoolchildren and personal protection equipment (PPE) (hand sanitizer, rubber gloves, rubber boots, masks, aprons, disposal bags).

**Expected result 2:** NSs in BRUM region have relevant Avian Influenza Preparedness skills and emergency supplies in case of an AI outbreak.

**Activities:**

- To produce risk maps determining the areas most prone to AI.
- To conduct training on needs assessment among targeted communities and NS staff and volunteers.
- To train Red Cross volunteers and representatives of other organisations on AI prevention and education.
- To mobilize trained community members, Red Cross volunteers and the representatives of other organisations to run public education and information dissemination campaigns at the community level aimed at increasing awareness on AI and reinforcing general hygiene messages and safe poultry husbandry practices. For dissemination of the campaign messages, the volunteers will use community loudspeaker systems (through local radio), organize public gatherings or conduct household visits to the families with backyard poultry farms. To reinforce their messages, volunteers will disseminate relevant materials to the public and provide some basic hygiene items (soap and hand-towel) to selected vulnerable households.
- To organize national counselling forum/meeting on AI for leadership and key members of all involved Red Cross branches.
- To train the RC volunteers and staff members on how to teach the children, to lead the discussion or find an AI expert to do so.
- To support participation of the project staff in the regional-level AI training/workshops.
- To conduct project mid-review workshop (discussion of lessons learnt) for staff of 14 Red Cross branches.
- To assess changes in the level of knowledge.

**Implementation Plan:**

Phase I (5 months) includes preparative work, such as the following:

- An independent consultant will be hired for risk mapping and training needs assessment. The Federation Coordinator, together with the National Society counterparts, will be looking for a consultant from local Non-Governmental Organisations (NGOs) and relevant Institutions, Organisations or Academic Institutes;
- The risk mapping and assessment design will be done jointly and pre-tested in few branches. Implementation in respective NSs will be done by their staff and volunteers and supervised by the Federation Coordinator;
- The results will be analysed by the NSs. Design of the training modules will be done by a specialist hired independently who will work together with the Federation and the NSs;
- Training of trainers for NS staff and volunteers will be done regionally for all NSs two times during the programme period (at the beginning and sometime after three months as a refresher);
Information materials will be developed after training needs have been assessed and training plan of action has been developed per countries and per risk map.

Phase II (7 months) includes the direct work to target groups on AI prevention, such as the following:

- Public education campaigns on AI prevention for two main target groups (farmers and children) and several additional target groups (hunters, butchers, housewives, according to results of training needs assessment in each country) will be organised in 14 regions of four countries. These will include trainings, public lectures, public meeting and discussions, school lessons etc.;
- Public information and advocacy campaigns (informational support during the day of vaccination for seasonal influenza at schools, radio- quizzes, thematic AI drawings and poster competitions among schoolchildren) including mass media events (short radio and TV spots on central/local TV and radio, articles on NSs magazines and website) will be organised;
- The produced and printed information material will be disseminated;
- Necessary hygiene supplies (soap, hand sanitizer, hand-towels) and personal protection equipment (PPE) (rubber gloves, rubber boots, masks, aprons, and disposal bags) will be procured in accordance with the plans.

Coordination and Management

Outside the National Societies
The activities will be coordinated with other key stakeholders in each country such as the Ministry of Health, Ministry of Emergencies, Social Protection Ministry, Ministry of Education, veterinary services and local governments.

As members of national disaster management committees, the Red Cross Societies will be able to closely coordinate their programme activities with other key stakeholders in the implementation process. The RC branches are also members of these coordination mechanisms at local level. In addition, the NSs in the region and the Federation Regional Delegation will establish mechanisms to coordinate activities with the National Steering Committee for Avian Flu Control in each country of the region.

Within the region RC networks
The Regional Disaster Management Officer, based within the Federation Delegation in Minsk, will be responsible for the overall coordination. In each National Society a counterpart - available DM or Health officers - will be appointed to coordinate activities within the Red Cross Society. The NSs will implement the programme in their respective countries. The programme will be coordinated from the Headquarters (HQ) and implemented within branches where risk mapping will determine the actions needed.

The project activities will also benefit from the guidance of the NSs steering committees on AI. These committees will be composed of key staff from the NS HQs, headed by Executive Directors/Deputy Secretary Generals and also including Head of DM and Health departments, Heads or their Deputies of technical (organizational development, social work and youth) and administrative departments.

Reporting, Monitoring and Evaluation

Narrative Reporting:
The NSs will produce narrative reports on a quarterly basis and submit them to the Federation Delegation at the end of the second week following each quarter, with a copy sent to the Regional Reporting Delegate based in the Regional Delegation in Moscow. The quarterly report will not only cover the activities funded by the Federation’s Avian Influenza Global Appeal Fund, but will also include all the other AI related activities of the National Societies. The NSs will use log frames as a tool for ongoing monitoring of the project progress, establishing its own set of targets, benchmarks, and key performance indicators including gender breakdowns, and calculating...
beneficiary numbers to monitor progress and to report results in accordance with the International Federation’s policies.

Within four weeks after the completion of the project, the NSs will produce and submit to the Federation Delegation a consolidated narrative report outlining the key achievements, constraints and lessons learnt, with a copy sent to the Regional Reporting Delegate based in the Regional Delegation in Moscow. The Regional Delegation will edit and transfer this text into a Federation programme update format and deliver it to the Public Health and Care Department in Geneva, as required.

Financial Reporting:
The Federation Avian Influenza Global Appeal Fund will disburse funds to the four NSs in the region based on the International Federation’s standard financial procedures and guidelines. The financial process will be facilitated through the Federation Regional Delegation and the Regional Finance Unit.

The NSs of the region will provide standard quarterly financial reports to the Federation Regional Delegation, not later than the first two weeks after the end of each three-month period of the project. All quarterly financial reports will form the basis of the final financial report that will be submitted to the Federation Delegation within four weeks after the date of completion. This report will be further forwarded by the Regional Finance Unit to the Public Health and Care department in Geneva.

As the project involves procurement (stockpiles of personal protective equipment, medicine, essential items, etc.), standard procurement guidelines of the NSs and the International Federation will be followed.

Monitoring and evaluation:
According to the detailed plan of actions for each National Society and the region, regular monitoring will be performed. The NSs will monitor activities on a bimonthly basis while the Federation coordinator will monitor programme activities on a quarterly basis. The monitoring will be done according to the mutually agreed indicators in which gender breakdown and calculation of beneficiary numbers are reflected.

Reporting will be done two times during the programme implementation period; after six and 12 months. A final report will be produced once the implementation is finalised and all financial transactions cleared; three months after the completion of the programme. The NSs will report to the Federation Coordinator who will have the overall responsibility of compiling the individual reports and reporting to the Federation. The implementation of the activities will be monitored by:

- Questionnaire for risk mapping;
- Risk maps;
- Questionnaire for training needs assessment;
- Analyses and recommendations of the training needs assessment;
- Training modules;
- Signed partnership agreements;
- Results of the communities’ knowledge on AI pre-testing;
- Results of the communities’ knowledge on AI post-testing;
- Minutes of various meetings with partners.

The four NSs in the region will be responsible for ensuring adequate monitoring of the project activities (i.e. through reporting against objectives and field visits). They will conduct regular follow up and field visits at different levels (by national headquarters’ project staff to the Red Cross branches; by local Red Cross staff to district/commune Red Cross branches, the communities and Red Cross volunteer teams).

The NSs and Federation Regional Delegation will jointly review the implementation progress on a regular basis and address challenges as they arise. Following the project implementation period, the NSs, with the support from
the Federation Regional Delegation, will conduct a final review of project activities to determine the lessons learned and best practices which may be replicated in other communities and also assess whether the interventions were effective and had the desired impact. These findings will be consolidated in a short synthesis report for public dissemination and shared in national workshops with decision makers, civil society groups, and the international community. These findings will also be used to outline the national society’s plans for the next phase of its AI programme.

The Federation Regional Delegation will provide technical consultancy and support to the National Societies’ project team in monitoring of project activities, as required.

**Sustainability**

The programme activities are in line with the national strategy in each country in the region on AI control and preparedness and their planning will be closely coordinated with the local authorities and governments’ relevant technical agencies. It is expected that at the completion of this project, the local authorities in the selected areas will seek to integrate AI prevention messages and community based preparedness activities in their routine community programmes.

One of the key elements of this program is to motivate and enable the communities themselves to take charge of the current AI situation in their locations. The NSs envisage that at the completion of this project a base for the next step with Participatory Rural Approach will be established. In the future, mobilizing community members for different initiatives that help to reduce risk of AI outbreaks in poultry and people’s exposure to the virus will be possible with the help of trained community volunteers and community leaders (formal and informal). Risk reducing activities can include environmental clean up campaigns in the villages, community gatherings or discussions on AI, community-based AI infection preparedness and response plans, field rehearsals with the population and local authorities simulating AI outbreaks and a human pandemic.

Such activities will also help to set an example and put pressure on neighbouring communities not covered under the project to improve their backyard poultry breeding and handling practices. AI is a complex and cross-cutting issue and the programme activities provide an unprecedented opportunity for the NSs to improve the level of coordination and integration across health, disaster management, organizational development, communication and other program areas. The newly set up NS steering committees on AI will help the project teams to facilitate this process and it is expected that at the completion of this phase, the other programme areas will be able to integrate most of the key AI prevention and preparedness elements in their routine activities.

< contact information below; click here to return to the title page>
How we work

All International Federation assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The Federation’s Global Agenda

The International Federation’s activities are aligned with under a Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:
- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

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