

# Annual report



International Federation  
of Red Cross and Red Crescent Societies

## Russia, Belarus, Ukraine and Moldova (Focus on the Russian Federation)

Appeal No. MAA67003

30 April 2009

This report covers the period 01/01/2008 to  
31/12/2008.



Beneficiaries and activists of the Russian Red Cross elderly people programme in Novgorod.  
Photo: Russian Red Cross

### In brief

**Programme purpose:** The focus areas, aiming to alleviate suffering among the most vulnerable, were aligned with *Strategy 2010* and the Istanbul Commitments made at the VII Red Cross Red Crescent Conference, and contributed to the four Global Agenda Goals focusing on disaster management, health and care, organizational development and participatory community development as well as population movement.

**Programme(s) summary:** The International Federation's support to the Russian Red Cross changed in nature and focus during 2008 to reflect the position of the government to want technical expertise and advice from partners rather than international donorship. This approach is in line with the operating model developed by the International Federation reflecting a feeling among donors that substantial financial means are available within Russia to address the needs. The successful social inclusion programme came to an end and other programmes, notably the humanitarian aid for the people affected by the Beslan tragedy, are winding up.

Nevertheless, the Russian Red Cross has continued to implement the Tuberculosis (TB) and HIV prevention, psycho-social support and social inclusion programmes that are aligned with the Global Agenda Goals to reduce the number of deaths, illnesses and impact from diseases and public health emergencies and to increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

As a result of the TB programme, a decrease in the rate of treatment interruption was reached and new regions were included in the intervention programme. Average default rates in the target regions are considerably lower than the national average. Social bureaus were opened to provide social support to people living with HIV (PLHIV) released from prisons, wards from orphanages were

involved in peer-education in HIV prevention and several Red Cross local programmes gained sustainability through full financial and administrative support from the government.

Elderly people receiving support in the frame of the social inclusion programme describe improved access to services and reduced vulnerability through their co-operation with social policy-makers. Their interests and opinions are taken into account in the design of policies and budgets in the regions. In Tomsk for instance, as a result of Red Cross advocacy the regional public chamber initiated inspections and subsequently took some measures in various health institutions that did not provide full access to elderly people.

**Financial situation:** Total budget for 2008 is CHF 6,211,288 (USD 5,374,946 or EUR 4,236,894) out of which 73 per cent is covered. Expenditure overall was 90 per cent. The total 2008 budget was initially CHF 5,465,604 but this was revised to CHF 5,764,532 then again to CHF 5,907,466. A further revision later in the year with the USAID contribution makes the final budget figure. Out of this total regional budget, Swiss francs 3,823,228 was for programmes in the Russian Federation.

[Click here to go directly to the attached financial report.](#)

**No. of people we help:** In total, about 31,665 people directly benefited from the programmes supported by the International Federation.

Annual Report 2008 – Russia		
Programme	Target population	People reached
Health and care	TB patients	3,940
	Medical staff	800
	Inmates and staff of penitentiary institutes	11,012
	Students of schools for children with behaviour problems or orphanages	1,527
	Injecting drug users	6,700
	People affected by the Beslan crisis	4,500
	Russian Red Cross volunteers and staff	186
Organizational development	Elderly people	3,000
<b>Total number of people reached</b>		<b>31,665</b>

**Our partners:** The Russian Red Cross cooperated with five partner National Societies, both multilaterally and bilaterally- the Swedish Red Cross, British Red Cross, Norwegian Red Cross and American Red Cross. Cooperation was maintained with USAID, the International Committee of the Red Cross (ICRC), UN agencies operating in Russia, the Global Fund to fight AIDS, Tuberculosis and Malaria, different non-governmental organizations (NGOs), various governmental organizations at the federal and local levels, universities, medical research centres, educational institutions, mass media, international and local enterprises.

## Context

The economic stability of first the six months of 2008 gave way to the first signs of the global economic crisis towards the end of the year. Drops in oil prices dramatically reduced the state's budget income. Even though the government has assured the Red Cross it will keep all the social programmes untouched, the consequences of the crisis, such as a rise in food and drug prices and housing expenses are having a very negative effect on the most vulnerable groups of the population.

The emergency situation in Ossetia in August initiated activities to support refugees from South Ossetia, entering Russia. With the support of the ICRC and the International Federation through a disaster relief emergency operation (DREF) the branch in Vladikavkaz support those people affected with basic goods like clothes and sanitary materials. The psychological support services from Beslan were involved in psycho-social care. The Russian Red Cross collected goods and money from the public. However the weak legal status of the National Society put serious obstacles in the way of it effectively addressing the humanitarian needs with the money collected.

Therefore, the challenge for the Red Cross in this year was to meet the needs and promote the interests of vulnerable people who do not have effective access to governmental economic and social programmes, while at the same time building the capacities of its headquarters and regional branches' volunteers and programme staff skills, particularly in fundraising to ensure more sustainability of the programmes.

## Progress towards outcomes

### **Disaster management. Outcomes:**

- *The skills and professionalism of the National Society disaster response staff and volunteers are improved;*
- *The Russian Red Cross strengthens its material resources for emergency relief in the most disaster prone areas.*

The activities under the disaster management programme could not be carried out due to lack of funding for the programme. However, an avian flu programme in two regions was implemented in the second half of the year in the framework of the global Avian and Human Influenza appeal. See more detailed information in the global report: <http://www.ifrc.org/docs/appeals/annual08/MAA0001808ar.pdf>

### **Health and Care**

#### **Tuberculosis (TB). Outcomes:**

- *Reducing defaulter rates among TB patients thanks to effective implementation of Directly Observed Treatment (DOT).*
- *Role of Russian Red Cross in TB management control in two regions becomes sustainable through transfer of financial responsibility to local authorities*
- *Three regional TB Services and three Russian Red Cross branches have increased capacity to manage the control for multi-drug resistant (MDR) TB patients*

During 2008, 71 Red Cross nurses and around 730 volunteers provided 3,940 TB patients and their family members with social and psychological support, distributed food and hygiene parcels. More than 24,540 people were involved in various training sessions and seminars, conducted by the Red Cross.

The model of TB prevention was expanded to three new regions: two in the far east of the country (Jewish Autonomous Oblast and Khabarovsk) and one in the north Caucasus (Adigea). Currently, another region- the Republic of Buryatia is preparing to join the programme.

In the other three regions (Pskov, Belgorod and the Republic of Khakasia) the TB programme run by the Russian Red Cross with financial support from USAID became sustainable thanks to gaining full financial and administrative support from the regional authorities. After getting approval from the Green Light Committee, these three regions have received drugs from the Global Fund to treat multi-drug resistant (MDR) TB. Adigea also received this approval and the drugs will be supplied soon. Another two regions in the programme- Khabarovsk and Jewish Autonomous Oblast- are in the process of preparing an application for the Global Fund.

The regional representation in Moscow supported the Red Cross staff and volunteers and regional health authorities conduct training sessions on managing MDR TB. This involved managing second line drugs, DOTS+ activities, developing new materials for medical staff about MDR TB and promoting

treatment adherence among MDR TB patients. Four regions (Pskov, Belgorod, the Republic of Adigea and the Republic of Khakasia) have increased their capacities to fight MDR TB in this regard.

As a result of training which the Russian Red Cross and the International Federation did with medical staff of TB dispensaries, and more effectively organized treatment and social support of TB patients by Red Cross nurses and volunteers, default rates in the target regions, except for Khabarovsk, during the second and third quarters of the year was kept within the international standards of less than 10 per cent. This is considerably lower than in the Russia Federation in general. Decreased default rates in turn contributed in three regions to a stable percentage of treatment success. In Belgorod it was 80 per cent, Pskov and Khakasia up to 70 per cent and to lower death rates.

#### **HIV:**

The regional representation in Moscow organized systematic training for the Red Cross staff and volunteers on a number of HIV issues. Assistance was given to developing organizational capacities and in establishing contacts with the other National Societies in the region. In total, 22 regions of the Russian Federation were involved in the multilateral and bilateral programmes of the International Federation. The 'peer to peer' approach was used as the main methodology for HIV prevention and to ensure effective dissemination of information among PLHIV. Peer education seminars were organized for 30,390 participants, including students, adolescents in the care of state orphanages, prisoners and injecting drug users (IDUs). It has become increasingly common for former programme beneficiaries, such as PLHIV, IDUs and sex workers to join the Russian Red Cross on the programme staff.



**Logo for the internet campaign dedicated to World AIDS Day.**

For the first time in Russia, programmes to raise awareness of TB-HIV co-infection were introduced to penitentiary institutions. In Oryol, Chuvashia and Khabarovsk these issues are taught during seminars for prison wards along with HIV issues.

In May, the Russian Red Cross joined the Red Cross Red Crescent Global Alliance on HIV and TB. This demonstrates that it is on the path towards greater engagement in matters related to HIV and AIDS. Programme activities are in line with the Global Alliance goals. The regional representation together with the American Red Cross is promoting a systematic linkage between the Russian Red Cross and the Global Alliance.

In December, a three-day regional meeting was organized in Moscow to share experiences and analyze outcomes from the programme, build capacity of the regional branches and develop the Red Cross volunteers and staff skills, particularly in fundraising. The latter was particularly important because in December programmes supported by the Swedish Red Cross and USAID were closed in several regions and these branches need to find other donors or sources of funding.

#### **Prison project. Outcomes:**

- *HIV positive inmates could take deliberate decisions to start the therapy and will be treated*
- *HIV positive inmates and their friends and family will receive support during the release preparation and upon release*
- *Federal System for Sentence Execution will recommend the programme for the use in all the penitentiary system facilities of the Russian Federation*

In the course of the project an HIV prevention system was set up in the penitentiary systems of the targeted regions that can be maintained with minimal support from the Russian Red Cross. Communities of PLHIV inmates received assistance from both the Red Cross and the staff of the penitentiary institutions. Peer support groups were established and a series of training was given. The key areas of the programme are induction training and HIV prevention workshops for staff and inmates, pre and post-test counselling, TB, and TB and HIV co-infection prevention, adherence to treatment for HIV-positive inmates and HIV management skill building. Radio broadcasting for prisoners on HIV-related issues was also introduced.

Following a Red Cross initiative, a network of *social bureaus* was created in May on the basis of its regional branches to provide social support for HIV positive people recently released from penitentiary institutions and street children. Currently around 38 teenagers are regularly assisted by these bureaus.

**HIV: Harm reduction. Outcomes:**

- *Harm reduction of HIV positive Injected drug users (IDUs) will be provided*
- *Staff of the Russian Red Cross regional branches will be able to provide palliative care to IDUs who have AIDS*

Multi-disciplinary teams of psychologists, social worker, doctors and nurses were created on the basis of the regional branches in Kemerovo, Novokuznetsk, Krasnodar and Irkutsk. These teams have been providing palliative care to 4,700 HIV positive IDUs. According to the survey done among the people reached by the programme, in part due to the Red Cross' efforts, the level of stigmatization among medical workers towards HIV positive IDUs is shown to have decreased.

The number of clients has been growing steadily throughout the life of the project. This is a clear sign of communities' trust in the project staff, as well as the relevance of the project activities.

**HIV: Peer education. Outcomes:**

- *Youth could turn to safe HIV-related behavioral practices*
- *Staff of Russian Red Cross branches will be able to attract resources (volunteers and finances) and effectively manage them*
- *Youth (including orphans) in 14 Russian regions are better informed on HIV*
- *Russian Red Cross is better able to advocate on HIV issues, and attract and support volunteer peer to peer trainers*

In Kemerovo and Novokuznetsk, the project activities aiming to reduce risky behaviour of boarding school wards were carried out by peer trainers recruited from the target group itself. The priority was given to supervision and support provided by facilitators - experienced volunteers of the local Red Cross branches. By the end of the year, the peer trainers became more independent and proactive in their work. A special system of incentives helped motivating young people and getting them involved in the Red Cross activities. With support from the regional branches, an additional training course for newly recruited volunteers from educational institutions was conducted late in the year.

In total, 1,527 orphanage wards gained access to valid information on HIV prevention through 167 training courses (five seminars each) in Kemerovo and Novokuznetsk. Test results after the seminars show that informational level of participant had increased.

The main outcomes of the programme include an increased number of young people who decided to be tested for HIV, increased awareness of the modes of HIV transmission and increased number of young people using condoms on a regular basis.

**Constraints or Challenges:**

The biggest challenge in TB prevention that remains is that the country does not have a precise normative base and protocols directing the MDR TB intervention. Many of the medical doctors in TB institutions resist new internationally recommended methods of diagnosis and treatment of tuberculosis.

The end of the financial support for the HIV prevention programme in the Republic of Chuvashia, Ore and Khabarovsk raised major problems of programme sustainability and the need for new donors. In the case of the prison project resource mobilization is particularly difficult because of the special status of the penitentiary system, as opposed to the civil one.

**Psycho-Social Support (PSS). Outcomes:**

- *The most affected families in Beslan are supported in psychological healing and rehabilitation.*

- *Community mobilization in Beslan results in increased confidence and strengthened coping mechanisms.*
- *120 disabled children in Beslan enjoy more opportunities for self realization and inclusion.*
- *Russian Red Cross branches working with elderly people and children improve the quality of their service delivery and empowerment work through adopting PSS approaches.*

## **Achievements**

The three-year long emergency response operation in response to the Beslan hostage crisis was transformed into a new project called community reliance and risk reduction. Aiming to increase the life quality of people affected by the Beslan hostage crisis and to reduce the stress in the local community with a particular focus on children with disabilities activities included four main components: work with children with disabilities; dissemination of PSP knowledge among the local community; home visits to the affected families trying to strengthen their coping mechanisms; and capacity building among Red Cross psychologists and psychosocial workers.



**A class at the computer studio in Beslan Red Cross Centre. Photo: Russian Red Cross**

The Beslan Red Cross staff continued working with children with disabilities through home visits, counselling and group sessions, leisure club activities, parties and community events. The home care element of the programme lost its importance as most family members no longer need individual counselling. Thus the work was redirected towards group activities of the Beslan centre.

Children attended the centre and participated in the puppet theatre club, playing studio, computer club and speech therapist's classes. The PSP workers' main task was to gradually decrease their involvement in children's lives in order to make them more independent and pro-active.

Psychosocial workers held 558 group and 313 individual sessions with the children. They also organized 25 events that involved wider community participation and helped attract their attention to the needs of children with disabilities and helped the latter ones socialize. During summertime they organized 46 horse therapy sessions for children, which were very popular and effective for the little beneficiaries, they helped them relax and learn how to interact with animals. The club of parents-volunteers was regularly attended by its 15 members.

In the framework of dissemination of PSP knowledge among the local community, Russian Red Cross psychologists carried out 107 workshops that attracted 1,353 participants, held 36 training session that helped to train 10 volunteer PSP trainers. These workshops are highly popular in the republic now, they inspired the creation of the regional PSP strategy in the republican disaster preparedness plan.

Four years after the tragedy in Beslan, 26 affected families still needed psychosocial support in early 2008. By the end of 2008, thanks to the effective exit strategy their number was reduced to five families. 156 home visits were made. Red Cross psychologists organized a leisure club for the older people who were in one way or another affected by the hostage crisis, the club is called "Silver Age" and its participants held 42 meetings through 2008.

Two workshops on PSP basics were organized in 2008 by the programme coordinators for the North Ossetia regional branch programme staff and volunteers and also for the representatives from other neighboring Red Cross branches in order to disseminate PSP knowledge in the regions where the Red Cross worked on different health and community-based programmes. The workshops took place in June and November and were conducted by the psychologists of International Federation's Reference Centre for Psychosocial Support.

## Constraints or Challenges

The main challenge the local Red Cross branch is facing now is the lack of funding, difficulties with permanent premises for the Red Cross child centre and unclear state support of the Red Cross work with children with disabilities, despite the good results in rehabilitation reached.

## Organisational Development

### Social inclusion. Outcomes:

- *Through cooperation with policy-makers the interests and opinions of elderly people are taken into account in the design of policies and budgets in five regions;*
- *Elderly people experience improved feelings of self-worth and self-respect with a greater knowledge and familiarity with their rights; social interaction with their peers and increased involvement in wider society in five regions;*
- *A single Russian Red Cross policy towards Acting Ageing is adopted and dissemination to 89 Red Cross branches;*
- *The five pilot projects are able to generate resources locally in order to continue work in 2010 without external support.*

Around 3,000 elderly people received medical, social and legal support at the Russian Red Cross centres in Novgorod and Tomsk regions. In addition Red Cross nurses and volunteers (elderly people themselves and young people) provided various services at home to about 200 disabled and bed-ridden elderly people.

In February and March the project was expanded to three more territories. Two are in the Tomsk region (Asinovsky district and Kolpashevsky district) and one district in Novgorod region, involving up to 80 more people in the project. New centres received full financial and administrative support from the local government.

Home care together with first aid and psycho-social support (PSS) were chosen as subjects for training that beneficiaries of the programme could take to improve their capacities for coping with difficulties they might face in future. PSS work-shop for 122 elderly people, Red Cross and social workers was organized in Novgorod and between September and December, several seminars on home care and first aid were organized both in Tomsk and Novgorod for Red Cross nurses, volunteers and beneficiaries involving about 70 people, which will contribute to an improved quality of the programme.

In the second part of 2008 beyond the planned activities, a Red Cross call-centre was established in Novgorod to address the needs of elderly people. Since its creation, it responded to 1,386 inquiries. This initiative was very much appreciated by the target group.

Beneficiaries of the Russian Red Cross programme regularly met representatives of the local and regional authorities. In Tomsk, as a result of Red Cross advocacy the regional public chamber initiated inspections and subsequently took some measures in various health institutions that did not provide full access to elderly people. In May, the Red Cross chairperson in Tomsk took a series of complaints by older people to a meeting of the regional health control board. These mainly related to situations where older people had been asked to pay for services which should be free. In October, the control board reported on their own investigations and confirmed that abuses had happened and that fines had been imposed. There was coverage of the abuses and investigations in the media.

Elderly people describe improved access to services and reduced vulnerability through their co-operation with social policy-makers, their interests and opinions are taken into account in the design of policies and budgets in the regions. In Tomsk, as a result of Red Cross advocacy the regional public chamber initiated inspections and subsequently took some measures in various health institutions that did not provide full access to elderly people. Following the requests by the Novgorod Red Cross branch health institutions introduced extra hours for elderly people to attend doctors. They also expressed their improved feelings of self worth and self-respect with their greater knowledge and familiarity with their rights; social interaction with their peers and increased involvement in the wider society.

### **Challenges or Constraints**

Despite of the successful implementation of the programme in the target regions, the capacity to disseminate to other branches in Russia is limited by the lack of a single policy towards Active Ageing at the Russian Red Cross head-quarters level. For the time being, this policy exists only at the programme level.

## Working in partnership

The Russian Red Cross and the International Federation's regional representation have made strides in strengthening partnerships that have had a demonstratively positive impact on programme implementation. In the case of the TB prevention programme, local authorities and TB research institutes have helped to strengthen TB services, which in turn contribute to improved patient adherence to treatment. At the regional level, local authorities in the three target regions decided to sustain Red Cross programmes in TB prevention through direct governmental financing. The Red Cross, together with the regional representation, takes an active part in the work of multi-sector high level working group on TB prevention that includes state authorities, federal TB institutes, WHO and the European Commission. It allows the sharing of programme experience and better advocacy.

In the field of HIV prevention, the Red Cross works closely with the Russian Harm Reduction Network and the PLHIV Federal AIDS Center AIDS Foundation East-West (AFEW) Y-Peer international network which allows it to advocate actively for their right to make decisions and regulate HIV prevention policy. Due to cooperation established with the local authorities, Orenburg and St. Petersburg regional branches are able to provide effective social support to PLHIV released from prisons. Former inmates receive assistance in getting access to medical treatment and to any kind of state bureaucracy work.

Regional Red Cross branches working with elderly people improved their cooperation with the public council on elderly people's protection and with the regional bar association, social departments and the ombudsman office.

The government has changed its position towards international humanitarian actors operating in Russia. Several times in recent years it has been stated that Russia no longer expects financial support from international organizations and NGOs but rather wants technical expertise and advice. The government issued a new decree which requires recipients to pay 28 per cent tax on donations. Fortunately, the Russian Red Cross convinced the government to exempt the International Federation and partner societies.

Several partner National Societies, including the Swedish Red Cross, the Norwegian Red Cross and the British Red Cross either closed or scaled down their programmes in Russia in the past year.

At the same time a new model was introduced into relations between the International Federation and the Russian Red Cross that defines the role for the regional representation in the provision of membership services, including capacity building. One of the most important achievements of this new approach was the entry of the Russian Red Cross into the Global Alliance.

## Contributing to longer-term impact

Peer-to-peer methodologies in transferring knowledge in DOTS and DOTS+ in TB intervention are proving to be more effective than any other method used in traditional training sessions. The International Federation will continue to develop these methodologies and best practices.

At present, the Russian Red Cross and the International Federation representation are focused on developing a system to support MDR TB patients adhere to their treatment regimes. Support for these patients is different to that of patients with regular TB, both quantitatively and qualitatively.

The experiences garnered from running the Beslan programme and the DREF operation in Kemerovo were used to develop a joint concept of psycho-social support that could be used in all traditional spheres. A psycho-social support component will become an integral part of the ongoing health and care and social inclusion programmes, and in future could be used for other Red Cross activity. Effective training of the staff in the Beslan programme enabled the Red Cross to assist refugees of the conflict in South Ossetia at short notice and to launch a longer term operation of psycho-social support.

Through the HIV prevention programme, Red Cross branches in the target regions have increased their capacities in monitoring and evaluation that involve PEPFAR (US President's Emergency Plan for AIDS Relief), UNGASS (United Nations General Assembly Special Session) and Global Alliance indicators. New mechanisms were created to provide effective communication between the headquarters and the regional branches. The regional representation makes regular trips to evaluate the level of programme management at the regional level. Trainers, including target group members, prepared by the Russian Red Cross, have acquired sufficient knowledge and are highly motivated to continue their educational activities even after the end of the programme.

## Looking ahead

Financial support for the programmes on HIV prevention and for elderly people from the British, Norwegian, Swedish and British Red Cross Societies and also partly from USAID finished at the end of 2008, while the Beslan programme ends in February 2009 and the peer education programme in May 2009. In this regard the Russian Red Cross and the regional representation will focus their work on support of the regional branches by developing the programme activities without international financial support channelled through the International Federation.

The Russian Red Cross has been working actively within HIV and AIDS for years and joined the Global Alliance on HIV and TB in December 2008. Cooperation with the International Federation to develop its programmes within the alliance will go on. Programmes on TB prevention will continue and be expanded to the Republic of Buryatia. It is also planned to strengthen the diagnostic control component of the programme.

How we work	
<p>The International Federation's activities are aligned with its 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".</p>	<p><b>Global Agenda Goals:</b></p> <ul style="list-style-type: none"> <li>• Reduce the numbers of deaths, injuries and impact from disasters.</li> <li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li> <li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li> <li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li> </ul>
Contact information	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> <li>• <b>In Russia:</b> Raisa Lukutsova, Chair person, Russian Red Cross; phone +007 495 126 7571; email <a href="mailto:mail@redcross.ru">mail@redcross.ru</a></li> <li>• <b>In Russia:</b> Jaap Timmer, Regional Representative, Moscow; phone + 007 495 126 15 66; email: <a href="mailto:jaap.timmer@ifrc.org">jaap.timmer@ifrc.org</a></li> <li>• <b>In the Europe Zone Office:</b> Leon Prop, Deputy Head of Zone, Budapest, phone: +36 1 8884 502; fax: +361 336 1516; email: <a href="mailto:leon.prop@ifrc.org">leon.prop@ifrc.org</a></li> </ul>	