

# OPERATIONS UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## UZBEKISTAN: DROUGHT

20 June 2002

*This Ops Update is intended for reporting on emergency appeals.*

*Appeal No. 27/01*

*Launched on 21 August 2001 for CHF 1,006,653 (USD 631,000/ EUR 723,000)*

*(Note: the original appeal erroneously indicated an operational length of four months, but the actual appeal plan envisaged a nine-month operation, with food distributions scheduled for January and March. The final report will therefore be issued by August 2002).*

*Beneficiaries: 20,000 beneficiaries with food assistance and over 150,000 with essential drugs and preventive health care*

*Operations Update No. 3; Period covered: 26 January - 3 April 2002*

### “At a Glance”

*Appeal coverage: 75.6%*

*Related Appeals: Europe Central Asia regional programmes, Annual Appeal no. 01.52/2002*

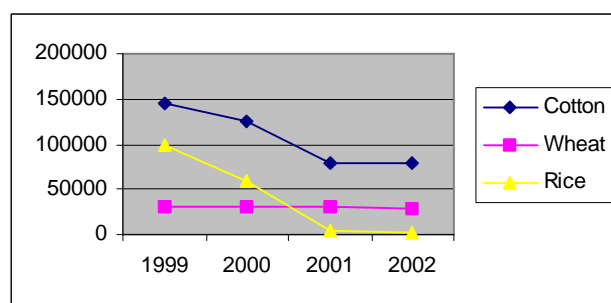
*Outstanding needs: CHF 275,465 (USD 172,000 / EUR 189,000)*

*Summary: It is hoped that this year's harvest will enable the local population to restore their coping mechanisms. Supplementary food rations, delivered during a second distribution, should cover nutritional requirements for over 30,000 people for the forthcoming months before the first crops are collected. This is backed by the provision of essential medicines, currently prescribed at 30 medical institutions throughout the region. 103 health care workers and Red Crescent Society volunteers received training in treating respiratory infections, diarrhoea and anaemia. Now their main challenge is to deliver the knowledge to 150,000 community members and prevent common illnesses spreading. This aspect of the operation is vital in light of the seasonal increase of acute respiratory infections and the coming hot summer months, when diarrhoea rises. The Red Crescent Society of Uzbekistan is planning to install an early warning system throughout nine of the worst drought-affected districts, so that this slow-onset disaster can be monitored and the need for further intervention assessed.*

### **Operational Developments**

The operation, launched in response to the Uzbekistan government appeal for help on 26 May, 2001, is in its final stage with the on-going second distribution of 240 metric tonnes (MT) of food commodities to 4,593 large families (over 32,800 beneficiaries). The operation was initiated to address immediate needs of the population in two out of nine drought-affected rayons during the winter period. Limited intervention is motivated by an intention to assess the effectiveness of assistance versus actual community needs, as well as to avoid building dependency among the recipients and the local government. Meanwhile, the situation in the region remains critical, with insufficient water supplies both for drinking and irrigation. According to the

Cabinet of Ministers of Karakalpakstan, supplies of irrigation water are sufficient to de-salinate only 23% of the soil for planting. The table below reflects drastic reduction of the area planted with food crops over a four-year period.



As this table shows, cotton planting dropped from 145,000 ha in 1999 to 80,000 ha in 2002, and rice planting from 100,000 in 1999 to only 2,000 to maintain the republic's seeds stocks in 2002. The situation is aggravated by the fact that crop production dropped from 2.5 to 0.72 MT per ha for cotton, and from 3.5 to 0.42 MT per ha for

wheat. Limited availability of the food crops in the republic leads to an increasing flow of imported commodities (e.g. wheat flour) to the local markets, which, in combination with high unemployment rates, impacts heavily on the population's coping mechanisms.

Depletion of the volume of irrigation water is accompanied by rapidly dropping availability of drinking water from both surface and underground sources. The water level of Tuyu-muyun, one of the main water reservoirs, supplying over 80% of Karakalpakstan with water, dropped to 2 km<sup>3</sup> against 4.2 km<sup>3</sup> in 2001. Since part of the water supplies of Amu Darya river are utilised by Afghanistan, Turkmenistan, and Khorezm oblast of Uzbekistan, it is unlikely that volumes of water, reaching Karakalpakstan, will increase unless negotiations are conducted at inter-governmental level.

Lack of access and poor quality of drinking water causes increasing incidence of infectious and water-borne diseases. The health situation is aggravated by poor knowledge of preventive measures both at the household level and among medical personnel, as well as detrimental nutritional practices prevalent in this region.

The effects of this slow onset disaster will still be found a few years ahead, while the population recovers its coping mechanisms in case water supplies improve rapidly. However, there will still be a need for humanitarian intervention until sustainability is regained. Seed productivity dropped by 40%, meaning that even in case of sufficient irrigation, expected yield will not exceed 60% of the annual norm.

**Red Cross Red Crescent action w**

**Relief distributions w**

**Objective 1:** To support the nutritional status of the most vulnerable groups through distribution of supplementary family rations to 20,000 selected beneficiaries in Chimbai and Kegeili rayons of Karakalpakstan.

Due to the failure to contract a green mash (pulses) supplier for the required 41,600 MT of commodities in a given time, National Society and International Federation agreed to exclude it from the food rations delivered in the first food distribution cycle and add double amount (100%) of pulses during the second distribution cycle. Hence, every beneficiary family received the following amounts of food commodities during the first distribution: wheat flour (18.2 kg), rice (10.8 kg), vegetable oil (8 l), iodized salt (2 kg). A total of 162 MT of listed food items were delivered to 4,145 beneficiary families in both rayons within one month of relief distribution in February, 2002. The table below reflects finalised beneficiary numbers for the first distribution cycle as well as predicted beneficiary population for the second cycle of distribution, which commenced in April, 2002:

	Kegeili rayon		Chimbai rayon		Total	
	families	people	families	people	families	people
<b>1st distribution</b>	1,490	10,320	2,655	19,215	<b>4,145</b>	<b>29,535</b>
<b>2nd distribution</b>	1,716	12,040	2,877	20,768	<b>4,593</b>	<b>32,808</b>

The number of beneficiary families for the second distribution increased due to the appeal procedure, applicable for all those families matching the selection criteria but for some reasons not included into the distribution lists. A total of 710 families appealed in terms of the first distribution and 585 out of them were included into the second distribution and will receive the entire amount of food they are entitled (i.e. double rations). Each individual appeal was reviewed by the humanitarian commission, composed of the local Red Crescent Society representatives, heads of the village councils and local administration.

Food commodities, donated by the American Red Cross in kind, were located in Khorezm oblast of Uzbekistan and were supposed to be brought from there. However, in order to speed-up commencement of the second distribution, the National Society and the International Federation sought consent of the American Red Cross to utilise an equivalent amount of the food commodities stored in Karakalpakstan and earmarked for the forthcoming Aral Sea programme relief distribution. This was done on the condition that the Federation reimburses the cost of delivery of commodities from Khorezm at a later stage. According to a preliminary agreement with the American Red Cross, all undistributed food commodities donated in terms of drought response operation, shall be returned to the donor by the end of the second cycle of the distribution.

After investigation of the local market, the National Society succeeded to hire a supplier company which committed to deliver 41,600 MT of green mash (pulses) to the warehouse in Nukus, Karakalpakstan, which was done on time for the second distribution. This enabled the National Society to review the food ration composition in a following way: wheat flour (18.2 kg), rice (10.8 kg), vegetable oil (8 l), iodized salt (2 kg) and green mash (8 kg). A total of 239 MT of food commodities will be released for the second distribution, which will comprise a total of 401 MT of food commodities delivered to the beneficiaries in two distributions.

The second distribution, started in April, 02, 2002, will cover a total of 4,593 beneficiary families (32,808 people) and last till the beginning of May, 2002.

All the on-going relief distributions are subject to independent monitoring, conducted by the Federation locally recruited staff prior, during and after the distribution. According to donor's requirements, 2% of total beneficiary population undergo pre-distribution monitoring and 5% of the beneficiaries are interviewed after the distribution, part of the post distribution monitoring process.

## **Health w**

**Objective 1:** To reduce the effect of the water-borne diseases, acute respiratory infections (ARI) and anaemia in the selected rayons to prevent further increase in vulnerability.

Medical kits, containing 8 items of basic medicines, have been delivered to 16 rural hospitals and clinics in Chimbai and 14 in Kegeili rayons of Karakalpakstan, enabling the prevention of the spread of acute respiratory infections and diarrhoea among the general population and a reduction in anaemia among pregnant and lactating women. Over 3,000 outpatients and people, undergoing hospital treatment, benefited from this humanitarian assistance within one month. In addition to that, medical personnel of the beneficiary institutions report increasing number of patients attendance due to enhanced free access to sufficient treatment.

Disbursement of medicines is implemented in accordance with standard WHO requirements and is registered through specifically designed reporting formats. All beneficiary institutions are regularly visited by the National Society's health co-ordinator and the Federation monitors with an objective to oversee accurate and impartial disbursement of medicines upon request and promote their correct prescription in accordance with WHO standards.

**Objective 2:** To launch a health promotion campaign and public awareness programme on water-borne diseases and other communicable infections to decrease the suffering from these illnesses.

In support to in-kind donation of medicines 69 health care workers from Kegeili (36 people) and Chimbai (33 people) rayons passed through a series of workshops on ARI, diarrhoea and anaemia prophylactics, run in co-operation with the Karakalpak Regional Training Centre, supported by MSF. Training shall also be delivered to 34 community workers and Red Crescent Society volunteers, who will proceed with further grass-roots education activities on the spot.

Three types of prophylactics posters and booklets (on diarrhoea, ARI and anaemia prevention) were designed and translated into Karakalpak language by the National Council of the Red Crescent Society in co-operation with the Ministry of Health and the Ministry of Education. The National Society is planning to issue posters

and booklets in Uzbek and Karakalpak languages to be distributed among medical institutions, schools and public establishments around the drought-affected area. Education materials will be used by the Red Crescent Society volunteers and health workers in support to their health education and public awareness activities at community level. In addition, it is planned to produce flyers on main characteristics of donated medicines and their proper utilisation in order to avoid overdose.

**Objective 3:** To provide 30 water filters to selected health posts and institutions.

30 stainless steel water filters with a capacity of 20 litres each, have been delivered to every beneficiary medical institution in two rayons, and installed in the area accessible for patients. Availability of safe drinking water is monitored by the National Society and Federation representatives on regular basis.

### **National Society Capacity Building w**

A Coherent and participatory way of programming enables the National Society and the Federation personnel to share experience and mutually enhance their operational skills and capacity. This process has been supported by comprehensive training in logistics, relief and monitoring techniques, delivered prior to distribution, as well as on-the-job coaching during joint implementation of all the operation's aspects.

The National Society's medico-social co-ordinators' involvement in health education workshops, run by the MSF trainers, enables them to take over training facilitation techniques and conduct similar sessions independently in future.

The National Society branches of Chimbai and Kegeili, the rayons in which the drought operation took place and supported by their volunteers and staff of these two branches, will get basic support for the branch office by improving the communication through a telephone line and will be provided with a basic furniture and stationary materials.

### **Federation Delegation w**

The Federation regional field officer continues providing daily support to the Red Crescent Society branch, making sure that relevant reporting time frames and requirements are met and maintaining close relationships with other NGOs in the region. Operation is implemented with support and under direct supervision of the Federation Regional Disaster Preparedness and Health Delegates, as well as logistics, administrative and finance departments. In-country support is provided by the Federation Representative Office in Tashkent, Uzbekistan. Sufficient input into success of this operation is made by the Aral Sea programme delegates and staff, located in Almaty, Tashkent and Nukus, also representing one of the donors (American Red Cross). Furthermore, a direct monitoring and follow up to the operation was made by the Regional DP Delegate during his visit, late March 02, to the operation site and met with the local authorities and the NS leadership as well as the operational team in Karakalpakstan.

### ***Coordination***

The project is implemented in close co-operation with the local administration, village councils, medical institutions and non-governmental organisations. Such partnership allows to facilitate logistical (storage and transportation of goods), relief (assistance at the distribution points, crowd control, security), educational (facilitation of the training, work with the community) and other aspects of operation implementation.

Recently, Federation representatives in co-operation with the MSF office in Nukus initiated regular inter-agency co-ordination meetings to maintain close links with other international NGOs in the area as well as to avoid overlapping of efforts and discuss possible co-operation and coordination elements.

### ***Outstanding needs***

Positive donor response for the operation enabled all planned activities to be implemented. However, the situation in the region remains fragile, as the impact of this slow on-set disaster continues to unfold. It is planned that the disaster early warning system - in about nine of the most hit regions of Karakalpakstan (with a population of 350,000 people) - will be run by a network of volunteers. Information on food availability, local market prices, population migration and coping mechanism, the health situation, access to infrastructure and

other indicators will be collected, processed through the database and analysed on regular basis, allowing to assess possible humanitarian scenario and possible need for further intervention.

A growing incidence of water-borne and infectious diseases - in combination with a lack of healthy treatment and nutritional practices among population - causes a strong demand for continuing health education activities. It is planned to expand health care training into the community level as well as to increase the number of printed health education materials to reduce the incidence of these illnesses among the affected communities.

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*All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.*

*This operation seeks to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or longer-term capacity building will require additional support, and these programmes are outlined on the Federation's website.*

*For further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>.*

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<b>Uzbekistan</b>						ANNEX 1
<b>APPEAL No. 27/2001</b>		<b>PLEDGES RECEIVED</b>			16.05.2002	
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
<b>CASH</b>						
REQUESTED IN APPEAL CHF ----->				<b>1'006'653</b>		<b>TOTAL COVERAGE 75.6%</b>
AUSTRIAN - RC		72'700	EUR	110'431	31.08.2001	
CANADIAN - GOVT/CIDA		99'000	CAD	103'901	10.12.2001	
DANISH - RC		5'960	DKK	1'204	01.10.2001	
JAPANESE - RC				33'000	05.10.2001	
MONACO - RC		50'000	FRF	11'465	21.08.2001	FOOD RELIEF
NORWEGIAN - GOVT/RC		539'374	NOK	100'748	15.11.2001	
NORWEGIAN - GOVT/RC		539'374	NOK	102'820	15.02.2002	SECOND TRANSFER
SWEDISH - GOVT		250'000	SEK	38'750	13.12.2001	
PRIVATE DONORS				37	19.11.2001	
<b>SUB/TOTAL RECEIVED IN CASH</b>				<b>502'356</b>	<b>CHF</b>	<b>49.9%</b>
<b>KIND AND SERVICES (INCLUDING PERSONNEL)</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
AMERICAN - GOVT/RC		136'681	USD	229'487	27.10.2001	180 MT FLOUR, 110 MT RICE, 83.25 MT EDIBLE OIL
DANISH - RC		145'275	DKK	29'345	01.10.2001	DRUGS, TRANSPORT & INSURANCE
<b>SUB/TOTAL RECEIVED IN KIND/SERVICES</b>				<b>258'832</b>	<b>CHF</b>	<b>25.7%</b>