

# ***CHERNOBYL HUMANITARIAN ASSISTANCE AND REHABILITATION PROGRAMME: BELARUS, UKRAINE, RUSSIAN FEDERATION***

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*The new phase of CHARP became fully operational during the first quarter, when the six Mobile Diagnostic Laboratories screened 18,310 people in the three affected countries, more than last year, but below this year's expanded target requirements. The number of thyroid gland cancers detected -- 16 -- is close to the total figure for 1997. The Psycho-Social Support Programme continued with training in Belarus. The sourcing of long-term funding remains a concern*

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## ***The context***

The explosion 12 years ago - on 26th April, 1986 - of the Chernobyl nuclear power plant's fourth unit produced the world's worst nuclear accident, contaminating an area of approximately 120,000 sq. km in Ukraine, Belarus and the Russian Federation.

Since the launch in June 1990 of the Red Cross Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP), health screening has been made available to hundreds of thousands of people in the three affected countries. In 1996, a new Plan of Action was adopted. Its main features were to introduce an increase in thyroid gland screening from 60,000 to 90,000 people per year and to develop a psycho-social support programme. Six new Mobile Diagnostic Laboratories (MDLs), which last year replaced those functioning since 1992, facilitated the increase in examinations. Three new MDLs are operating in Belarus, two in Ukraine and one in Russia. The increase in examinations is designed to tackle, through early diagnosis the most urgent health consequence of the accident -- thyroid gland cancer in young people.

In addition to medical screening, the Red Cross Programme distributes milk powder and vitamins among children living in contaminated areas.

The Psycho-Social Support (PSS) Programme aims at helping the population living in contaminated territories to overcome radiation-related stress and anxiety. Psycho-social support tools and simple, reliable and accessible information are being developed to help the community to cope with the disaster. Initiated in Belarus in 1997, the Programme is being implemented through the visiting nurses service of the

Belarus Red Cross. The PSS is to be evaluated later this year and expanded into contaminated areas in Ukraine.

The Red Cross Programme is unique in that it serves the population *on the spot* - especially in remote areas. It provides instant medical information and referrals, and is available to both adults and children.

## ***Latest events***

### **Ukraine**

The current severe crisis in Ukraine's energy supply system, and the limited funding for upgrading and maintaining equipment, means there is a real likelihood of serious accidents at the nuclear power plants. According to media reports, in the last three months of 1997, nine accidents occurred in Rovno, Zaporozhya, Khmelnytsky and South Ukraine nuclear power stations. Reactors had to be shut down on several occasions.

At Chernobyl, all reactors are currently under repair. Unit No.3 will probably be restarted this month (May). Renovation of the sarcophagus covering the 4th reactor is due to start soon. Tonnes of radioactive ash accumulated under the cover could cause another nuclear disaster in the event of an accident. Repairs to the sarcophagus are estimated at USD 760 million -- with pledges so far amounting to about 50% of this amount. The Chernobyl plant is expected to be shut down by the year 2000; however, the Ukrainian authorities are adamant this will only happen once new reactors are completed at the Rovno and Khmelnytskaya plants. Otherwise, says the Ukraine Environment Minister, the third reactor could be upgraded to operate for a further 10-15 years.

The European Bank for Reconstruction and Development has not yet finally decided on financing the completion of the reactors, for reasons of safety and economic expediency. Alternative proposals suggest that the upgrading of power plants in Ukraine would compensate for the closure of Chernobyl, as well as reducing consumption of imported oil and gas. Furthermore, with the declining economy, "Ukraine will not need additional facilities until the year 2010", according to a special study for the EBRD.

### **Belarus**

The Belarus Minister for Chernobyl has expressed concern that recent international aid has been largely confined to technical assistance for the sarcophagus and power plant. With 30% of its territory contaminated, Belarus is the country most affected by Chernobyl. Facing growing economic difficulties after the collapse of the USSR, the republic cannot give up such large areas and economic and agricultural life continues there. Tens of thousands of people in Belarus, as in Ukraine and Russia, continue to live in heavily polluted regions. Locally produced staple foods such as milk, meat, vegetables and fruit often contain significant levels of radioactivity, but because of the poverty and economic backwardness of contaminated areas people are *obliged* to consume local produce.

### **Russian Federation**

In the Russian Federation, Chernobyl allowances are being reduced in local and Federal budgets. The so-called "liquidators" (those involved in the clearing up during the immediate and most dangerous aftermath of the accident) have suffered delays in receiving their disability allowances; some have gone on hunger strikes, others face problems because of numerous fraudulent claims.

## ***Red Cross/Red Crescent action***

The beginning of 1998 saw the full-scale initiation of a new phase of CHARP, with the main aim of increasing the numbers of people screened from 60,000 to 90,000 per year. All new MDLs have now cleared customs and are in action. (The MDL in Bryansk was finally cleared in February, after procedures that dragged on for nine months).

### **Medical Examinations •**

In the first quarter of 1998, the six Red Cross MDLs examined 18,310 people in contaminated areas. The medical information shows a significant level of various health pathologies: in every region, there is a year-by-year growth in diseases of respiratory, endocrine, nervous and blood circulation systems among the population screened by the Red Cross teams. During the first quarter, the MDLs referred 1,739 adults and 1,279 children for further diagnosis/treatment while ambulatory treatment was prescribed for 1,934 adults and 2,037 children, partly by Red Cross doctors on the spot.

The ultrasound screening checked 17,288 people: 7,891 adults and 9,397 children. Sixteen cases of thyroid gland cancer were detected in 14 adults and 2 children. (In Belarus: Mogilev - 5 adults, in Brest - 1 adult and 2 children, in Ukraine: Rovno - 8 adults.) Sixteen cases is a significant increase compared to 1997, when 19 cases of cancer were detected for the whole year.

The number of people referred for further examinations due to suspected thyroid cancer was 212. Most of these were in the Brest region of Belarus, thus justifying the decision to place an MDL there. Since it began operating, the Brest MDL has detected hundreds of serious thyroid pathologies. The region was recognised as having been affected by Chernobyl much later than elsewhere, so medical activities have not been so extensive, leaving numerous health problems undetected in the population.

### **The International Chernobyl Co-ordination Committee (ICCC) •**

An extended meeting of the International Chernobyl Co-ordination Committee (ICCC), was held in Kiev, 11- 13 March. (See previous sitrep). Its position on the long term funding needs of the Programme were made known to the donors' meeting on Chernobyl, held in Geneva on 26 March on the initiative of the UN Office of the Co-ordinator of Humanitarian Affairs (OCHA).

### **Psycho-Social Support (PSS) Programme •**

In March, the Federation Psycho-Social Support Delegate returned for another mission in order to recruit a new local Programme Co-ordinator for the Programme following his predecessor's dismissal. The new Co-ordinator, a trained psychologist, is familiar with the Red Cross PSS Programme, having taken part in the first Training of Trainers Workshop in May 1997, in Gomel, Belarus; he had previously worked in the Centre for Psychological and Pedagogical Problems of Chernobyl. After taking up his post on 23rd March, he participated in preparations for the MDLs' Staff Workshop (29 March - 3 April), where he ran PSS training during group work..

### **Training •**

There has been positive feedback from PSS training carried out together with the MDL staff and regional chairpeople. Many participants expressed the wish that MDL staff, nurses and social workers be provided with a handbook on psychological support. Another proposal was to start sending the Red Cross PSS workers to the field to counsel serious cases, as well as to demonstrate methods of psychological assistance, thereby upgrading the skills of MDL staff.

The Trainers conducted four one-day workshops on the PSS tools for the social workers and volunteers of the Belarus Red Cross in Brest and Mogilev regions. The 43 people who took part will use the tools in their daily activities. Plans to spread the PSS component to Ukraine are underway.

From 30 March to 4 April, the second practical workshop for MDL staff was held in Gomel, Belarus. The main aim was to facilitate the exchange of experience between the members of the mobile teams, upgrade the Psycho-Social Support skills, evaluate the results and activities of 1997 and discuss new targets and implementation for this year. The scientific element of

the workshop was presented by the WHO Co-ordinator of the Thyroid Gland Project. Three MDL doctors shared their knowledge after a two-month training course in Japan.

#### **Other Issues •**

Multivitamins funded by the Japanese Red Cross were purchased for USD 21,867 and supplied to the affected regions of Belarus, to be distributed through schools and educational establishments. Vitamins for affected areas of Ukraine and Russia will be purchased with the ECHO budget.

Currently, the stock of reagents is sufficient to facilitate operation of all MDLs for 1998.

### ***Outstanding needs***

Although the number of people examined was higher than in previous years, the figure of those checked (18,310) is below the quarterly target. This is partly a result of late customs clearance of the Bryansk MDL. The annual target may not be reached if leave and a forthcoming training course for endocrinologists are taken into account. In addition, screening 70 people per day is difficult, when carried out in remote, scattered villages with small populations.

During a monitoring visit, an ECHO representative saw four MDLs in action as well as a Psycho-Social Support component. His overall impression was positive, although he voiced concerns about reporting, which over four years of ECHO support has become routine, and needs clearer presentation of medical data. Clarification on all the points raised was included in the latest report to ECHO.

### ***External relations - Government/UN/NGOs/Media***

At the beginning of March, a full-page article about the Chernobyl Programme was published in a local newspaper, accompanied by photographs taken in the field showing emblems of both ECHO and the Federation.

The ICCC meeting in Kiev was extensively covered in the local media; several TV and radio reports were broadcast nationally, in addition to numerous newspaper articles mentioning CHARP donors and participants.

As a follow-up to the ICCC meeting in Kiev, the Netherlands Ministry of Foreign Affairs has asked its National Society for a funding proposal.

The launch of the MDL staff workshop in Gomel was covered by Belarus radio and shown on local and Belarus TV; once again, emblems were clearly visible.

On the eve of the 12th anniversary of the Chernobyl accident, the Head of the Federation's Minsk Delegation and the President of the Belarus Red Cross held a press conference on the Chernobyl programme. About 15 journalists representing the major Belarus newspapers, radio and TV attended. Some of their articles queried whether funding for 50% of the CHARP programme could be raised locally in three years, as envisaged in the funding strategy adopted by the ICCC .

The Delegation has a good working relationship with the local WHO Office; as mentioned above, the WHO representative took part in the MDLs workshop.

## *Conclusion*

In the first quarter the more sophisticated equipment of the MDLs, used alongside intensively trained personnel, has led to the detection of 16 cases of thyroid gland cancer - nearly the annual figure for 1997.

The extended ICCC meeting was an important step forward in securing future sustainability. A joint summit of ONSs and PNSs representatives confirmed the need for continuation of the CHARP and accepted the funding strategy until the year 2006. The visit by the ECHO representative, CHARP's major donor for the last four years, was also highly important, to determine future perspectives on further ECHO support.

The MDLs of the CHARP are mainly operating in remote contaminated villages, where such high quality services have never been available, and are unlikely to become so in the near future. They offer thousands of people objective information on their health, enabling them to act both to prevent and treat detected diseases. Timely diagnosis - a major but missing link in health care throughout the contaminated areas - remains a prerequisite for saving the lives of those who became the victims of the world's worst nuclear accident.

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