

Appeal 2005



CHERNOBYL HUMANITARIAN ASSISTANCE AND REHABILITATION PROGRAMME (CHARP) BELARUS, RUSSIA, UKRAINE

Appeal no. 05AA72

Appeal target: CHF 850,112

The International Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. The Federation is the world's largest humanitarian organization, and its millions of volunteers are active in over 181 countries.

[Please click on programme title to go to relevant text](#)

Programme title	2005 in CHF
Strengthening the national society	
Disaster management	850,112
Total Please click here to view the total budget for this appeal	850,112¹

Related appeals:

CHARP Annual Appeal 2004 (01.81/2004) [please click here to go to the appeal](#)

Belarus, Moldova, Ukraine Annual Appeal 2005 (05AA071) [please click here to go to the appeal](#)

Russian Federation Annual Appeal 2005 (05AA073) [please click here to go to the appeal](#)

¹ This amount corresponds to USD 674,920 or EURO 550,295

Context

On 26 April 1986, the world witnessed the worst accident in the history of the civil nuclear industry, when a nuclear reactor at the Chernobyl power plant exploded in northern Ukraine, spewing tons of cancer-causing isotopes around the world and contaminating vast areas in Belarus, Ukraine and the Russian Federation. Radioactive pollution in these countries occupies an area three times bigger than the territory of Denmark. The United Nations (UN) estimates that nearly seven million people continue to live in contaminated areas.



Over 18 years, Chernobyl still casts a shadow over millions of people living in contaminated areas in Belarus, Ukraine, and Russia

The health consequences of the disaster continue to be studied. To date the only pathology that can be attributed to radiation exposure as a result of the accident is an increase in thyroid cancer among individuals who were children at the time of the accident. The thyroid cancer incidence rate among people exposed to radioactive iodine stands at 100 cases per 100,000 people – that is 16 times higher than in countries not affected by a nuclear accident.

Scientists predict that the incidence will peak during 2006-2020. The psychological and social impact of the accident on the population living in the contaminated areas is evident and the plight of the affected people has been highlighted at numerous international Chernobyl conferences.

Since 1990, the International Federation together with the national Red Cross societies of Belarus, Ukraine and Russia has been running the Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP) to address the basic health needs of those living in highly affected regions of the three countries. The social-economic difficulties that have arisen since the break-up of the Soviet Union have only added to the tragedy, rendering Chernobyl victims even more vulnerable. For most of them, the Red Cross is the only organisation providing health support and medical advice, and most importantly screening for radiation-induced health effects.

The goal of CHARP is the provision of thyroid health screening and psychological support to the affected population to reduce and mitigate the impact of the disaster. The programme objective is to identify as soon as possible thyroid gland cancer and other thyroid pathologies of people in the most remote areas, where state health authorities have little, if any, capacity. The Red Cross programme is an attempt to bridge the detection gap. It focuses on high-risk groups: those who were under 18 years at the time of the accident as well as those who still live in highly contaminated areas. The services are rendered by six mobile diagnostic laboratories, three of which are situated in Brest, Gomel and Mogilev regions of Belarus, two in Rovno and Zhitomir regions of Ukraine and one in Bryansk region of Russian Federation.

The overall daily management, planning, budgeting, reporting and training of personnel are carried out by the national societies' CHARP teams. Each operational Red Cross national society has a CHARP coordinator at its national headquarters. Red Cross branch chairpersons in the regions where the mobile diagnostic laboratories are based undertake management responsibilities in coordination with local authorities and specialised medical dispensaries. The Federation's delegation in Minsk, via the CHARP programme coordinator, coordinates and facilitates humanitarian efforts to improve the lives of those affected (For further details, refer to the Coordination, Management and Strategic Partnership section.)

After 14 years of programming, CHARP specialists have accumulated unique practical expertise, such as providing medical screening in remote areas, rendering psychosocial support and performing fine needle biopsy in the field. The

result is quality and cost-effective services to the most vulnerable population. From the beginning, the programme has contributed towards a better understanding of how to: support the affected population; establish ways of early detection of serious disease; improve quality of living; and provide necessary psychological support. It has also highlighted the important role of the Red Cross and Red Crescent in the preparedness for and response to technological disasters. This expertise is available to others, if ever needed, through the International Federation and national societies engaged in Chernobyl.

Red Cross and Red Crescent Priorities

National Societies Strategy

Since the first days of the Chernobyl disaster the Red Cross national societies of Belarus, Russia and Ukraine have been actively involved in assisting the affected population. These activities continue today helping to alleviate the suffering of those affected.

The Chernobyl programme is among the most important areas of work for the three national societies, in terms of service delivery and building organisational capacity. CHARP has revived a number of the Red Cross branches and increased their visibility. In 1998-99, computers and other office equipment supplied within the CHARP programme to the regional Red Cross committees improved their operational capacity. In addition, the Federation delegation organised numerous workshops and training courses for Red Cross workers on the most up-to-date techniques in providing appropriate medical, psychological and social assistance. Existing visiting nurses networks of the Belarus and Ukraine national societies have been involved in health and social support to vulnerable population groups in areas affected. These nurses provide social and psychological assistance either at home or in medico-social centres. The services are complementary to those of the mobile diagnostic laboratories doctors. Red Cross volunteers, predominantly from pedagogical and medical institutions, are also trained and involved in these activities. Unfortunately, in the Russian region of Bryansk, the visiting nurses service ceased in 1997 because of a lack of funds.

Together with the authorities, the Red Cross societies in all three countries fund part of the running costs: Red Cross office rentals, fuel and vehicle maintenance. However, the ongoing economic crisis has delayed efforts of national societies and local governments to strengthen local sustainability. Efforts are ongoing to ensure greater local resources to support affected populations in the three countries. But continued international support to Red Cross branches involved in the programme is still needed for the time being.

Nevertheless according to CHARP Strategy adopted by the International Chernobyl Coordination Committee (ICCC) in September 2003, national society implementation of CHARP is increasing and this strengthens the programme's sustainability. The direct role of the Federation will gradually decrease in future and focus mainly on coordination of technical support, as well as assistance in planning, financial management, monitoring, international representation and advocacy. It is supposed that at the end of 2006, the role of the Federation will mainly be to coordinate partnership support to the programme.

International Red Cross and Red Crescent Movement Context

The Chernobyl disaster continues to affect the lives of those living in affected regions. In recognition of this, CHARP has continued to receive support from a number of national societies: British and German Red Cross funded the programme in the initial stages. Danish, French, Japanese and the Netherlands Red Cross joined later.

The Finnish, Icelandic and Austrian Red Cross Societies also offered support. In addition, the European Commission's Humanitarian Office (ECHO) was a major donor from 1994 to 1999. At present, the main CHARP donors are the Netherlands Red Cross, the Japanese Red Cross, the British Red Cross and British Government/Department for International Development (DFID).

In 2004, several large scale visits from donor National Societies to the CHARP programme took place, in particular Austrian and Netherlands Red Cross delegations, headed by the general secretaries of these societies. They visited affected areas and familiarised themselves with work of local Red Cross mobile diagnostic laboratories (MDLs). The

visitors discussed Chernobyl issues with the MDL doctors and other specialists, especially concerning the consequences of the disaster, and potential ways of upgrading activities and services provided etc.

To promote CHARP to international audiences in 2004 the Federation together with donor National Societies organized several visits of journalist crews (from Netherlands, Austria, UK, Ireland, Canada, USA, Sky News). The journalists visited MDLs and interviewed patients and MDL doctors, as well as people living in contaminated areas. Red Cross representatives also accompanied journalists to areas abandoned after the disaster as well as the Chernobyl plant itself. As a result of these trips, the journalists highlighted the assistance provided by Red Cross to the most vulnerable people living in contaminated areas, as well as progress in CHARP.

Strengthening the National Society

1. Disaster Management

[Please click here to return to the title page](#)

Background and achievements

Over 14 years, CHARP has provided ongoing essential assistance to affected populations in remote areas. The support includes medical and psychosocial help. Following a Federation evaluation in 2002, the programme was redesigned. Adaptation of the existing programme took into account the type of assistance required and the continued lack of government resources to provide assistance to all in need. The recommendations strengthened the focus on continued screening for thyroid cancer (palpation and ultrasound) of established priority groups (individuals who were 18 years old or under at the time of the disaster and living in highly contaminated areas). As well as thyroid screening, mobile diagnostic laboratories were suggested to carry out diagnosis and treatment of ailments when necessary.



Red Cross doctors working in mobile laboratories in contaminated areas scan up to 70 people a day for thyroid cancer, so far the only pathology that can be attributed to radiation exposure as a result of the accident

Detection of thyroid pathologies and, in particular, thyroid cancer in the early stages is extremely important, to ensure appropriate treatment. For that purpose, those attending mobile diagnostic laboratories for screening receive an ultrasound examination of the thyroid gland. If this is found to be abnormal they are referred to the nearest diagnostic centre where a thyroid biopsy is carried out. This determines whether the thyroid gland is cancerous. Since 1994, laboratory specialists have detected 684 cases of thyroid gland cancer (623 cases in adults and 61 in children). Specialised institutions confirmed these. The number of cancers diagnosed has increased every year, with 180 in 2003.

A number of persons with abnormal scans cannot afford to attend the specialised centres for biopsy. The nearest diagnostic centres may be far away and transport costs are not provided. The programme is gradually addressing this by either carrying out a fine-needle biopsy (specialists travel to the field) or training mobile diagnostic laboratory staff to carry out biopsies on site. At present, specialists of the Brest mobile diagnostic laboratory are performing fine needle biopsies in the field. This has improved immensely the accuracy of diagnosing thyroid cancer.

In Bryansk (Russian Federation) and Mogilev (Belarus), pathologists from the local diagnostic centre were included into the mobile diagnostic laboratory teams to perform fine needle biopsies in district hospitals. In Ukraine a cooperation agreement has been reached between the Ukraine Red Cross and the Institute of Endocrinology and Metabolism. As a

result, specialists of the Institute travel to the field to conduct fine needle biopsies of patients selected by the MDL doctors.

An important issue for the CHARP programme is the existence of a reliable follow-up system of patients' status via closer co-operation between MDL specialists and specialised medical institutions. Regional Red Cross branches use different methods to keep in contact with medical institutions and maintain up to date records of patients referred by MDLs to these institutions e.g. personal contacts, mail, and electronic communication. In addition, to improve feedback within CHARP a new data collection and management system is being created, which will be coordinated centrally from the Federation's Kiev Representative Office. Specialised computer software has been developed and installed in the MDL computers. Data collected in the field is transferred directly to the central server, and will be shared with appropriate medical institutions.

Along with medical examinations CHARP continues to provide psychosocial support to the affected population. This work is carried out by the MDL specialists, Red Cross workers and volunteers. Psychosocial support diminishes stress in the population through delivering accurate information about the long-term health effects of the accident. In 2004, all three operating National Societies have held refresher workshops for Red Cross workers and volunteers on methods and tools for providing psychosocial assistance to the victims of Chernobyl.

In 2004, the technical provision of mobile diagnostic laboratories was significantly improved. Following a generous contribution to the programme, the Netherlands Red Cross logistics services arranged procurement and the supply of new equipment, computers, reagents for the MDLs and multivitamins for children living in highly contaminated areas. Especially important was supplying sophisticated ultrasound instruments (Doppler machines) which provide more precise diagnosing of thyroid cancer.

Between 1990 and 2005, CHARP has assisted approximately 2,850,000 beneficiaries. It has distributed 122 million multivitamin tablets to children in the contaminated areas. In total, 90,000 patients have received social and psychological assistance. The mobile diagnostic laboratories have examined 824,000 people. One-third of those checked were referred to medical institutions for further examination or treatment.

Goal

The health of the population affected by the Chernobyl nuclear disaster is improved. [Please click here to go to the project logframe](#)

Objective

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

Expected results

- Six mobile diagnostic laboratories will have screened 90,000 people for thyroid gland pathologies in the target group of individuals who were under 18 years old at the time of the accident and living in contaminated areas.
- Prevention of death from thyroid cancer because of timely detection and referral to medical institutions for treatment.
- Stress and anxiety linked to radiation is reduced for 15,000 people annually through psychosocial support.



The Red Cross Mobile diagnostic laboratories travel to isolated areas in the contaminated regions, often providing the only source of health assistance to the local population

- Immunity is improved for 24,000 children living in highly contaminated areas through winter supplies of multivitamins containing C, D and B group with iron, folic acid and stable iodine.
- Red Cross National Societies have well trained and equipped mobile diagnostic laboratory teams carrying out diagnosis and treatment of ailments in remote rural areas of the six most affected regions of Belarus, Ukraine and Russia.
- The sustainability of CHARP is increased because of a new management strategy that hands over more programme responsibilities to Red Cross national societies and gradually integrates activities into the health care system.

2. Coordination, Management and Strategic Partnerships

Background and achievements

The Federation's Minsk delegation was established in April 1996 to provide support to the National Societies of Belarus, Moldova and Ukraine. At the same time, the delegation maintained a small representative office in Kiev, with the purpose of providing daily support, coordination and management of the CHARP programme, along with the Red Cross national societies of Belarus, Russia and Ukraine.

At present, the CHARP programme is supervised and coordinated by the International Chernobyl Coordination Committee (ICCC), composed of the presidents of Ukraine and Russia Red Cross, the General Secretary of Belarus Red Cross, and the head of the Federation's delegation in Minsk, with participation of the CHARP programme coordinator. The main tasks of the ICCC and the Minsk head are to develop the programme strategy. The Minsk delegation coordinates strategy implementation in accordance with international standards and the role and policies of the International Federation. In these tasks, it works closely with all levels of the Red Cross national societies.

Starting from 1st January 2004, CHARP has been working on the basis of a new management structure recommended by the Netherlands Red Cross evaluation carried out in April 2003. In accordance with the new management structure the national societies of Belarus, Ukraine and Russian Federation took over responsibilities for the general planning, budgeting, reporting, staff training, logistics support and overall day-to-day running of the Chernobyl programme. A local manager was nominated in each national society for this purpose. The Red Cross branches in the regions where the CHARP teams operate now report directly to this local manager, who is based at national society headquarters. As in all other projects funded by the Federation (or through the Federation) all operational activities in the field are carried out by the local national societies. In this context, the implementing role of the Federation is focused on coordination of technical support, as well as support in planning, financial management, monitoring, international representation and advocacy. The strategy also presupposes further integration of the programme into the respective State health systems to enhance sustainability.

The programme coordinator based in Kiev carries out overall management. The day-to-day management of CHARP at the country level is through programme managers of the three National Societies. At the regional level, chairpersons of regional Red Cross committees run the programme where the mobile diagnostic laboratories are based, in conjunction with local authorities and specialised medical dispensaries. The complete management and implementation structure is:

- 30 personnel of six Red Cross mobile diagnostic laboratories carrying out day-to-day medical screening and rendering psycho-social support in the field;
- Six oblast Red Cross chairpersons;
- Three national society programme managers;
- One health advisor; and
- One CHARP coordinator at the delegation dealing with overall programme management.

In addition, 200 Red Cross visiting nurses provide psychosocial assistance in six Chernobyl affected oblasts in Belarus, Ukraine and Russia.

The Federation delegation and national societies have close connections with the ministries of health and emergencies (or corresponding ministries) in each country. The Ministry of Health coordinates its activities with mobile diagnostic laboratories. Good relations have been established with medical institutions as well as leading scientists dealing with Chernobyl-related issues in the three countries and abroad.

In 2004, legal documents have been signed with health authorities in order to provide an appropriate legal base and clearly defined roles of all parties involved in the programme. These memorandums of understanding are between national societies (Belarus, Ukraine, Russia), ministries of health (respectively) and the Federation's Minsk delegation. In addition, there are agreements between Red Cross regional committees and regional medical institutions (partners) to regulate patient care: first, from CHARP field screening and diagnostics; second, treatment in clinics and specialised government dispensaries in the three countries; and third, post-treatment rehabilitation and medical support. These agreements also increase the potential for the sustainability of CHARP via gradual handover and integration into public health systems.

The Federation is a member of the UN interagency task force. Since it was launched, CHARP has maintained cooperation with several international agencies, including WHO, UNICEF, USAID, Japanese Sasakawa Foundation and others. The Federation reference centre for psychological support, hosted by Danish Red Cross, renders essential assistance. The UNESCO-Chernobyl programme provides training on stress, grief and coping. Other bodies lending support include the state pedagogical university (Belarus), the Belarus health psychology association and the Belarus-Dutch centre for information and health.

In April 2004, the International Chernobyl Co-ordination Committee (ICCC) at its meeting held in Moscow decided to organise the 3rd International Conference on CHARP (the 1st Conference was held in 1993, in Kiev, the 2nd – in 1996, in Gomel, Belarus) in September 2005, also in Moscow. This event will be linked to the 15th anniversary of CHARP and the 20th anniversary of the Chernobyl disaster. At the conference, the national societies of Belarus, Ukraine, Russia and the Federation will summarise the results of CHARP and how this unique and important Red Cross programme can be developed.

Goal

An improved programme through better coordination of resources, revised strategic direction and increased participation of partners in Belarus, Russian Federation and Ukraine

Objective

Efficient and cost-effective coordination and management of partners and available programme resources, contributing towards provision of health screening to the target population, as well as other services, as determined by specific needs

Expected Results

- The delegation provides effective support to the three Red Cross National Societies in management, technical and financial support, programme monitoring and coordination with external partners.
- The delegation promotes programme sustainability through advocacy on increased CHARP participation of national societies and local government structures of Belarus, Russian Federation and Ukraine.
- The Kiev sub-office and Minsk delegation have an efficient, cost effective management of programme resources.

3. International Representation and Advocacy

Background and achievements

During the last few years, international concern on the human impact of the disaster has been marginalised by a surge of interest in finding a technical solution to the problem of the Chernobyl plant itself. The tragic impact of the disaster on lives requires constant international advocacy work. In addition, the role of the Red Cross in response to the longterm effects of the disaster needs to be constantly highlighted to ensure better political and financial support.

A UN report, “The Human Consequences of the Chernobyl Nuclear Accident: A Strategy for Recovery”, issued in 2002 proposes that the international community adopts a new developmental approach in the second ten-year recovery phase. This aims to give individuals and communities control over their own future. The report underlines that the international community must accept a share in the responsibility for the future well being of those whose lives were blighted by the accident.

The Federation is a prominent member of the International Chernobyl Research and Information Network (ICRIN), a UN initiative to support the ongoing international, national and civil society efforts towards the sustainable development of the affected territories. It aims to do this by compiling, consolidating and coordinating relevant scientific research, as well as commissioning research when required. The ICRIN aims to contribute to improving the complex and diverse health, economic, social, cultural, humanitarian, ecological and agricultural situations in the affected territories.

Through its membership of the ICRIN steering committee, the Federation participates directly in governing the network's initiatives, its strategies, approving implementation plans and other related activities. The Federation is also an important player in defining the criteria for inclusion of other organisations on the steering committee. The Federation's active membership of ICRIN provides an invaluable opportunity to influence and advocate on the future of Chernobyl programmes, thus impacting on the lives of vulnerable people.

The Federation is evaluating its participation in the ‘Cooperation for Rehabilitation of living conditions in Chernobyl affected areas in Belarus’ (CORE) initiative – led by UNDP, several embassies and NGOs – which aims to improve coordination of programmes in affected areas of Belarus. CORE is closely linked with ICRIN.

Goal

The Chernobyl agenda is pushed in directions that support the needs of the most vulnerable people ensuring that lessons learned from Chernobyl are applied to victims of other radiation disasters.

Objective

Increased profile of the Federation and local national societies as strong implementing partners in cases that address needs arising from disasters.

Expected Results

- Federation participation in international forums on Chernobyl leads to wider international community acceptance of the contribution and work of the national societies and the Federation

For further details related to Chernobyl Humanitarian Assistance and Rehabilitation Programme please contact:

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All international assistance to support vulnerable communities seeks to adhere to the Code of Conduct (For details, please go to the website at <http://www.ifrc.org/publicat/conduct/>) and the Humanitarian Charter and Minimum Standards in Disaster Response, according to the SPHERE Project. (For details, please go to the website at <http://www.sphereproject.org/>)

This appeal reflects a range of programmes to be implemented in 2005, and the related funding requirements. These are based upon a broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products (logframes) are available through hyperlinks in the text or can be requested through the respective regional department at the secretariat in Geneva. The programmes were developed with the relevant national societies, taking account of the activities of other organisations. The programmes also respect and support the wish of all countries and international organisations to achieve the UN Millennium Development Goals. (For details, please go to the website at <http://www.un.org/millenniumgoals/>)

For further information on all aspects of the Federation, please go to the Federation's official web page at <http://www.ifrc.org>

[Please click here to return to the title page](#)

BUDGET SUMMARY

PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA072

Name: Chernobyl

PROGRAMME:	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	0	200,400	0	0	0	0	200,400
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
SUPPLIES	0	200,400	0	0	0	0	200,400
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	45,000	0	0	0	0	45,000
Computers & telecom	0	8,000	0	0	0	0	8,000
Medical equipment	0	33,000	0	0	0	0	33,000
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	0	86,000	0	0	0	0	86,000
Warehouse & Distribution	0	1,980	0	0	0	0	1,980
Transport & Vehicules	0	50,700	0	0	0	0	50,700
TRANSPORT & STORAGE	0	52,680	0	0	0	0	52,680
Programme Support	0	55,257	0	0	0	0	55,257
PROGRAMME SUPPORT	0	55,257	0	0	0	0	55,257
Personnel-delegates	0	0	0	0	0	0	0
Personnel-national staff	0	270,003	0	0	0	0	270,003
Consultants	0	0	0	0	0	0	0
PERSONNEL	0	270,003	0	0	0	0	270,003
W/shops & Training	0	47,400	0	0	0	0	47,400
WORKSHOPS & TRAINING	0	47,400	0	0	0	0	47,400
Travel & related expenses	0	28,800	0	0	0	0	28,800
Information	0	70,600	0	0	0	0	70,600
Other General costs	0	38,972	0	0	0	0	38,972
GENERAL EXPENSES	0	138,372	0	0	0	0	138,372
TOTAL BUDGET:	0	850,112	0	0	0	0	850,112