

# DREF operation final report



International Federation  
of Red Cross and Red Crescent Societies

## Tajikistan: Poliomyelitis

DREF operation n° MDRTJ009  
25 February 2011

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

**Summary:** CHF 260,221 was allocated from the International Federation's Disaster Relief Emergency Fund (DREF) on 30 April 2010 to support the National Society in delivering immediate assistance to some 2,692,500 beneficiaries, including 660,040 children under the age of five, vaccinated during the national polio immunization campaign.

Since the beginning of 2010, Tajikistan has experienced an outbreak of wild poliovirus type 1 due to importation despite the fact that it has been certified as poliomyelitis-free since 2002 as the part of the WHO European region.

The Red Crescent Society of Tajikistan has launched its main activities on 1 May 2010. The National Society started community mobilization in the capital and 21 districts of Khatlon province and Direct Rule Districts (DRD) while Government organized nationwide immunization campaign. Some 420 volunteers have been mobilized from the health and disaster management programmes of the National Society.

According to World Health Organization, as of 10 September 2010, Tajikistan had reported 705 acute flaccid paralysis (AFP) cases out of which 456 are laboratory-confirmed for wild poliovirus type 1 and 147 are negative. Confirmed cases have come from 35 of 61 administrative territories (58 districts and 3 cities – Dushanbe, Khujand, and Kurgantube); there was no evidence of transmission in Gorno-Badakhshan Autonomous Oblast (GBAO). The last confirmed polio case in Tajikistan had a date of onset of 4 July 2010. There have been 21 deaths among the 456 laboratory-confirmed polio cases.

In accordance with the polio immunization plan, four rounds were conducted in the country.

The Government of the Republic of Tajikistan decided and agreed with UN health cluster to conduct additional national polio immunization days in October and November 2010, as there were two more confirmed adolescent cases. Therefore, the DREF operation for additional polio immunization rounds had been extended to include Round 5 and Round 6.

There is a balance of CHF 1,007, which will be returned to the DREF funds.



The Red Crescent Society volunteers distributing information materials to children. **RCST**

ECHO contributed CHF 208,177 to the DREF in replenishment of the allocation made for this operation. The DREF allocation has already been replenished up to 80 percent, but further contributions are still welcome. The major donors to the DREF are the Irish, Italian, Netherlands and Norwegian governments and ECHO. Details of all donors can be found on <http://www.ifrc.org/what/disasters/responding/drs/tools/dref/donors.asp>.

[<click here for the final financial report, or here to view contact details>](#)

## The situation

Since the beginning of 2010, Tajikistan has been experiencing an outbreak of wild poliovirus type 1 due to importation despite the fact that it has been certified as poliomyelitis-free since 2002 as the part of the WHO European region. This is the largest polio outbreak in the European region for the last decade and the largest outbreak for 2010 globally.

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The Ministry of Health of Tajikistan together with WHO and UNICEF conducted six rounds of mass polio immunization of children and adolescents, allowing the Ministry of Health to reach all target groups and the transition to a permanent routine immunization. At the beginning of September 2010 the Red Crescent Society of Tajikistan asked for an extension of the DREF operation to participate in additional national polio immunization days in September and October 2010.

## Red Cross and Red Crescent action

Upon the official alert and request of Tajikistan Government, the Red Crescent Society of Tajikistan jointly with health cluster members announced its readiness to respond to the needs of the polio affected districts. The National Society deployed 21 headquarters and branch staff as well as 420 volunteers for participation in national polio immunization campaign. The main activities implemented during national immunization campaign are the following:

1. Joint assessment in coordination with other responding agencies in target districts
2. On-spot training for newly recruited volunteers and participation as external observers at vaccination points
3. Monitoring of the national immunization campaign jointly with other stakeholders
4. Distribution of information materials, posters and raising population awareness through mass media

In total, 21 districts in Khatlon province and Direct Rule Districts were covered by the National Society polio immunization activities. The covered population quantity by districts is reflected in Table 1:

**Table 1**

#	District	Number of children aged 0-15	Number of children vaccinated	Coverage %	Not vaccinated	Total number of visitors	Visitors from other regions
1	Bokhtar	394,330	47,450	98,2	1,013	199	45
2	Vakhsh	292,655	37,100	98,6	1,137	99	65
3	Kubodiyon	274,430	60,050	99,4	323	62	31
4	J. Rumi	310,135	38,625	99,6	248	443	33
5	A.Jomi	251,470	26,865	99,5	236	217	53
6	Kurgantube	125,690	4,445	99,7	64	242	55
7	Shahrituz	193,390	14,445	99,9	43	25	60
8	Panj	179,940	24,705	95,0	1,805	167	79
9	Jilikkul	173,735	10,235	96,9	1,085	311	42
10	Sarband	74,140	5,940	99,5	106	289	20
11	Nosiri Khusrav	56,655	15,720	99,8	26	25	13

12	Shahrinav	98,596	14,483	99,8	1,650	2,100	
13	Rudaki	84,200	13,080	99,0	1,500	2,120	
14	Vakhdat	270,000	42,000	99,7	1,240	2,600	409
15	Varzob	68,150	10,154	88,9	1,780	2,460	
16	Gissar	248,200	38,472	99,7	1,130	2,630	
17	Tursun-zade	240,000	35,171	100,0	1,570	2,130	
18	Faizabad	350,000	64,800	99,2	1,790	2,210	1,758
19	Dushanbe – Sino district	750,000	107,140	99,7	1,130	3,690	
20	Vosse	175,100	42,024	99,7	1,100	5,500	342
21	Khovaling	47,300	11,352	98,9	1,477	7,385	137
<b>TOTAL</b>		<b>4,658,116</b>	<b>664,256</b>	<b>98.6</b>	<b>20,453</b>	<b>34,904</b>	<b>3,142</b>

## Achievements against outcomes

### Emergency health

**Outcome: To contribute to the high coverage of the national polio vaccination campaign through community mobilization.**

**Outputs (expected results) and activities planned:**

- Conduct meetings and round-tables with all stakeholders.
- Recruit 420 volunteers to conduct assessment, mobilization and door-to-door sensitization of the population.
- Participate as external observers at vaccination points.
- Carry out monitoring and evaluation of all activities.
- Monitor the national immunization campaign jointly with WHO, the Ministry of Health and UNICEF, contributing to a high coverage of the target population.

**Impact:** Before and after each immunization round, programme volunteers conducted household visits in pilot districts. In accordance with the programme requirements a regular monitoring of the volunteers' activity, households visits registration, and immunization points was conducted by the regional health coordinators. During six rounds of immunization against poliomyelitis, all activities of the regional health coordinators were carried out in cooperation with, and under coordination of, the Regional Immunization Center and the Healthy Life Style project.

Internal or in-process and end-process monitoring during vaccination campaign to insure a good quality of immunization as well as to insure full immunization coverage were conducted by the National Society volunteers as required by WHO and UNICEF. For mop-up campaign and both the fifth and sixth rounds of immunization, the National Society was involved only in Kurgantube region (12 districts). The quantity of volunteers has been reduced to 16 per district and total number of volunteers was 200.

According to the WHO and UNICEF evaluation report, immunization coverage was 99.3 percent, which reflects the success of the immunization campaign.

### Communication and cooperation

**Outcome: To raise public awareness through community health promotion, information and media campaigns; including the distribution of information and communication materials to 2,692,500 beneficiaries in 20 districts and Dushanbe city of Tajikistan.**

**Outputs (expected results) and activities planned:**

- Mobilize district authorities and community leaders to support the public awareness campaign.
- Contact beneficiary representatives, especially community leaders to conduct information campaign.
- Distribute information, educational, and communication materials (posters and leaflets).
- Use various channels of communication including local newspapers, TV and radio for hard-to-reach groups (such as people living in remote areas).
- Perform interpersonal communication to raise awareness in the most remote areas.

**Impact:** The volunteers conducted meetings among population in the targeted districts that aimed at providing information on the immunization rounds. The meetings were organised at the community level with

the participation of community and religious leaders as well as at the level of secondary schools. Information materials were distributed by the volunteers among targeted population. Some 20,000 leaflets were distributed, 100 posters were hung out at the most frequented places.

A press-conference with the participation of the MoH, UNICEF, WHO, Red Crescent Society of Tajikistan was held for journalists of the “Shabakai avval”, “Safina”, “Jahonnamo” television channels; “Asia Plus”, “Avisenna” newspapers; “Mir” TV company.

For all rounds of polio campaign Red Crescent Society of Tajikistan implemented community mobilization activities and monitoring of vaccination process in all 21 districts.

In October, RCST with the support of IFRC has conducted an action devoted to World Polio Day in Kurgantube town, where some 50 RCST volunteers were deployed from Kurgantube province branch. Local authorities, provincial health department including provincial Healthy Life Style Centers have been invited to this action. During this action, the representative of the provincial health department has mentioned the results of the campaign on immunization, including importance of immunization among children.

**Challenges:** The nation-wide immunization campaign had to be held at a difficult time, during floods and mudslides especially in Kulyab town, where the majority of the population was in camps. That factor made it difficult to register the population properly, and cover all children with the vaccination. Another typical challenge was the difficult access to the beneficiaries due to the location of many remote settlements and poor local transport facilities.

## How we work

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

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

## Contact information

**For further information specifically related to this operation please contact:**

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MDRTJ009 - Tajikistan - Poliomyelitis

Appeal Launch Date: 28 apr 10

Appeal Timeframe: 28 apr 10 to 30 nov 10

Final Financial Report

Selected Parameters	
Reporting Timeframe	2010/4-2011/1
Budget Timeframe	2010/4-2010/11
Appeal	MDRTJ009
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	<b>260,221</b>					<b>260,221</b>
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>Income</b>						
<b>Other Income</b>						
<i>Voluntary Income</i>	260,221					260,221
<b>C6. Other Income</b>	<b>260,221</b>					<b>260,221</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>260,221</b>					<b>260,221</b>
<b>D. Total Funding = B + C</b>	<b>260,221</b>					<b>260,221</b>
<b>Appeal Coverage</b>	<b>100%</b>					<b>100%</b>

## II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>C. Income</b>	<b>260,221</b>					<b>260,221</b>
<b>E. Expenditure</b>	<b>-259,214</b>					<b>-259,214</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>1,007</b>					<b>1,007</b>

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### III. Consolidated Expenditure vs. Budget

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
<b>BUDGET (C)</b>		<b>260,221</b>					<b>260,221</b>	
<b>Supplies</b>								
Clothing & textiles	19,200	20,389				20,389	-1,189	
Water & Sanitation	2,040	1,383				1,383	657	
Medical & First Aid	3,720	4,119				4,119	-399	
Other Supplies & Services	5,200	14,979				14,979	-9,779	
<b>Total Supplies</b>	<b>30,160</b>	<b>40,870</b>				<b>40,870</b>	<b>-10,710</b>	
<b>Transport &amp; Storage</b>								
Storage		21				21	-21	
Distribution & Monitoring	6,400	5,623				5,623	777	
Transport & Vehicle Costs	6,400	9,113				9,113	-2,713	
<b>Total Transport &amp; Storage</b>	<b>12,800</b>	<b>14,757</b>				<b>14,757</b>	<b>-1,957</b>	
<b>Personnel</b>								
National Staff		54				54	-54	
National Society Staff	74,992	92,079				92,079	-17,087	
<b>Total Personnel</b>	<b>74,992</b>	<b>92,132</b>				<b>92,132</b>	<b>-17,140</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	12,887	280				280	12,606	
<b>Total Workshops &amp; Training</b>	<b>12,887</b>	<b>280</b>				<b>280</b>	<b>12,606</b>	
<b>General Expenditure</b>								
Travel	52,900	54,123				54,123	-1,223	
Information & Public Relation	58,000	22,895				22,895	35,106	
Office Costs	100	1,434				1,434	-1,334	
Communications	2,500	1,817				1,817	683	
Professional Fees		388				388	-388	
Financial Charges		14,673				14,673	-14,673	
<b>Total General Expenditure</b>	<b>113,500</b>	<b>95,330</b>				<b>95,330</b>	<b>18,170</b>	
<b>Programme &amp; Service Support</b>								
Programme & Service Support	15,882	15,821				15,821	61	
<b>Total Programme &amp; Service Support</b>	<b>15,882</b>	<b>15,821</b>				<b>15,821</b>	<b>61</b>	
<b>Services</b>								
Services & Recoveries		23				23	-23	
<b>Total Services</b>		<b>23</b>				<b>23</b>	<b>-23</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>260,221</b>	<b>259,214</b>				<b>259,214</b>	<b>1,007</b>	
<b>VARIANCE (C - D)</b>		<b>1,007</b>				<b>1,007</b>		