

BELARUS, MOLDOVA, RUSSIAN FEDERATION & UKRAINE: TB/HIV/AIDS/STDs

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The TB programme, launched on 12 March 1999 in response to the rapid spread of these diseases in the four countries, has received strong donor support. Soup kitchens are assisting the targeted beneficiaries in all four countries with hot meals and vitamins. Family food parcels and hygiene kits are being distributed. ECHO contracts are being extended until May or June in Belarus, Moldova, Ukraine and Russia. The funds from the EU (via EU-based PNS) have shaped the programme considerably, and strengthened programme implementation. On World TB Day, 24 March, this programme - part of a 15-year commitment to combat TB in Belarus, Moldova, Ukraine and Russia - is achieving its ambitious objectives.

The Context

TB is spreading rapidly in the Russian Federation, Moldova, Belarus and Ukraine. In Russia, over 111,000 cases of TB were reported in 1996 - double the number of cases registered in 1991. Similar levels have been recorded in Belarus, Moldova and Ukraine. TB is most prevalent among the poor and their families, including the homeless, alcoholics, ex-prisoners and malnourished persons. In prisons, incidence rates are dramatically higher than among the general population.

Inadequate TB control measures and inappropriate treatment methods have led to a rise in resistance to standard TB drugs. Drug resistant TB is difficult and expensive to cure and at the moment health authorities in the four countries cannot afford such treatment, resulting in a spread of this dangerous form of the disease. Depending on their immune status, people can

become infected without developing the disease. Immune status is affected by poor nutrition, excess alcohol intake, certain drugs and HIV/AIDS.

Human Immunodeficiency Virus (HIV), the causative agent of AIDS, has been spreading throughout the world since the early 1980's. Currently, this pandemic is the leading public health problem at global level. According to the latest figures of UNAIDS and WHO, an estimated 33.4 million people are living with HIV/AIDS. Of these, 770,000 live in Europe, with 270,000 in Eastern Europe.

For the moment, Ukraine remains the worst affected country, although the Russian Federation, Belarus and Moldova have registered enormous increases in the past few years. HIV increases the risk of patients becoming ill with TB thirty fold, because the virus weakens the part of the immune system that protects against TB. As a result, TB is the leading cause of death in HIV positive patients.

Sexually Transmitted Diseases (STDs) have also spread rapidly in recent years, encouraged by socio-economic factors such as increased travel and migration, family disruption, liberalised sexual behaviour, and growing prostitution. During the seven years between 1990-1997, there was a 50-fold increase in syphilis in CIS countries, including Russia, Belarus and Ukraine, with rates 200 to 500 times greater than in Western Europe. As both national and international health authorities now recognise, the situation will worsen over the next few years despite the measures being taken now. The challenge is to limit the ravages of these diseases, and their social and economic effects.

One of the main objectives of this programme is to raise awareness among the general public about the extent of the diseases, as well as to:

- train Red Cross staff, Visiting Nurses and others for their role in care and prevention;
- provide social and material support, to encourage compliance with diagnosis and treatment;
- support diagnostic facilities, essential for disease control;
- establish contingency stocks of pharmaceuticals in the early stages of the programme.

The Federation is also implementing the Far North-east programme which is coming to an end in Chukotka, Kamchatka, including Koryak okrug, and Magadan, although an extension to 15 May has been approved. The operation was intended to assist 82,000 beneficiaries marooned in these remote areas in terrible living conditions with food parcels, hygiene kits, medical supplies and other items. The cargo was sent to the regions but no final reports on distributions have been received as yet. Another plane full of relief items will shortly be sent to the regions.

Likewise, the Federation's winter appeal, launched on 29 October 1999 to support the Russian Red Cross is assisting 770,000 beneficiaries (multi-child families, orphans, pensioners, handicapped and homeless) in 22 Siberian and Far North regions of the Russian Federation. A contract with ECHO was signed to produce family food parcels (FFPs) for the vulnerable people of Altai and Tyva Republics. Several cash and in-kind donations were received for the programme, which allowed soup kitchens and distributions of second-hand clothes to begin in some regions. The funds to produce hygiene parcels and FFPs as well as for seeds and bulk food are still lacking.

Similar but separate winter programmes were launched in Belarus, Moldova and Ukraine.

Latest Events

Russia

The Moscow AIDS centre and the city health department funded by the Moscow government started a joint project of treating AIDS patients in the capital with three-therapy, which postpones the spread of the virus. This treatment costs at least USD 25,000 per person per year.

At the end of 1999 more than 26,000 people were registered as HIV infected in Russia. In 1999 alone 15,462 new cases appeared, which is 3.9 times more than in the previous year. The significant increase in the amount of HIV infected people started in 1996, when the virus spread among drug users. Some 90% of newly registered HIV cases were drug addicts and during the last five years the number of drug addicts grew ten-fold and now totals more than two million people across the country.

Another danger is drug resistant tuberculosis which is turning up especially in Far-eastern prisons. According to the Interfax agency, as many as 20,000 prison inmates have died of this new strain in the last two years and some 100,000 people are sick. The cost of treatment for drug resistant TB is 200 times more expensive than for traditional strains. In Russia, many who undergo treatment take the expensive drugs only until they start to feel better, and consequently the disease soon re-emerges in a stronger "drug resistant" form.

Belarus

The precarious situation with the drugs supply for the National TB Programme is becoming critical. The Ministry of Health can now offer only three types of TB drugs, and when limited drugs are available, this may increase drug resistance.

In the beginning of March, the President of Belarus issued a decree providing for an increase in government spending on state health care system by cutting expenses for maintenance of government agencies. It is expected that some BRB 4 billion (some USD 4.5 million) may be accumulated in a special President's fund and spent on hospitals and health care institutions.

According to recent statistics, there are some 20,204 TB-infected people across the country, a significant number of whom have daily contact with children. As of 1 January the National AIDS Prevention Centre had registered 2,752 HIV-infected people. Thus, 411 newly detected cases were registered in 1999. The largest amount, some 77% of those affected by the disease, reside in the Gomel region.

Ukraine

According to the Joint United Nations Programme and WHO report, released in December, 1999, Ukraine has registered the most dramatic epidemic situation with HIV/AIDS among all the countries of the former USSR, with 240,000 cases out of 360,000 reported.

The ongoing socio-economic crisis is causing insufficient funding for the state health care system, and is aggravating the TB/HIV/AIDS epidemiological situation. While the level of HIV/AIDS incidence is growing, health authorities do not have the means to implement treatment and preventive measures.

Moldova

As a result of the restructuring of the health care system, 14 central and seven municipal medical units as well as two central and eight municipal sanitary institutions were closed and

privatised. It is envisaged that the number of hospitals in the country will be reduced from 270 to only 68 in connection with the introduction of the family doctor system.

Red Cross/Red Crescent Action

Russia

Much time was devoted to supporting the development of sustainable and effective finance and management systems for the RRC staff involved in the programme. On 20-21 December, a training workshop for seven regional finance officers was held in Moscow. Guidance notes for targeting of beneficiaries and distribution/monitoring of family food parcels (FFPs) and hygienic kits were prepared and sent to the target regions in December.

Purchasing and transporting of microscopes and stains is nearing completion, while food parcel and hygiene kit procurements have been completed. The first distributions of FFPs and hygiene kits started in Buryatia, Kemerovo, Tomsk and Pskov. A programme monitor is planned to be hired in early March whose role will be to go around the seven regions during the next three months, following up on all distributions, and ensuring that all processes being followed are appropriate.

A joint Federation/RRC/ECHO team carried out a six-day visit to Tomsk and Kemerovo in the middle of January. The visit to Tomsk demonstrated the extent to which international funding and long-standing support for DOTS treatment by the regional administration has laid the foundations for a dynamic environment in which the TB programme can operate.

During February the RRC/Federation team visited three regional committees (Murmansk, Buryatia and Astrakhan) to assess progress on the programme implementation since their last visits in October. In Murmansk, a meeting with regional authorities was held to discuss the question of DOTS adoption. A field-trip to Buryatia was conducted, together with two British Red Cross representatives, to allow them to monitor the implementation, meet with local Red Cross representatives, and clarify the process of co-operation on the programme. A trip to Astrakhan demonstrated an increasingly focused regional committee and regional TB authority - both of which, in the absence of substantial external support, have identified their own ways to resolve some of the key problems involved in reforming TB management approaches.

The Medical Co-ordinator/Social Officer two-day workshops, organised by the RRC with support and input from the Federation, took place in early February in Moscow. The workshops helped to crystallise experiences to date, emphasising the contrasting fortunes of the seven regions, and allowing the more effective sharing of experiences and of learning.

The following data was collected by the programme co-ordinators:

Region	No of TB VNS	No of TB patients			No of medical and social rooms
		DOTS & Social support	FFPs & Hygienic kits	Hot meals	
Arkhangelsk	10	112 adults / 122 children	366	-	1
Astrakhan	10	120 adults	-	135 children	1
Murmansk	10	55 adults	923	50 children	-
Pskov	10	183 adults	400	230 children	-
Kemerovo	10	200 adults	1 400	100 children	3
Buryatia	11	200 adults / 40 children	8	40 children	5

Tomsk	10	227 adults	738	100 children	1
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Astrakhan, Kemerovo and Buryatia received 28 microscopes each and sets of reagents to them; 12 microscopes with reagents were sent to Pskov and Buryatia ordered only 28 sets of reagents.

The Information Officer, on secondment from Georgia, accompanied the team to Siberia. The programme label was finalised and copies were distributed to the targeted regions. A programme information campaign plan was developed and agreed, including the production of leaflets for the general population, for TB patients under treatment, and for TB patients' relatives. An all-day telethon in Pskov raised awareness of the programme as well as some funds, and demonstrated what regional committees could achieve in this regard. A manual on Homecare for visiting nurses was developed and is being prepared for printing. The TB Homecare course (guidelines for instructors) was completed.

A radio spot on TB awareness was created and will be aired until 31 March. Five booklets and a leaflet were printed and a poster is being prepared to tie in with World TB day on 24 March. Three articles for a special health magazine were written by the RRC representative for the programme; copies of the magazine will be sent to the target regions.

Belarus

Distribution of food parcels and hygienic kits continued during the reporting period. Some 12,817 family food parcels (FFPs) were distributed and 10,670 procured. The amount of hygiene kits distributed came to 4,550. Although it was planned to distribute 6,980 hygiene kits, the final amount turned out to be less because of a fire in January in the Gomel warehouse (the losses amounted to less than 5% of the amount of the contract, and do not seriously harm the project objectives). To avoid such losses in the future, the Belarus Red Cross Society arranged insurance coverage for the rest of the project period. An additional round of distribution provided through the contract extension will compensate for the lost hygienic kits.

Delivery of equipment sets for rooms of medical and social assistance and procurement of microscopes and stains for them has been delayed, but the is expected to arrive by the end of March.

During the reporting period six tons of second-hand clothes were distributed to 1,757 beneficiaries. Since the beginning of the project 48,745 kg of second-hand clothes were distributed among 7,857 beneficiaries.

Some 203 visiting nurses have been recruited in the three project sites, the majority of them being part-timers. Eighty nurses are employed on a 25% basis, 112 nurses on a 50% basis, and 11 nurses are full-time staff. Presently 98 Drug Distribution Points are functioning under the programme; 77 of them located at polyclinics/local nursing posts and 21 at Red Cross rooms of medical and social assistance.

Direct observation of treatment is ensured for 1,943 patients. For 453 patients services have been organised directly through the Red Cross rooms of medical and social assistance. In January, 630 monthly public transportation tickets were provided to the patients and nurses.

Certain difficulties have arisen with 47 patients because of asocial behaviour, 70 patients interrupted their treatment for different reasons, often related to new criminal offences, or movements to other places of residence to find jobs.

Media coverage has been effective with a series of articles focusing on information dissemination, the Red Cross and the problems of TB/AIDS, and promoting a healthy generation. The number of people reached is estimated at approximately 1,500,000 (through TV and radio) and 300,000 (leaflets and press publications). Some 20,000 leaflets for TB-patients and members of their families and 30,000 leaflets for the general public were published and distributed. Three TB video-clips are being aired on central television and 13 sets of video-clips were produced for local TV stations. A TB manual for visiting nurses has received comments from Federation/WHO experts and the revised version has been revised for final approval.

Two workshops were held during the reporting period: a one day workshop for journalists, highlighting the educational campaign on TB/HIV/AIDS and a two-day seminar for the programme activists from the Belarus Red Cross Youth department. A competition on production of the best bulletin on TB/AIDS prevention was organised by the BelRC.

Ukraine

Presently 30,000 recipients benefit from food parcels and hygiene kits distribution. Some 90,000 FFPs were procured and delivered to distribution sites and the first round of distribution was completed. The second round of food parcel distributions has started. Some 30,000 hygiene kits were procured and delivered to distribution sites, and 1,400 medical kits for nurses are awaiting custom clearance. Five hundred and fifty bicycles for visiting nurses were procured, and 300 were distributed so far. International procurement of 10 sets for rooms of medical and social assistance has not been completed yet because of continuous custom clearance procedures. Procurement of 90,000 vitamin boxes has been carried out, though delivery is delayed again because of custom procedures.

Soup kitchens started operating in the middle of December. Some 630 beneficiaries will receive hot meals till the middle of June.

In total 14 seminars with 555 participants were held for chairpersons, media representatives, Ukraine Red Cross activists, programme instructors and visiting nurses. Meetings of the working group are being held on constant basis to discuss further project implementation.

Regional Red Cross branches (Kyiv and Sevastopol City Red Cross committees) held 50 training seminars for 1,500 Ukraine Red Cross staff members and volunteers.

Some regional Red Cross committees issued TB/HIV/AIDS leaflets with their own funds. Mass youth-oriented actions against AIDS were organised in Zhytomir, Transkarpatia, Chernovtsy and other regional Red Cross committees.

Fund-raising campaigns were organised by regional and city Ukraine Red Cross branches in Donetsk, Dnepropetrovsk, Transkarpatia, Kirovograd, Kharkiv, Kherson, Cherkassy and Chernovtsy. Collection of food products and winter clothes for the vulnerable and TB-patients was organised by the local Ukraine Red Cross branches. The total amount of assistance collected is UAH 130,000 (some USD 23,500).

The media campaign continued during the reporting period, and topical TV and Radio programmes were prepared. TB/AIDS prevention and prophylactics-oriented press-conferences were held in the majority of regions, and on 17 February the Ukrainian Red Cross organised a press-conference on the joint project. Visiting nurses in medical social

assistance rooms are disseminating information on prevention, care, early identification and prophylactics of TB and HIV/AIDS.

Moldova

Some 10,000 TB/HIV/AIDS patients and elderly living alone benefit from the TB programme. Problems were encountered with beneficiary identification - some do not have permanent address whereas others have died.

During the reporting period 27,497 food parcels, 20,000 hygienic parcels, 2,000 bed linen sets and 851 bottles of vitamins were procured and distributed.

A two-day seminar was organised for 42 visiting nurses and representatives of state health care institutions in order to increase their level of knowledge about TB/HIV/AIDS prevention, prophylactics and identification. In order to intensify the collaboration and co-ordination between the Moldovan Red Cross and local health care representatives, two seminars were organised with the participation of the vice-presidents of local Red Cross committees, physicans from the Southern and Northern parts of Moldova, and the Ministry of Health.

Information on TB/HIV/AIDS was disseminated locally among the general public and media. National and local media printed and broadcasted information about the ECHO programme and its goals. Information materials on TB/HIV/AIDS were printed and distributed among the beneficiaries and general population. A total of 47,200 TB booklets and 60,000 TB pamphlets were printed out and distributed, as well as 16,662 AIDS booklets and 20,000 AIDS pamphlets. Some 12,000 calendars and 10,000 bookmarks for students were produced to disseminate TB/HIV/AIDS prevention information and ensure visibility for the donors.

External Relations - Government/UN/NGOs/Media

Russia

Regular meetings with the WHO representatives continue as well as with other health-related organisations.

The visit to Tomsk offered the opportunity to develop working relationships with other agencies involved in the tuberculosis programmes. Merlin, MSF and PHRI were all involved in the visit and agreed to the idea of a small, informal forum for discussion in Moscow. The presence of the ECHO representative was useful in emphasising the need for improved co-ordination and sharing of information, plus the responsibilities of the local authorities to accept their share of responsibility.

A field mission trip to Buryatia was conducted in February together with two British Red Cross representatives to monitor the implementation, meet with local Red Cross representatives, and clarify the process of co-operation on the programme.

Meetings in Moscow with representatives from WHO, Merlin, MSF, PHPI, ECHO and DFID continue, as well as meetings in the regions with local health authorities. The RRC hosted a TB interagency forum in early-February to discuss information and training issues.

Belarus

Active relations were maintained with the government structures of the Republic of Belarus, and, in particular, with the Ministry of Health. An agreement between the Ministry of Health and the Belarus Red Cross was signed. Under this agreement the MoH commits itself to

providing drugs, free training for Red Cross nurses, and promoting outpatient treatment services.

In February, the National project co-ordinator took part in a UNAIDS strategic planning workshop and roundtable meeting for local NGOs, hosted by Counterpart Alliance. Effective working relations are maintained with the Belarus Anti-TB Society. On 15 March the Belarus Red Cross organised a press-conference for the local media to present its achievements and plans and discuss TB-related issues.

Ukraine

A second monitoring visit of the ECHO desk officer took place in February. Together with the German Red Cross desk officer, medical and social assistance rooms in Kyiv and Cherkassy region were visited and the project implementation was discussed. Regular contacts with the Ministry of Health are ongoing, with good working relations maintained. Co-operation with the WHO European Regional Bureau was established and two meetings with the WHO representative in charge of liaison and co-ordination work in Ukraine were held. On 16 February the Head of the Belarus Delegation gave a TV interview on the current ECHO-project in Kyiv. On 18 February a press-conference was held to discuss the project implementation.

Moldova

The Moldovian Red Cross supported good working relations with governmental and non-governmental organisations such as the Ministry of Health, National Phtysiology Institute, Municipal Phtysic Hospital, and the Republic AIDS-prevention Centre. Close co-operation ties exist with the branch of the Catholic Churches Association, as well as with “Pharmaciens sans Frontieres” and “Medecins sans Frontieres”. Two seminars were organised with the participation of the vice-presidents of the local Moldova Red Cross committees, phtysiatres from Southern and Northern parts of Moldova, and representatives of the Ministry of Health, National Physiology Institute, and the Republican AIDS Centre. The Government Commission for Humanitarian Aid was regularly informed about the programme implementation.

Outstanding Needs

Following some constraints the extension of contracts regulating most of the current project work were re-negotiated and arranged. Confirmation has been received for Belarus, Moldova, Ukraine and Russia to carry on until June with funds made available from the EU. The prospects of continuation in the scope of the appeal are to be looked at by reviewing and mapping past performances, achievements, open issues and conclusions for the next few months. This will be done in due course and will give a basis for negotiations with partners to secure further activities being financed through local and international sources.

Contributions

See Annex 1 for details.

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