

ANNUAL REPORT



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

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

Appeal No. 01.50/2002; Appeal target: CHF 918,570; Appeal coverage: 53%

Operational Developments w

The United Nations (UN) released on 6 February 2002 a report entitled "The Human Consequences of the Chernobyl Nuclear Accident: A Strategy for Recovery" which proposes that the international community should adopt a new developmental approach in a second, ten-year, recovery phase of initiatives to tackle the problems caused by the Chernobyl accident. The approach should aim to give individuals and communities control over their own futures. 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 Chernobyl accident.

In general the humanitarian situation did not improve considerably in the areas of Belarus, Ukraine and the Russian Federation affected by the Chernobyl disaster. The affected population, those exposed to radioactive fallout, continue to face disproportionate suffering in terms of health, social conditions, and economic opportunities. There is high incidence of thyroid cancer and other pathologies. In Ukraine, for instance, according to official statistics some 3,022 thyroid cancer cases were registered during the post-disaster period. More than 2,100 people who were under 18 at the time of the accident have undergone thyroid surgery. The UN report says that conservative estimates predict there will be 8-10,000 cases of thyroid cancer occurring over the lifetimes of those exposed in childhood with the peak of the incidence between 2006-2020.

The above-mentioned UN report was used as a basic document for the evaluation of the Red Cross' Chernobyl programme carried out by the International Federation in April-May 2002. The findings of the evaluation were approved at the meeting of the international Chernobyl coordination committee held in July 2002.

Objectives, Achievements and Constraints

Health and Care w

Objective 1: To continue providing annual screening for 15,000 persons per each mobile team (90,000 persons a year), focusing on high risk groups such as children and young adults (0-18 years of age).

Achievements:

During the reporting period the specialists of the mobile diagnostic laboratories (MDLs) examined 91,445 people including 50,965 adults and 40,480 children. The results of medical screening by each MDL is shown in the following table.

Table 1: Results of medical screenings between January-December 2002

MDL	Total number screened	Number of adults screened	Number of sick adults detected (%)	Number of children screened	Number of sick children detected (%)
Brest	15'034	8'123	6,170 (76.0%)	6'911	5,350 (77.4%)
Gomel	15'527	8'767	6,842 (78.0%)	6'760	4,887 (72.3%)
Mogilev	15'398	8'209	6,567 (80.0%)	7'189	5,866 (81.6%)
Bryansk	15'212	8'790	6,945 (79.0%)	6'422	5,380 (83.7%)
Zhitomir	15'141	8'321	6,377 (76.6%)	6'820	5,120 (75.0%)
Rovno	15'133	8'755	6,989 (79.8%)	6'378	5,054 (79.2%)
Total	91'445	50'965	39,890 (78.3%)	40'480	31,657 (78.2%)

Data collected by the MDLs shows that diseases of blood and blood forming organs mainly prevail, as well as of endocrine, digestive systems and respiratory organs. The doctors of MDLs referred 38,423 patients to different medical institutions for further examinations or treatment.

During the reporting period, the personnel of the MDLs carried out 91,060 thyroid examinations and detected 35,946 abnormal thyroid scans. According to data collected by the MDL specialists, the incidence of thyroid gland pathologies in some regions is high. For instance in Zhitomir region nontoxic diffuse goitre was detected in about 50 per cent of young people from the target group. There was also high incidence of thyrioditis and nodule pathologies. If not discovered in the early stages, these pathologies may develop into thyroid gland cancer.

Out of the above-mentioned 35,946 patients with abnormal thyroid scans, the laboratory specialists referred 379 patients suspected of having thyroid cancer to specialized medical institutions. Following biopsy 164 thyroid cancer cases were confirmed. This is 30 per cent more than in 2001 when the specialists detected 120 confirmed cancer cases.

The detection of thyroid cancer since 1997, when the MDLs were equipped with new ultrasound machines, increased almost every year. Table 2 shows the numbers of thyroid cancer detected by MDLs since 1997.

Thyroid cancer detection by year

Years	1997	1998	1999	2000	2001	2002
Cancer cases	8	48	84	80	120	164

During the period from 1997 to 2002, some 504 thyroid cancer cases were detected by the specialists in the Red Cross' MDLs in total, including 443 cases in adults, and 61 cases among children.

Constraints:

One of constraints is linked with laboratory equipment which is worn out in some MDLs and should be replaced in order to provide accurate measurements. In particular the laboratories working in Belarus and Russia need new ultrasound scanners (the MDLs in the Ukraine received new ultrasound scanners supplied by the Austrian Red Cross in 2001). In 2002, the Swiss government's development agency supplied new blood analyzers to the Brest and Mogilev MDLs in Belarus to replace the old ones. However this equipment in other laboratories is quite worn out after six years of intensive use.

Analysis and outlook:

One of the main events for CHARP during the reporting period was the evaluation of the programme carried out by the International Federation in April-May 2002. The evaluation team recommended that CHARP programmes should be continued but with certain modifications. In particular, the screening will be continued for thyroid cancer and the priority target group will be those who were born between 1969-1987 and living in highly contaminated areas at the time of the accident.

In November-December 2002, all MDLs teams practically implemented this new concept. Following recommendations of the evaluation mission, the MDL specialists concentrated the thyroid screening on the target group, i.e. those persons who were at age of 0-18 at the time of the disaster. This resulted in an increased number of detected thyroid cancer cases (as described in the section for results of thyroid cancer screening).

Another important lesson learned was a conclusion that the programme should be modified in order to improve diagnostics abilities. This can be done by further development of the thyroid gland screening using modern techniques. At the moment CHARP is exploring possibilities of training laboratory specialists for performing fine needle biopsies in the field. This will improve accuracy of thyroid cancer diagnosis.

Other different possibilities will be pursued to ensure that the follow-up for the individuals with abnormal thyroid scans is improved, e.g. providing a pathologist to perform the needle biopsies in a district hospital (Bryansk), providing free transportation of patients to the diagnostic centres (Gomel), closer cooperation between MDL specialists and the specialized medical institutions.

According to recommendations of the evaluation mission, the blood and urine testing should be reduced. Therefore a new composition of the MDL team was agreed upon and adopted by all parties participating in CHARP. In accordance with the new composition, one technician out of two and PC operator were reduced. Now the MDL team consists of three doctors, one technician and the driver who acts also as the PC operator. These changes, corresponding to the recommendations of the evaluation, make the Chernobyl programme more cost-effective.

Objective 2: To improve the quality of rehabilitation and psychological support services and strengthen the coping mechanisms of the affected population.

Achievements:

During the reporting period, the psychological support was provided by local staff and volunteers of the Red Cross at the medical-social centres, sites where the MDLs were placed, and at people's homes. The psycho-social support (PSS) was aimed to restore inner resources of a person and to rehabilitate people's ability to control their lives. Having meetings with people, the Red Cross staff members and volunteers encouraged patients to express their emotions, share thoughts, and to make decisions in order to solve their problems. This assistance was rendered first of all to those people, living in radiation affected areas, who have severe emotional disturbances caused by crisis situations (serious diseases like thyroid gland cancer, breast cancer, etc).

Another field of PSS activities was dissemination of information to the population. The affected people were informed on factors of risk and how this or that degree and character of the symptoms correlate with the level of radiation and stress. For this the branches of the Red Cross efficiently used psycho-social brochures produced for pregnant women living in radiation contaminated areas. In total, 10,000 copies of the brochure were printed and distributed to beneficiaries living in the areas affected by the Chernobyl disaster.

Constraints:

Due to lack of funds some PSS activities were reduced. Because of this reason, for instance, the PSS training for the staff of the mobile teams, Red Cross trainers and volunteers was not provided in 2002.

Analysis and outlook:

The psycho-social support is an important part of CHARP that aims at providing the population in the contaminated territories with PSS tools to overcome stress and anxiety related to radiation.

Generally the psychosocial support is rendered at a community level by the grass-root workers and volunteers of the Red Cross with appropriate backgrounds. These people, furthermore, disseminate the knowledge among those who can act as 'messengers', such as doctors, school teachers, social workers. The MDL staff and visiting nurse service (VNS) provide essential information using leaflets produced by CHARP. It is very important to organize a refresher training for these people. This will be arranged when appropriate funds are available.

In accordance with recommendations of the evaluation, the psychosocial support aspect of the programme will be focused on delivering accurate information about the long-term health effects of the Chernobyl accident. This is of particular importance as the target group of CHARP has been changed and the population will require reassurance, e.g. that the children who were born after 1987 will not be screened because they have no increased risk of developing thyroid cancer. The personnel of MDLs, volunteers and VNS deliver this information to the population.

Objective 3: To provide multivitamins for children and medicines for thyroid cancer patients**Achievements:**

In October 2002, the French Red Cross Society (FRCS) supplied 1,050,000 tablets of levothyroxine to the Belarus Red Cross on a bilateral basis. It was agreed with the FRCS this medicine will be used for treatment of patients with thyroid gland conditions detected by MDL specialists of the CHARP programme.

Constraints:

Multivitamins for children living in the affected areas were not supplied within CHARP during the reporting period due to lack of funds.

Analysis and outlook:

According to the evaluation, children born after 1987 need not be screened but many are malnourished, and those living in the contaminated areas should be provided with multivitamins for the winter months. The multivitamins should contain B, C and D groups with iron, folic acid and stable iodine. However, they will only be provided when appropriate funds are available.

Regional Cooperation w

On 25 July 2002, the meeting of the International Chernobyl Coordination Committee (ICCC), consisting of presidents of the three national societies and the head of delegation in Minsk, was held in Zhitomir, Ukraine. The main topic of this meeting was consideration of the results of the latest CHARP evaluation (April-May 2002) and future development of the programme in light of this evaluation. The participants discussed and adopted the report of the evaluation team without major changes.

In August 2002, the Swiss Agency for Development and Cooperation (SDC) in Belarus supplied two new blood analyzers (QBC AUTOREAD Plus with centrifuges) as a donation in-kind to CHARP. The machines were handed over to Brest and Mogilev regional Red Cross committees to replace the old ones which did not function properly.

In September 2002, the Minsk delegation approached the TACIS agency in Belarus for possible cooperation and development of CHARP. An application for an assistance in the amount of EURO 200,000 was submitted to this agency and at the present time is under consideration.

Analysis and outlook:

It is projected that in the future the affected countries' national societies in cooperation with their respective governments will be taking more responsibilities for programme management. These issues will be discussed at the next ICCC meeting to be held in June 2003. The local input will be essentially increased. Local sources are to cover such items as running costs for mobile diagnostic laboratories (fuel, maintenance, salaries for MDL staff, etc.), and professional training of personnel. Trained at workshops for psychosocial assistance, workers and volunteers of the Red Cross will continue to render the psychosocial support. It is planned that in five-six years CHARP will be run locally. The Federation and participating national societies will provide some assistance when necessary (advice, expertise, monitoring).

Conclusions w

In 2002, the Chernobyl programme of the Red Cross continued providing the population with vital medical assistance and psycho-social support. The target plan for medical screening was fulfilled. The programme is particularly important for people living in remote and radiation contaminated areas where access to health care facilities and services is extremely limited.

The main problem in 2002 for CHARP was lack of funding. The respond to the annual Appeal was only some 39.4 per cent. Due to funding constraints the supplying of multivitamins and levothyroxine as well as training of Red Cross workers for psycho-social support could not be arranged.

However some measures were undertaken to solve these problems. One of most important events for the CHARP during the reporting period was the evaluation of the programme carried out by the Federation in April-May 2002. The evaluation showed CHARP represented a well-organized and coordinated programme and should be continued but with certain modifications. Following these recommendations, the Federation and national societies of Belarus, Ukraine and Russia are working at the moment on further development of the programme.

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.

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

INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

Interim report	
Annual report	X
Final report	

Appeal No & title: 01.50/2002 Chernobyl
Period: year 2002
Project(s): P67505
Currency: CHF

I - CONSOLIDATED RESPONSE TO APPEAL

FUNDING	CASH		KIND & SERVICES		TOTAL INCOME
	Contributions	Comments	Goods/Services	Personnel	
Appeal budget	591,684				
less					
Cash brought forward	-57,214				
TOTAL ASSISTANCE SOUGHT	648,898				
<i>Contributions from Donors</i>					
American Government (DGUS)	8,231				8,231
British Red Cross (DNGB)	45,500				45,500
DFID - British Government (DFID)	50,000				50,000
DFID 3- British Government (DFID03)	48,408				48,408
ECHO CLINIC IN BELARUS (DE5003)	3,836				3,836
Great Britain - Private Donors (DPGB)	12,684				12,684
Japanese Red Cross (DNJP)	184,642				184,642
Netherlands Red Cross # 1 (DNNL01)	731				731
UA Floods ECHO/TPS/210/2001/09002 (DE9002)	7,732				7,732
FRENCH RC			9,540		9,540
SWISS AGENCY FOR DEVELOPMENT			16,265		16,265
TOTAL	361,764		25,805		387,569

II - Balance of funds

OPENING	-57,214
CASH INCOME Rcv'd	361,764
CASH EXPENDITURE	-336,878

CASH BALANCE	-32,329

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III - Budget analysis / Breakdown of expenditures

Description	APPEAL Budget	CASH Expenditures	KIND & SERVICES		TOTAL Expenditures	Variance
			Goods/services	Personnel		
SUPPLIES						
Shelter & Construction						
Clothing & Textiles						
Food & Seeds						
Water & sanitation						
Medical & First Aid	183,000	42,717	9,540		52,257	130,743
Teaching materials						
Utensils & Tools						
Other relief supplies						
Sub-Total	183,000	42,717	9,540		52,257	130,743
CAPITAL EXPENSES						
Land & Buildings						
Vehicles						
Computers & Telecom equip.	8,700					8,700
Medical equipment			16,265		16,265	-16,265
Other capital expenditures						
Sub-Total	8,700		16,265		16,265	-7,565
TRANSPORT & STORAGE	71,245	17,149			17,149	54,096
Sub-Total	71,245	17,149			17,149	54,096
PERSONNEL						
Personnel (delegates)		-1,828			-1,828	1,828
Personnel (national staff)	207,494	233,106			233,106	-25,612
Sub-Total	207,494	231,279			231,279	-23,785
GENERAL & ADMINISTRATION						
Assessment/Monitoring/experts		2,455			2,455	-2,455
Travel & related expenses	6,180	1,698			1,698	4,482
Information expenses	20,160	2,303			2,303	17,857
Admin./general expenses	29,820	1,334			1,334	28,486
External workshops & Seminars						
Sub-Total	56,160	7,790			7,790	48,370
PROGRAMME SUPPORT						
Programme management	39,897	22,713			22,713	17,184
Technical services	11,943	6,800			6,800	5,143
Professional services	13,245	7,544			7,544	5,701
Sub-Total	65,085	37,057			37,057	28,028
Operational provisions		886			886	-886
Transfers to National Societies						
TOTAL BUDGET	591,684	336,878	25,805		362,683	229,001