

# Mid-Year report



International Federation  
of Red Cross and Red Crescent Societies

## Russian Federation

Appeal No. MAARU002

30/July/2011

This report covers the period 1, January 2011 to  
30, June 2011



24, March 2011, World TB Day advocacy  
campaign in State Duma (Russian Parliament)

### In brief

**Programme outcome:** The programmes supported by the International Federation of Red Cross and Red Crescent Societies in the Russian Federation are in line with the Strategy 2020 strategic aims to save lives, protect livelihoods, and strengthen recovery from disaster and crises; to enable healthy and safe living; and to build strong National Red Cross and Red Crescent Societies.

#### Programme summary:

- In 2011 Russian Red Cross, in close collaboration with and technical support from IFRC, continued implementation of the program "Strengthening Cross-Sectoral Collaboration for More Effective National Response to MDR TB Spread" supported by USAID in 11 regions of Russia. Total budget of the program for the period October 2010-March 2012 is 1,900,000 USD (**CHF 1,584,000**).
- In addition, in 2011, the cooperation with Eli Lilly was further strengthened: in the framework of the Global IFRC/Eli Lilly Partnership, Russian Red Cross with IFRC technical support implemented the project "Enhancement of community involvement and social mobilization on MDR-TB prevention" aimed at wide advocacy and social mobilization activity in five regions of Russia. Total budget of the grant is **CHF 51,851**.
- In the reporting period four **DREF** operations were implemented or launched in Russia with overall budget of **CHF 296,518**. The budget for Strengthening Community resilience Program in Beslan was **40,720.42 CHF** (Norwegian and Netherlands Red Cross Societies)
- In first half of 2011, IFRC provided technical support to Russian Red Cross on the development of new Statutes and Strategic Development Plan 2020. Total amount of expenditures for 2011 **CHF 10,742**.

**Financial situation:** Total budget for 2011 is CHF 4,036,841 out of which CHF 1,411,747 (35 per cent) is covered. Overall expenditure during the reporting period was CHF 1,439,146 that is 36 per cent of the budget.

[Click here to go directly to the financial report.](#)

**No. of people we help:** In total **25,734** people directly benefited from the programmes supported by the International Federation.

Program	Target beneficiaries	Number of people we helped
<b>Health and Care</b>	<ul style="list-style-type: none"> <li>• TB patients and their relatives,</li> <li>• Medical staff,</li> <li>• People affected by Beslan crisis and other disasters (through DREF operations)</li> </ul>	TB patients – <b>2,855</b> TB doctors and nurses - <b>172</b> RC nurses – <b>28</b> General public – <b>9,382</b> RRC volunteers - <b>1,067</b> People affected by Beslan crisis and other disasters - <b>130</b> DREF beneficiaries – <b>12,000</b> RRC volunteers attracted to DREF operation <b>100</b>
<b>Disaster Response</b>		

**Our partners:** In the first half of 2011 Russian Red Cross cooperated with five partner National Societies, USAID, Eli Lilly, the International Committee of the Red Cross (ICRC), UN agencies operating in Russia, the Global Fund to fight AIDS, Tuberculosis and Malaria, different non-governmental organizations (NGOs), Ministry of Health and Social Welfare, EMERCOM, Federal Service of Sentence Execution and its divisions at regional level, as well as state authorities at the federal and local levels, universities, medical research centres, educational institutions, mass media, international and local enterprises.

## Context

Russia has seen sharp fall in poverty over the past decade, and the percentage of population below poverty line now stands at 30.9. Insufficient and often inadequate social services, healthcare, combined with meager salaries and pensions are a sad reality and elderly people in particular have found themselves suffering morally and psychologically from the collapse of the Soviet Union. With low birth rate in recent years, the country has seen a rapid increase in proportion of older people which currently stands at 20.6%. Along with older people, children remain a highly vulnerable group, suffering from the effects of alcohol and drug addiction, high unemployment and low wages of their parents, inadequate social services, and social isolation. There are up to 200,000 street children in Russia.

The current economic crisis significantly limits the Russian government's ability to deal with demographic trends through policy intervention. The problems that appear most amenable to policy intervention are those related to the health-care system. Thoroughly crafted health-care reform components are essential; an ill-designed benefit package, hasty decentralization, and overreliance on the private sector will only aggravate the situation. At the same time, promoting healthier lifestyles among Russians – reduced smoking and alcohol consumption, better diets – could improve health substantially.

Tuberculosis (TB) remains one of Russia's major public health threats. Russia ranks twelve among 22 high TB burden countries worldwide. The estimated number of TB cases in Russia forms 38.1% of all estimated TB cases in European region. Growing rates of multidrug resistant (MDR) TB poses a transnational threat to the region and globally. The MDR TB ratio is increasing, reaching 15.5% among new smear-positive cases in 2009, of those 6-10% are extensively drug resistant (XDR), placing Russia third among 27 priority MDR countries worldwide. Tuberculosis is the most common cause of death among infectious diseases in Russia – about 83% of all deaths caused by infectious and parasitic diseases, about 25,000 per year. As a result, Russia is a “priority country” for international donors and technical agencies in addressing TB.

Despite of the efforts by the Ministry of Health and Social Development of Russia (MHSD), which have brought to the stabilization of TB situation in some regions of the country, TB remains heavily stigmatized, leading to delayed diagnosing and unsatisfactory treatment compliance. TB incidence rate in Siberian and Far Eastern regions is significantly higher compared with the rest of the country. Thus, if the average rate of TB incidence in Russia is 82.6 cases per 100,000 people in

2009, in the same period in Buryatia – 168,3, in Khakassia – 117.8, in Khabarovsk Kray – 143,5, in Jewish Autonomous Oblast – 169.4. HIV/TB co-infections have been on the rise since 2003. As of 2006, about 6% of prisoners were co infected by these two diseases.

According to UNAIDS estimates approximately 980,000<sup>1</sup> people are living with HIV/AIDS, in the Russian Federation. Over 589,581 HIV/AIDS cases are officially registered at State institutions including the 58,000 new cases reported in 2010. Extensive research indicates that the reliability of HIV/AIDS data from the Russian Federation is low, and the real number of infections may be as high as three times the official statistics and even higher in certain regions of the country. The most affected age group is between 18 and 24 years old. Currently HIV epidemic in the Russian Federation is at the concentrated stage with the principal drivers being injecting drug use and unsafe sex.

In 2011, the Russian government continued its efforts to support the capacity building of the Russian Red Cross and strengthening its national and international role. Russian EMERCOM<sup>2</sup> signed Cooperation Agreement with Russian Red Cross which identifies fields of partnership in disaster preparedness and response actions. Regional IFRC Representation is involved in the process by providing technical support in developing new Strategy and Statute of the National Society.

## Progress towards outcomes

### Disaster Management

<b>Programme purpose</b>
<b>Reduce the number of deaths, injuries and impact from disasters</b>
<b>Programme component 1: Development of risk reduction activities</b>
<b>Component outcome 1:</b> Disaster risk reduction and disaster response strategy is developed and regularly updated
<b>Component outcome 2:</b> Effective cooperation with EMERCOM and international organizations is established

#### Achievements

In February 2011 Russian Red Cross with advisory support from IFRC signed Cooperation Agreement with Russian EMERCOM which has identified fields of cooperation between RRC and EMERCOM at federal and regional levels. Agreement provides unique opportunity to Russian RC to become equal partner to the state emergency agency to carry out timely relief assistance to the people affected during different disasters and emergency situations as well as enhance its capacity in disaster preparedness activity at regional level.

During reporting period Russian Red Cross with the technical support from Federation developed disaster risk reduction and disaster response strategy as integral component of Russian Red Cross Strategic Development Plan 2020. During January – June 2011 IFRC facilitated process of broad discussion of DRR/DP Strategy among National Society branches. In April 2011 representatives of 18 RRC branches participated in the round table discussion organised by IFRC jointly with ICRC, where the main directions of RRC DM Strategy were discussed. To further develop DM activity, particularly cooperation with EMERCOM, Russian Red Cross will develop Joint Plan of Action that will be disseminated and implemented at federal and regional levels.

During the reporting period Russian Red Cross provided support to the international disaster response action to tsunami and earthquake in Japan, aimed at resource mobilization to help affected population. In the period March - May 2011 Russian Red Cross jointly with the largest Russian State Bank - SBERBANK launched donation campaign for earthquake and tsunami victims

<sup>1</sup> <http://www.unaids.org/en/regionscountries/countries/russianfederation/>

<sup>2</sup> Emergency Committee - Federal State Establishment "Agency for Support and Coordination of Russian Participation in International Humanitarian Operations" (EMERCOM Agency) of the Ministry of Civil Defence and Emergencies of the Russian Federation

in Japan. Total amount of donations collected from the beginning of the campaign is CHF 1 435 660.

In April 2011, in response to possible negative impact of tsunami and earthquake in Japan on the Far East region of Russia, Russian Red Cross HQ in close collaboration with EMERCOM established regional emergency stock. Basic non-food relief items were provided by Turkish Red Crescent in total amount 216,000 USD, in the framework of bilateral agreement with Russian Red Cross.

In May 2011 Tatyana Voevodina, the chairlady of Voskresensk city branch of the Moscow Region Russian Red Cross branch, participated in the regional disaster response team (RDRT) training which was held in Norak, Tajikistan.

DREF operation launched to support 5,000 beneficiaries affected by the heavy floods in the Krasnodar region in October 2010 was completed in the end of February 2011.

The Russian Red Cross provided assistance to 600 households (5,000 people) through delivering basic food and non-food relief and providing psychosocial support to the affected elderly. The operation was implemented during a period of four months. The activities included distribution of food parcels, hygienic kits and bed linen. 23 Russian Red Cross volunteers were trained, equipped with first aid kits (in case the flooding would have occurred again) and carried out regular home visits to the affected providing psychosocial support and delivering humanitarian aid to the most in need among the beneficiaries.



Group session with the most vulnerable beneficiaries in Russian RC Krasnodar branch

In June 2011 another flood hit the region and Russian Red Cross launched a **DREF operation for supporting 1,800 affected families (6,300 people) in the Republic of Adygeya and Krasnodarskiy region** through delivering basic food and non-food relief items. The operation involved 40 volunteers of the respective branches and will be finalized by September 2011.

Because of worsening forest fire situation, in the middle of June IFRC European Zone office and Russian Red Cross launched **DREF and raised 33,015 CHF for starting an IFRC preparedness mission to Russia**. This DREF allocation aimed to support the Russian Red Cross in assessing the necessary preparedness activities and reinforcing their capacity to develop a plan of action that would be timely activated in case the forest fire situation became critical. The team conducted a series of field visits to four regions (Moscow, Nizhniy Novgorod, Krasnodar and Voronezh regions) where they had meetings with the regional Russian Red Cross branches and local authorities. Meetings with EMERCOM, USAID, in EU and ICRC were held in Moscow. As a result of the mission a plan of action was prepared, translated and presented to the Russian Red Cross President. The team has also developed a list of 23 recommendations for overall strengthening the National Society DM capacity.

Emergency and long term psychological needs of the affected population (as an auxiliary to existing interventions) are addressed through a community centre aimed to support rehabilitation of the affected population and through schools. Based on the assessment, a **psychosocial programme was launched by the North Ossetia regional branch**.



Puppet theatre – one of the most effective method of psychosocial support for affected children provided by Beslan Red Cross Center

The overall aim was to provide psychosocial assistance to the affected population in Beslan to be able to cope with human losses and anxiety. Children were suffering from exclusion and Beslan Red Cross Centre was practically the only place where they could meet friends, socialize and feel welcome. The main activities of the programme included home visits, counselling and group sessions, leisure club activities and community events. The affected children continued to attend the centre and participate in the activities in puppet theatre club, playing room, handicraft studio and computer club. The PSP workers continued to gradually decrease the dependency the children have developed for the Centre in site of upcoming closure of the programme.

### Constraints or Challenges

The main challenge the Russian Red Cross is facing is lack of funding for systematic disaster preparedness program at national and regional levels. At present time USAID expresses high interest to collaborate with IFRC/RRC in line with recently signed Cooperation Agreement with EMERCOM and assume civil society participation in state disaster preparedness and response activity.

Unfortunately the RRC DM capacity is limited, the DM department at the HQ level is represented by only one person, there are also few people trained in DM issues working on the regional level. Moreover, few branches are successful in DM-related local fundraising activities, even fewer have sufficient technical resources available to ensure timely and effective response operations (warehouses, means of transport etc.). Some branches do their own situation and needs assessment during emergencies, entirely relying on data provided by EMERCOM or local authorities. Training for staff and volunteers is not systematic; therefore building basic DM knowledge on the regional level is a main focus. The main constraint the branch is still trying to overcome is procrastination of the local authorities who had long ago pledged to provide the branch a facility to have their PSP Centre on permanent basis.

Recommendations developed after the forest fires imminent crisis mission are attempting to fill all the gaps mentioned above, such as improving volunteer management and logistic infrastructure in the regions, increasing HR capacity of DM department on the HQ level, reviewing and updating the existing Contingency plan and helping RRC identify its niche in DP/DR activities, thus making the agreement between EMERCOM and RRC operational.

## Health and Care

<b>Programme purpose:</b>
<b>Reduce the number of deaths, illnesses and impact from disasters and public health emergencies</b>
<b>Programme component 1: Tuberculosis</b>
<b>Component outcome 1:</b> DOTS plus program successfully implemented in the following program sites: Adygeya and Khakassia republics, Khabarovsk kray, Belgorod, Jewish Autonomous, Pskov oblasts, Buryatia plus four sites that will be selected in 2010, are enrolled in the program for replication of developed models;
<b>Component outcome 2:</b> Detection of new TB cases among “risk groups” improved as a result of RRC staff and volunteers activities: 100% of TB cases are registered in the program sites;
<b>Component outcome 3:</b> TB treatment default rate reduced due to the RRC activity: Default rate (treatment interruptions) in all program sites does not exceed 8% (less than 10% everywhere) in average

**Component outcome 4:** Awareness of population on TB prevention and their attention to stigma and discrimination issue towards TB patients in 25 regions of Russia increased

**Component outcome 5:** Systems of collaboration and ensuring of treatment continuity and adequacy between civil and penitentiary sectors, TB and HIV services are established and legalised in all program sites.

**Component outcome 6:** Strengthening the institutional capacity of the Russian Red Cross (RRC) and its visiting nurses service (VNS).

## Achievements

During the reporting period the Program covered 11 regions of the Russian Federation (Adygeya, Buryatia and Khakassia republics, Khabarovsk kray, Belgorod, Kaluga, Kostroma, Nizjni Novgorod, Jewish Autonomous, Pskov and Vologda oblasts) with expansion of various elements of the program activities to additional six regions: Arkhangelsk, Irkutsk, Kaliningrad, Karelia, Murmansk Orel. The main focus of the program activities was at the establishment of close cross-sectoral relationships between civil, penal TB institutions and Russian Red Cross as well as with other stakeholders at regional level to ensure more effective response to MDR-TB spread.

The analysis of results, achievements and challenges of the program has demonstrated, that directly observed treatment (DOT) and DOTS plus have been established and successfully implemented, cross-sectoral interrelations between civil, penal TB institutions, Russian Red Cross, important stakeholders have been set up in the most of the regions (Republic of Adygeya, Republic of Buryatia, Republic of Khakassia, Khabarovsk krai, Jewish Autonomous Oblast Belgorod and Pskov regions).

There is no DOTS and DOTS plus experience in Vologda, Kaluga, Kostroma and Nizjni Novgorod regions before the start of the program in October 2010 (excluding Kostroma region, where TB institutions has some experience on DOTS implementation). Registration and recording system do not correspond with DOTS and DOTS plus due to the:

- lack of proper definitions,
- lack of collection and analysis of statistics,
- problem of the resistance to antibiotics being underestimated,
- lack of understanding of infection control at all levels,
- cross-sectoral interrelations between civil, penal TB institutions, Russian Red Cross, primary health and care system and other important stakeholders is an important subject of the program intervention.

During the reporting period, RRC/IFRC provided extensive trainings, workshops and exchange visits for **144 TB specialists** from civil and penal institutions as well as general health system, to enhance their professional skills and knowledge and achieve better response to MDR-TB spread. The results of the trainings showed good knowledge of participants on TB control measures, epidemiology of TB/HIV infection. Upon completion of the training participants received necessary skills on earlier detection of TB, methods of TB diagnosis and treatment, conducting consultations on HIV/AIDS and TB in the context proper and correct approach to the treatment; to motivate patients to adherence to treatment of TB and HIV infection, set up dialogue with PLHIV; and integration between TB service and AIDS Centers.

Following the program objectives, in the reporting period the Russian Red Cross supported TB services of 11 regions in providing an appropriate DOTS plus-based treatment for MDR TB patients, combined with social and nutritional support as incentives to improve treatment compliance. The incentives were provided in the form of food and hygiene kits and psycho-social support. Based on previous experience, the Russian Red Cross continued to provide social support at TB out-patient facilities, Red Cross medico-social rooms and, if needed, directly at a patient's home. In the reporting period, Russian Red Cross under technical support of IFRC enhanced its activity, focused on psychosocial support to MDR TB patients and their relatives, family members and socially important micro-social environment as well as staff of TB facilities, working with MDR TB patients.



Psychosocial support session with TB patient-inmates

Psychosocial support as an integral part of social assistance was provided by Russian Red Cross psychologists in seven regions, involved to the program activity. During the reporting period psycho-social support was provided to **1,042 people: 521 TB and 245 MDR-TB patients and 109 family members**, **99** Russian Red Cross nurses and **68** staff members of TB service. Most of the TB and MDR TB patients who received psychosocial support were from civil TB institutions – **752 people (98,2%)** and only **25 (1,8%)** from federal penal institutions. Staff of TB institutions and Russian Red Cross visiting nurses received necessary psychosocial advices on specific approaches to TB patients and professional stress management and prevention of psychological burn-out.

Total number of patients, covered by Russian Red Cross social support was **2,855** people: **2,086** patients with sensitive TB, out of them **994 people (64%)** successfully finished its treatment, **533 people (34%)**, continued its treatment under control of TB service, and only **19 people (1,2%)** defaulted; **769** MDR TB patients: out of them **144 people (60%)** successfully finished its treatment, **609** continued its treatment under control of TB services, and only **16 people (6,6%)** defaulted. In the reporting period **28** Red Cross nurses conducted **6,357** home visits of them **4,268** visits to **366** patients with sensitive TB. During the visits special attention was paid to the direct control of timely taking TB drugs and necessary home care. **2,089** visits were made to **170 MDR TB patients**, including **104 patients** with heavy health conditions, **66 patients** and with failures of regimen of treatment. The main purpose of these visits is the control of taking the daily dose of TB drugs, and attracting patients with failures of regimen to the controlled therapy.

During the implementation of the previous program IFRC/ Russian Red Cross paid special attention to the social adaptation of TB patients and former TB patients by facilitating initiatives of TB communities and setting up TB patients` clubs. During the reporting period such patients` clubs were established, started actively functioning and attracting more than **200** TB patients in Belgorod region, Republic of Khakassia, Khabarovsk Kray, Pskov region. During the reporting period three new self-support groups of TB patients (one in the Republic of Buryatia, and two in Republic of Khakassia - Chernogorsk and Abaze) were established. In 2011, the total number of newly involved TB patients raised to **43 people**: 5 in Belgorod, 20 in Khakassia, 8 in Khabarovsk, 6 in Pskov, 4 in Buryatia. Most of them actively participate in social mobilization and advocacy activity. This helps TB patients to avoid social isolation, provides support to the defaulting TB patients, and involves them into all events of the RRC and its interaction with mass media. It is planned that RRC will replicate this experience of establishing TB patients clubs as the best practice in other regions and will facilitate process of exchange visits of the most active club members to disseminate their experience to other TB patients.

In the reporting period National Society branches focused their public awareness activities on creating correct messages about TB, targeting the general population through developing new and revising existing information and education materials for further dissemination during public awareness campaigns, actions and events.

During January–June 2011 Russian Red Cross with IFRC technical assistance in the framework of Eli Lilly partnership produced **12** types of informational materials (**264,700 copies**):

- Booklet for TB patients “**Six answers to questions about prevention of TB and MDR-TB**”;
- Leaflet “**For TB patients in prisons**” for RC nurses, psychologists and volunteers on adherence to TB treatment, MDR-TB prevention and on methodology of features of psychological support to TB patients;

Existing Russian Red Cross and IFRC experience and best practice were used to create correct messages and prepare information and education materials in more comprehensible way.

In the reporting period Russian Red Cross organized a series of public awareness actions of various types: **193** lectures for general population, **4,051** meetings, discussions and round tables, which covered total of **9,382 people**. In the framework of its country-wide TB advocacy campaigns RRC has organized a series of photo exhibitions “Your health in your hands” in five regions of Russian Federation in the premises of various organizations including State Duma (Russian Parliament), which allowed to attract attention of more than 30,000 representatives of state authorities, mass media and general population. RRC put special emphasis at strengthening the interaction of the RRC regional branches with mass media in order to increase their interest in TB control issues. In general and to ensure correct wording of TB-related messages. **106** pieces of information (articles, web articles, TV and radio broadcast) were published on the Internet and local mass media during the reporting period. **At least 50,000** people were reached with information about TB through the above listed publications, which helped in raising awareness of population on TB symptoms, and contributed to an increase of TB detection rate.

During “White Chamomile” public awareness campaigns conducted within the reporting period RRC provided necessary assistance to TB services on new TB cases detection through X-ray examination of general population. Total coverage – **5,676 people with 11 new TB cases and 96 other non-tuberculosis lung diseases detected.**

In the first half of the year Russian Red Cross volunteers actively participated in the following fields of activities:

- psychosocial support TB patients,
- public awareness campaigns,
- facilitation of self-support groups’ activities,
- TB patients clubs and support to Russian Red Cross staff on attraction of defaulters to the treatment.

**1,067** volunteers were attracted to the TB programme by Russian Red Cross branches in permanent basis and **1,629** people were attracted to the RRC activities in temporary basis during public campaigns, actions and events.

### Constraints or Challenges

Despite of the progress, achieved during multi-year program intervention, some issues, related to sustainability of TB control approaches and integration of international standards to Russian national norms still remain challengeable. Due to the fact that Russian national standards of MDR TB treatment are still not developed, TB research institutions cannot provide adequate recommendations to TB specialists of the program regions that in many cases results contradictions with internationally recognized standards of MDR TB treatment that make impossible to further develop a sustainable TB and MDR TB control activity without permanent external support.

<b>Programme component 2: Extension of support and service to people affected by HIV /AIDS (Bilateral programme with the American Red Cross)</b>
<b>Component outcome 1:</b> Skills on the disease management formed among PLHIV, the program clients in Irkutsk, Tula, Orenburg, Sochi, Belorechensk and Leningrad regions.
<b>Component outcome 2:</b> Stigma and discrimination of PLHIV from their close environment (health staff, family members, friends, program staff) reduced.
<b>Component outcome 3:</b> Risk of HIV transmission from mother to child reduced
<b>Component outcome 4:</b> Mental and physical development of children born by HIV positive mothers improved to normal.
<b>Component outcome 5:</b> Access to palliative treatment and care for PLHIV in advanced stages of the disease enhanced.
<b>Component outcome 6:</b> Dissemination of successful experience and best practices among RRC Regional branches improved

## Achievements

In the reporting period Russian Red Cross jointly with American Red Cross implemented program "Expanded Care and Support for people affected HIV in Russian Federation" in 5 regions, including St. Petersburg, Tula, Sochi, Belorechensk, Irkutsk regional branches and RRC HQ. The program includes 2 HIV prevention projects for studying youth in Sochi and Belorechensk, with psycho-social component for PLHIV and caregivers in Belorechensk. Care and support project in Irkutsk for PLHIV and caregivers contains the following components:

- ICC "Steps" services to provide the whole range of consulting (psychologists, a lawyer, a peer counselor, and a pediatrician); to support Hot Line, the peer support group and PLHIV support group.
- Visiting Nurse Service to monitor the state of health of children born to HIV-positive mothers and to provide assistance in caring for PLHIV in advanced stages of HIV-infection, to provide people with concurrent diseases of HIV+TB with DOTS.
- Services of the "Rainbow Flower" Family Health Center, which functions as an Early Development School for the Program children-clients.

Care and support project in Tula contains Information Counseling Center and Visiting nurses service for PLHIV and in most cases for PLHIV with TB.

St. Petersburg branch implements the survey on PLHIV needs and problems in medical and psycho-social services. All projects are implemented in close collaboration with AIDS Centers, local authorities, Health and Educational Departments, local NGOs.

Russian Red Cross Resource Center (RC) on the base of Irkutsk regional branch was planned in the scope of «Regional Initiative on HIV» ARC program and approved by RRC in May 2011. It's considered not as separate structural program subdivision or stand-alone project, or a NS structure, but a mechanism of providing technical and methodological support to the regions and neighboring NS. RC Regulations and working plan were developed and also approved during June. Next steps will be directed to further development of RC working mechanism and providing different kinds of assistance for HIV projects implementation.

**Total number of covered beneficiaries - 8,244 people**

## Constraints or Challenges

Despite constraints faced by the Russian RC in getting acknowledgement as a strong player in the sphere of HIV programming, all regional branches are well recognized and supported by local authorities and medical institutions.

<b>Programme component 3: Child Welfare programme (Bilateral programme with the Norwegian Red Cross)</b>
<b>Component outcome:</b> Child and youth vulnerability in six North-Western regions of Russia: (Arkhangelsk, Karelia, Murmansk, Novgorod, Pskov, Saint-Petersburg) is reduced through the provision of social-psychological support by the RRC.
<b>Component outcome 2:</b> Local community, civil society and RRC capacity for efficient and sustainable service delivery is increased through promotion of volunteering, enhanced interaction between state and non-state actors, advocacy and community empowerment.

## Achievements

In the reporting period Russian Red Cross jointly with Norwegian Red Cross implemented social welfare programme in 8 North-Western regions of Russia: Saint-Petersburg city, Republic of Karelia, Murmansk, Arkhangelsk, Novgorod, Pskov, Kaliningrad and Vologda oblasts. The main target group of the NRC-RRC programme are vulnerable children living in own families, but also children living without guardians and shelter, that is, street children. Currently the programme is focusing on provision of daily hot meals for **6,300 vulnerable children** and socio-pedagogic activities for a selection of these children. The NRC has also been cooperating with the RRC in the implementation of a youth peer education programme fighting the spread of HIV/AIDS. The Norwegian RC plans to continue its support to the programme in the coming years, however, with gradual reductions in NRC funding starting in 2011 and hand-over of responsibility of the programme implementation and funding to the RRC. Therefore, number of beneficiaries and

regions that are to be involved into the programme implementation in the nearest future is to be identified by the parties.

## Constraints or Challenges

Despite constraints faced by the Russian Red Cross in transferring earmarked Child Welfare Programme funds to its district branches, cooperation between the National Societies shall continue. Having negotiated the situation, the Russian Red Cross and the Norwegian Red Cross have agreed to renew their cooperation agreement under new terms and with clear solutions, leading to closure of all outstanding issues in the nearest possible future. As by July, 2011, six regions participate in the programme: Arkhangelsk, Murmansk, Karelia, Saint-Petersburg, Novgorod and Pskov. During the coming months, recommendation from the 2011 review will be incorporated into the programme, focusing on capacity building efforts around the twinning cooperation between NRC and RRC district branches

## Organizational Development/Capacity Building

### Programme purpose

**Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.**

**Programme component 1: Support Russian Red Cross to create a modern and sustainable well functioning National Society able to provide effective service to the vulnerable nationwide.**

**Component outcome 1:** Russian Red Cross received technical support with regard of development of a new Strategy and Statutes

In 2011 Russian Red Cross with IFRC advisory support actively worked on the development of new RRC Statutes and Strategy 2020.

During January–June 2011 RRC HQ jointly with IFRC and ICRC facilitated active discussions of the Russian Red Cross Statutes and Russian Red Cross Strategy 2020 within the RRC, involved regional branches representatives to the discussions, collected ideas, and prioritized the spheres of work for the period 2010-2020. Involvement of the external partners and important stakeholders of the Russian Red Cross into these broad discussions was one the most crucial parts of this intervention. In the reporting period 4 working Meetings of the Russian Red Cross Task Force on new RRC Statutes and 2 enlarged Working Meetings (attended by RRC Presidium members, the International Federation and ICRC representatives) have been prepared and held. Drafts of RRC Statutes and Strategy 2020 have been posted on the RRC web site [www.redcross.ru](http://www.redcross.ru), which gave an opportunity to all 89 Russian Red Cross branches to participate in the discussions.

### Drafting of RRC Statute

A Task Force headed by one of the most respected branch presidents delivered the revised statutes to Federation and ICRC for comments before submitting it to the JSC. A legal advisor has been consulted during the process to ensure compliance of the suggested changes with the Russian legislation.

In June 2011 Russian Red Cross submitted the 3<sup>rd</sup> draft of the Statute with JSC recommendations to IFRC governance in GVA and ICRC and received positive informal comments, which allowed the Russian Red Cross to call for a presidium meeting aiming at endorsement of the draft for presentation at the congress planned later this year. The National Society expressed its high appreciation for the support provided by the Federation, which was considered realistic and fully in line with the context of the Russian Red Cross. Russian MoH and Ministry of Justice actively participated in the process of Statute development and provided comments that were taken into account in the latest version of the document.

On 9, June 2011 Russian Red Cross Presidium Meeting reviewed the latest 4<sup>th</sup> version of the Statute and recommended it for further consideration by JSC (the latest draft of the Statute sent to JSC on 21, June 2011). The meeting of the Russian Red Cross Congress was scheduled for 25, August 2011.

### **Strategy 2020**

Russian Red Cross S2020 development process was facilitated by two specialists trained on this issue. During the reporting period RRC conducted four workshops with participation of 24 RRC branches representatives in order to discuss the main priorities and directions of Russian RC Strategy 2020. The NS strategic development plan is being finalized in compliance with S2020 agenda. The appointed focal point on S2020 is a trained S2020 facilitator, who represented the Russian Red Cross during the Budapest consultative meetings on the NS Capacity Building Framework.



Chairpersons of Russian RC regional branches discussing RRC Strategic Development Plan 2020

### **Constraints or Challenges**

- Inter-Ministerial Commission on modernisation of the Russian RC is not active in the process of modernisation and got involved only in the end of 2010.
- Significant part of the regional RRC branches is not engaged into the process of discussion of the Strategy 2020 and Statute of the RRC. Certain part of the RRC branch chairpersons are reluctant to accept changes proposed by these documents.
- Huge territory of Russia and large number of regional branches of the RRC require significant investment of IFRC or sister NSs into facilitation of discussions at regional level (including organization of series of workshops and meetings) and provision of technical assistance for the RRC capacity building.
- IFRC has to mobilize significant amount of funds and attract interested partner NSs to achieve visible results on Organisational Development and Capacity Building at HQ and branches level.

<b>Programme component 2: Road Safety</b>
---

<b>Component outcome 1:</b> Effective cooperation between the Russian Red Cross, Russian government bodies, Global Road Safety and other National Societies in the field road safety established
--

Russian Red Cross is planning to discuss possible steps to take to develop partnership with GRSP in the view of the upcoming Congress of the Russian Red Cross and General Assembly. The following steps are planned to be taken by the Russian Red Cross:

- Mapping the existing road safety and related programmes in ten Russian Red Cross regional branches through a questionnaire sent to all branches, inquiring information about road safety activities.
- Presenting the information on the road safety crisis and the launch of the UN Decade of Action initiated by the Russian Government at the Russian Red Cross Congress together with the results of the survey in the 10 regions.
- Russian Red Cross Congress adopted its S2020 with an article devoted to road safety.

## Principles and Values

<b>Programme purpose</b>
--------------------------

<b>Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion</b>
---

## Programme component 1: Migration

**Component outcome 1:** Vulnerability of the targeted groups of migrants in Russia reduced through RRC legal, psycho-social support.

**Component outcome 2:** Stigma and discrimination of migrants at community level reduced through increasing awareness of local communities on migration issues.

Russian Red Cross will start the implementation of the project “Enhancement of support to the most vulnerable migrants’ community of Moscow region through providing better access to legal support and social care” in the second part of the year 2011. Contacts with International organization for Migration in Russia and national diasporas of migrants have been established. A coordination meeting will be held between local diaspora NGO Foundation “Tajikistan” staff and RRC HQ and IFRC office representatives to define further steps of the project.

## Working in partnership

During the reporting period RRC enhanced its collaboration with IFRC, ICRC, partner NSs (American RC, Norwegian RC, Turkish Red Crescent) as well as with institutional donors: USAID, Eli Lilly, Global Fund. Partnership with different stakeholders (WHO, UNAIDS, High level Working Group on TB) have also been enhanced.

In 2011 IFRC facilitated collaboration of the RRC with different academic institutions - such as Diplomatic Academy - on possible involvement of IFRC and RRC into the educational process on humanitarian aspects of disaster management, conflict resolution, and migration. IFRC also supported involvement of students of Medical Universities located in Moscow into the Health Promotion issues, and advocated for RRC involvement into the activities conducted by TB research institutions in order to further strengthen TB control measures. With the support of IFRC, in the framework of its bilateral activities with Norwegian RC RRC expanded its collaboration with the Institute of Enterprise Issues (Saint-Petersburg), Independent Social Research (Saint-Petersburg) Kola Center to conduct social research on child welfare issues.

## Contributing to longer-term impact

To achieve better results of implemented activities, during the reporting period IFRC/RRC used the following instruments of monitoring and evaluation of MDR -TB control program:

- (a) **Situational reports** (quarterly statistical and narrative, and monthly financial) prepared by the regional Russian Red Cross branches. The reports provided to RRC HQ and IFRC office in Moscow for review and follow up on project progress, track compliance with the plan and timely identify constraints/risks to be addressed.
- (b) **Regular monitoring visits** carried out by TB services, RRC branch representatives at regional level, and at HQ level carried out by IFRC and RRC HQ representatives. Representatives of the donor were invited to participate in the visits. During the visits the progress of project activities and their impact was analyzed through interviews with the RRC staff and volunteers, other relevant stakeholders at regional level covered by project activities, interviews with the beneficiaries, analysis of individual cases and the statistical data as morbidity, mortality, default rates, treatment success as well as media coverage, etc.

The feedback received during the final evaluation visits to the affected regions and surveys revealed that people assisted through DREF operations found the aid and the presence of the Red Cross volunteers in their daily lives very useful and highly appreciated it.

IFRC/RRC pays special attention to gender equality through involvement of female beneficiaries to the program activities, provide them equal opportunity and access to trainings and information-education campaigns.

To achieve sustainability and long-term impact of its project activities, RRC in co-operation with IFRC and AmRC has developed a network of Centers of Best Practice (Information and

Coordination centres) in the sphere of TB with a Center at RRC HQ serving as an overall resource center. The goal of this network is to serve as an educational platform for local TB facilities and RRC branches, providing opportunities for sharing best practices and experience. The number of regions participating in the network is expected to reach 25 by the end of the program.

## Looking ahead

Russian Red Cross will continue its collaboration with USAID and Eli Lilly on joint implementation of MDR-TB program with strong advocacy, social support and community mobilization component. In next period of 2011 the National Society will enhance its Disaster Management capacity through strengthening its cooperation with EMERCOM: joint Plan of Action at regional and Headquarters level will be developed and put into practice. Russian Red Cross will invest efforts to attract country based institutional donors: USAID, European Commission, as well as state funding to enlarge its disaster preparedness and disaster response capacity at national and regional level.

The National Society will expand its activities addressing migration in Russia, establishing working relationships with state migration services, international organizations (IOM, UNHCR) as well as national diasporas to provide complex legal and health & care support to the most vulnerable migrants as well as promote tolerance and anti-discrimination among general population.

Russian Red Cross as a member of IFRC Governing Board will facilitate dialogue with Russian Government to mobilize resources on promote Russian Language as IFRC working language in practice. RRC with IFRC (Moscow and EZO) support advocate IDRL and Risk Reduction Issues in Russian based CIS regional cooperation bodies: Inter – Parliamentary Assembly of CIS countries, Eurasian Economic Community, Russian State Agency of regional cooperation.

How we work	
<p><i>All Federation assistance seeks to adhere to the <a href="#">Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering assistance to the most vulnerable.</i></p>	
<p>The IFRC's vision is to:</p> <p>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.</p>	<p>The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:</p> <ol style="list-style-type: none"> <li>1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.</li> <li>2. Enable healthy and safe living.</li> <li>3. Promote social inclusion and a culture of non-violence and peace.</li> </ol>
Contact information	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> <li>• <b>In the Russian Red Cross Society:</b> Raisa Lukutsova, Chair person; email: <a href="mailto:mail@redcross.ru">mail@redcross.ru</a>, phone: +7 499 126 75 71; fax: +7 126 42 66</li> <li>• <b>In the Regional Representation in Russia:</b> Davron Mukhamadiev, Regional Representative; Moscow, email: <a href="mailto:Davron.Mukhamadiev@ifrc.org">Davron.Mukhamadiev@ifrc.org</a>; phone: +7 495 937 52 67; fax: + 7 495 937 52 63</li> <li>• <b>In the Europe Zone Office:</b> Anitta Underlin, Director Europe Zone, phone: ++36 1 8884 501; fax: +36 1 336 1516; email: <a href="mailto:anitta.underlin@ifrc.org">anitta.underlin@ifrc.org</a></li> </ul>	