1. SUMMARY

On 25 June 1990 the League launched an appeal for the Chernobyl Humanitarian Assistance and Rehabilitation Programme. The experience acquired during the first months of its implementation and the careful approach of the participating Societies in responding to the initial targets led the League and the Soviet Red Cross to adjust their objectives and plan of action.

On 18 March 1991 the League launched an Appeal Up-date which contained adjustments to the initial goals and programme budget.

The main thrust of the Plan of Action continued to be improved monitoring of radiation levels in people and food through the provision of diagnostic equipment and training, closely linked with an information/health education programme.

2. GENERAL SITUATION

On 26 April 1991 the Alliance of Red Cross and Red Crescent Societies of the USSR and the League Secretariat signed an agreement on cooperation for the Chernobyl Humanitarian Assistance and Rehabilitation Programme. The agreement covers all aspects of the Programme supported technically and materially by the League. This includes the following:

- The establishment of the Red Cross Mobile Monitoring Project connected with the Blood Testing Laboratories
- The establishment and development of the Red Cross Food Monitoring Project
- Further development of the Red Cross Environment Contamination Monitoring Project
- Further development of the Red Cross Information Service for the Programme

Due to the nature of this disaster, it is clear that years will need to pass before the effectiveness of measures taken at present becomes obvious. In view of this the situation report concentrates on ongoing activities by the League and the Soviet Red Cross.
The final stage of the programme planning was embarked on in early 1991 following an improved response to the needs in cash and in kind by the participating National Societies. Certain delays against the initial implementation schedule are explained by a continued lack of profound knowledge on the nature of this disaster and the fact that the equipment required was not immediately available.

In June 1991 the new League Representative within the programme, Mr Benno Dietrich, sponsored by the German Red Cross, took over from his predecessor Mr M. Behr.

3. ALLIANCE/LEAGUE SECRETARIAT ACTION

There is a clear understanding on the side of the Alliance that it is primarily responsible for the planning and implementation of the programme with the League playing a supportive role. However, at the Republican Red Cross Committee level the operational structure still needs to be strengthened.

The technical aspects of the programme are clear. Shortcomings occur in the field of management and future development. The problem will be solved in October with the expected appointment of the Alliance Programme Coordinator.

The specialized equipment which has been already brought into the country or is in the pipeline will be sufficient for the moment.

3.1 Mobile Teams/Laboratory Project

The equipment for the Mobile Teams, including tailor-made vehicles, was ordered end of June 1991. These Teams will be operational in the following areas:

Byelorussia: Gomel
Mogilev

Russian Federation: Kursk
Novozubkov (Bryanskaya oblast)

Ukraine: Rovno
Zhitomir

The delivery of the equipment is planned for November 1991. By this time it is planned to finalize the operational planning, recruitment and training of the staff who will be involved in running the Mobile Units. The composition of each Mobile Team is the following:

1 Physician (Head of the Mobile Team)
1 Nurse (Assistant to the Physician)
1 Radiological Assistant (Operator of the whole body monitor)
2 Medical Assistants (Operators of the medical analysers)
1 Driver (also dosimetrist)

The recruitment of the staff is taken care of by the Republican Red Cross Central Committees and the appropriate Regional Red Cross Committees. Training of the key staff in the Mobile Teams will be arranged by the German Red Cross in Hamburg (Germany).
Besides the recruitment, a number of organizational and technical questions are being solved. These questions include matters such as itineraries, cooperation with the district committees, data collection and quality control.

Initially, the equipment will be provided only for the Mobile Teams, while the upgrading of the Blood Testing Laboratories will be undertaken when the Mobile Teams are fully operational.

The following equipment will be available for the Mobile Teams:

- Daimler-Benz vehicle DB 410 D
- 1 whole Body Monitor Herfurth H 13010
- 2 Food Monitors Berthold LB 200
- 2 Dosimeters Genitron MIRA 661
- 1 Contamination Monitor Herfurth Minicart
- 1 Haematology Analyzer Becton Dickinson QBC II
- 1 Reflectometer (Urine Status) Bayer Diagnostic Clinitek 100
- 1 Clinic Chemistry Analyzer Hoffmann-La Roche COBAS Ready
- 1 Calculator Panasonic CF-270 AT Notebook
- Blood Collecting Equipment
- General equipment for medical examinations.

3.2 Portable Radiation Meters

At the end of July three Republican Red Cross Committees were requested to submit reports on the results of using, and the experience of working with, the ALNOR portable Radiation Meters. Such reports have been received from Byelorussia and Ukraine where the majority of units were distributed.

In Byelorussia, approximately 10,000 measurements were taken in 231 settlements in course of May-June 1991. The results of measured gamma-radiation background levels were published by local newspapers and additionally publicized on noticeboards in the appropriate Red Cross District Committees. A special service is offered in Gomel, where dosimeters can be loaned out to the population. However, the League has expressed its disagreement with such methods of utilising the equipment, since no responsibility can be taken for interpreting the results of measurements.

The Ukrainian Red Cross reported that all dosimeters had been distributed and the Red Cross workers were trained down to local level. Additionally, a working schedule for area control has been established.

The appropriate Red Cross staff are working to a planned schedule as well as on specific requests from the population and organizations. The frequency of measurements has been increasing in the process of getting experience in the work with dosimeters.

The results of measurements since the delivery of the dosimeters in November 1990 are the following:

In 2,247 settlements 444,455 measurements were carried out in water reservoirs, public and private buildings, on roads, meadows, banks of rivers, agricultural allotments, in forests and other locations.
Higher than acceptable background levels of radiation were discovered on 52 occasions. The appropriate authorities were informed. The results were published in local media. Besides the measurements, the dosimetrist carried out educational and informational work among the population. One problem is the lack of mobility of the dosimetrist because of a vehicle shortage especially at district level.

The Ukrainian Red Cross reports that the service has been accepted by the population and improved Red Cross's image as well as alleviating fears on radiation. The League Delegation reports that the dosimeters project is working and that they are used in a proper manner. The increasing requests to this service also shows confidence in Red Cross's work in this field.

3.3 Food Monitors

Subsequent to the Tula training course which took place in July 1991, ten ALNOR Food Monitors were distributed. Four of them to the Byelorussian Red Cross, three monitors to the Russian Federation Red Cross, and three to the Ukrainian Red Cross.

In Byelorussia the monitors are distributed as follows:

- Minsk - A scientific medical laboratory,
- Brest - Regional Red Cross Committee,
- Mogilev - Regional Red Cross Committee,
- Gomel - Regional Red Cross Committee.

According to the available information the start of the project in Byelorussia has been slow. The Byelorussian Red Cross has already had experience in operating Food Monitoring Systems. However they proved to be not very reliable due to poor technical quality of the equipment and lack of training of the staff.

The League Delegation has expressed serious concern at the meeting with the Byelorussian Red Cross and requested that immediate measures should be taken in order to make full use of the equipment provided.

The three monitors provided to the Ukrainian Red Cross Society are reported to be in use according to the defined purposes. In Ukraine the monitors are distributed as follows:

- Zhitomir - Regional Red Cross Committee
- Kiev - Regional Red Cross Committee
- Kiev - Republican Scientific Hygienical Centre

Three technical assistants from Chernigov, Kiev and Zhitomir Region were trained and at the present time the monitors are in use in Vischgorod district (Kiev Region), Luginy District (Zhitomir Region) and Chernigov Region.

Since the date of delivery 255 measurements were carried out in 41 settlements. These measurements included samples of water, milk, meat, vegetables, fruits, berries and mushrooms.
In 31 cases a non-acceptable excess of 137 Cs were monitored in milk samples from Luginy District. The appropriate farmers have been informed as well as the municipal authorities and sanitary services.

These results back the overall assessment of scientists that nearly 80 percent of contamination is caused by milk and milk products. Furthermore it shows that the monitors are properly used.

The League believes that it is the right moment to increase the number of available Food Monitors to be used in the affected areas. Therefore, and in accordance with the Alliance, it is recommended to provide the Soviet Red Cross with 20 more food monitors.

3.4 Information/Health Education

All Republican, regional and district Red Cross Committees have been disseminating information related to the situation in the affected areas and on measures required to cope with them. These efforts will be supported through the public use and demonstration of radiation measurement equipment by Red Cross personnel.

The Red Cross Committees concerned will be assisted in acquiring efficient printing equipment which should allow the production of leaflets, brochures and perhaps some kind of a newspaper.

The League Delegation is working on the development of the approaches which would be most suitable for the Red Cross in dealing with one of the most important consequences of the Chernobyl Nuclear Power Plant accident - namely its psychological effects.

3.5 Other forms of assistance

According to the recommendations of the international experts, the League has undertaken to supply vitamins and minerals for distribution through the children's institutions (hospitals, polyclinics, schools, kindergartens, etc.) in the affected areas.

On the request of a private donor (Mr N. Mikhalkov, Soviet film director), the League purchased and assisted in distribution of 300,000 disposable syringes and needles in the children hospitals situated in the affected areas of Byelorussia, Russian Federation and Ukraine.

4. CONTRIBUTIONS/PLEDGES

Please see attached annex.

5. OUTSTANDING NEEDS

The League and the Soviet Red Cross consider that the support provided by the participating National Societies in response to the Appeal Update of 18.03.1991 has generally covered the needs in terms of the equipment required to back up the programme.
At the same time the League expresses concern that modest cash contributions made available for the support of this programme do limit its ability to continuously involve international experts and other resources in the planning, implementation and monitoring of the programme.

Therefore, the League still seeks CHF 110,000 in order to ensure continuity in the League support of this programme through 1992, specifically in the field of health education/information and the psychological effects of the Nuclear Disaster.

Evgeni Parfenov
Acting Head
Europe Department
## APPEAL No. 18/90

### CONTRIBUTIONS RECEIVED

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## KIND AND SERVICES

Radiation meters, food monitoring units, printing equipment were requested in the appeal.

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## Financial situation as on 15.09.1991

### Income

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### Expenditures

- **a) Relief supplies and non-capital equipment**
  - Disposable syringes and needles, 350,000 pieces
  - Radiation meters, 202 units
  - Food monitoring units, 10 units
  
    - Total: 250,388

- **b) Transport and storage**
  
    - Total: 32,020

- **c) Capital expenditure**
  
    - Total: 4,123

- **d) Personnel**
  
    - Total: 17,595

- **e) Communications**
  
    - Total: 20,517

- **f) Information**
  
    - Total: 15,193

- **g) Administrative expenses**

    - Total: 1,539

- **h) Commitments resulting from earmarked funds**

    - Total: 160,000

### Total estimated expenditures

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### Balance

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