

FÉDÉRATION INTERNATIONALE DES SOCIÉTÉS DE LA CROIX-ROUGE ET DU CROISSANT-ROUGE INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES FEDERACIÓN INTERNACIONAL DE SOCIEDADES DE LA CRUZ ROJA Y DE LA MEDIA LUNA ROJA الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

SITUATION REPORT NO.02 Appeal Ref. No. 50/92 January 25, 1994

CHERNOBYL HUMANITARIAN ASSISTANCE AND REHABILITATION PROGRAMME

1. SUMMARY

The number of people affected by the consequences of Chernobyl Nuclear Power Plant accident is increasing and there is continuing deterioration of the health status of the population living on the territories affected by radioactive contamination.

Considerable growth of thyroid diseases (hyperplasia, cancer, etc.) is observed. Before Chernobyl, thyroid gland cancer among children was almost non-existent, after the accident, in Gomel region (Belarus) in 1988 one case was registered, in 1990 - 13, 1992 - 46 and in 1993 - 63.

The consequences of Chernobyl accident in the nearest and far future are still largely unknown. So far, only very obvious growth of oncological diseases has been noted including blood diseases. But it is clear that the body's immune system also suffers and the number of mental aberrations is on the increase.

The most appropriate solution in the present situation is annual prophylactic screening of the population, aiming at early diagnosis of diseases, prevention and mitigation.

From its outset, the Red Cross Chernobyl Humanitarian Assistance and Rehabilitation Programme has concentrated on community screening of the population. More than 200,000 people living in the contaminated areas received objective independent information on their health status, and on radioactive contamination of the environment and foodstuffs. Out of 60,000 people examined in the Mobile Diagnostic Laboratories of Red Cross (MDLRC), 10,000 have been directed to specialized hospitals for treatment.

Specialists of the Ministries of Health of Belarus, Russia and Ukraine, and experts of the International Federation of Red Cross and Red Crescent Societies (Federation), participating in

the International Workshop on Chernobyl Problems (23-25 November 1993, Kiev, Ukraine), came to the conclusion that the Programme was effective and timely.

The Chernobyl Humanitarian Assistance and Rehabilitation Programme is carried out by the Belarus, Russian and Ukrainian Red Cross National Societies, with technical assistance from the Federation, according to the initial Plan of Action presented in the Federation's Appeal (June 1990). It is aimed at screening the population, lowering of psychological stress by means of dosimetric environmental control and food monitoring, formation of "risk groups" and control of their health status.

2. BACKGROUND

Establishment of a reliable system to collect and process the information on the territories of three countries (Belarus, Russian, Ukraine) has been the main result of the work in 1993. Difficulties related to differences in the national health legislation of the three countries were finally overcome. Cooperation with governmental and international organizations participating in the alleviation of the consequences of the Chernobyl accident has been improved. Meetings of the Chernobyl Coordination Committee were regular during 1993. Its decisions are implemented by the Working Group, which consists of representatives of the three National Red Cross Societies and the Federation Delegation in Kiev.

The possibility of using experience gained by the Red Cross within the Chernobyl programme in similar situations has been tested through the Chelyabinsk project (Russian Federation). In June 1993, upon the request of the Russian Red Cross, one MDLRC carried out screening of the population living in the areas affected by an accident at the scientific-industrial association "MAYAK" in 1957. During one month of activity, 1,251 persons were screened and among 1,005 of them, a variety of pathologies have been revealed. At the same time the Federation cannot confirm that all these pathologies directly relate to the nuclear accident.

In September 1993, the MDLRC were equipped with ultra-sound devices which allows diagnosis of thyroid diseases in the early stages. Funding was provided by the Netherlands Red Cross and OXFAM. This has considerably improved the diagnostic possibilities of the MDL RC.

The MDLRC of Gomel region (Belarus) detected 2 cases of thyroid gland cancer among children, who were later successfully operated on .

In May, 1993, in Geneva, WHO together with the Ministries of Health of Belarus, Russia and Ukraine, held a meeting on coordination of the international programmes on the alleviation of the consequences of Chernobyl accident. Representatives of the Federation also participated in this meeting. A system of interaction between different projects has been worked out.

In October, 1993, in Korosten (Ukraine), the "Sasakawa Fund" (Japan), together with Ministries of Health of Belarus, Russia and Ukraine, held a similar meeting, in which representatives of the Federation also participated.

On 23-25 November, 1993, the International Workshop on Chernobyl Problems was held in Kiev. 150 representatives of 13 National Red Cross Societies, government ministries and

departments of Belarus, Russia and Ukraine, participated in the Workshop. The results of two and a half years of activities and recommendations for further development of the Programme were discussed during the Workshop. The key conclusion was that in 1994 the Red Cross should focus mainly on community screening to provide the affected population with reliable and understandable information on radiation levels and their effects on personal health.

3. RED CROSS ACTION

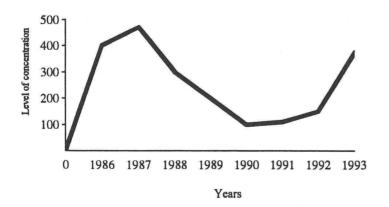
Six Mobile Diagnostic Laboratories of Red Cross, 32 radiometric Red Cross stations for the control of radionuclides concentration in food and 360 dosimetric Red Cross stations for gamma-radiation control continued to be operational on a daily basis.

More than 300 persons are examined in the six MDLRC every day and receive recommendations from specialists and, if necessary, are directed to specialized hospitals for further examination and treatment. Dosimetric Red Cross stations carried out 400,772 measurements of gamma-radiation in 149 localities. The range of registered levels has been the following:

	Belarus	from 0.05 to 2.7 mkZv/hr
-	Russia	from 0.05 to 2.7 mkZv/hr
-	Ukraine	from 0.07 to 3.11 mkZv/hr

In 1994, the future use of dosimetric control stations is to be discussed. It is recommended that dosimeters already available in the National Red Cross Societies should be redistributed to extend monitoring to the areas around other nuclear power plants as a security measure for potentially vulnerable populations.

The main path for radioactive substances' penetration into the human body is still through food which contains high concentrations of radionuclides. Therefore, a continuing aim is to limit use of contaminated foodstuff. However, because of the deep economic crisis in the countries of the former Soviet Union, in recent years the population has had little or no possibility to get non-contaminated food from other regions. This is reflected in the accompanying graph which illustrates the steady recent rise in radioactive concentrations in the human body.



Federation experts and specialists confirm that the number of food monitors should be increased and concentrated in the most contaminated areas of the disaster zone.

In Annex 1, the results of food monitoring are presented.

4. CONTRIBUTIONS

Please refer to Annex 2.

5. CONCLUSION

In spite of the continuous organizational problems related mainly to the fact that the programme is being implemented in three independent States, it proved to be appreciated by the affected population and the health administration of the countries concerned. The programme has been filling the gap which could not be covered by the public health authorities due to difficult economic situation, lack of funding and other means required for the mass screening of the affected population. According to the recommendations of the participants in the International Red Cross Workshop in Kiev (November 1994), it has been decided to extend the programme for another two years.

Evgeni Parfenov Programme Officer

Europe Department

Ilkka Uusitalo

Head

Europe Department

APPEAL No. 50/92

CONTRIBUTIONS RECEIVED

25/01/94

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT

CASH

REQUESTED IN APPEAL	CASH			880 000		
						1
AUSTRALIA RC	75			147	26/11/92	
CANADA RC				14 344		
FINLAND RC		100 000	FIM	25 250	22/12/93	
ICELAND RC		100 000	ISK	2 331	15/10/92	
JAPAN RC		2 800 000	JPY	32 046	18/11/92	
GERMANY RC		10 000	DEM	8 935	29/10/92	No. 1880 X
GERMANY RC				4 288	08/03/93	
GREAT BRITAIN RC		15 000	GBP	33 000	05/02/93	
NETHERLANDS RC				80 000	05/11/92	6 SCANNERS
OXFAM		50 000	GBP	110 500	28/02/93	
SUB/TOTAL RECEIVED IN CASH				310 842		

KIND AND SERVICES

SUB/TOTAL RECEIVED		150 000	
GERMANY RC	DELEGATE 1 YEAR	150 000	29/10/92

DATA OF FOOD MONITORS USED BY RED CROSS ACTIVISTS

BELARUS

FOODSTUFFS	No. of. samples	Above temporary acceptable level	%	Activity, Bq/l, kg min	max
1. Milk and milk products	2384	386	16,2	52	3700
2. Meat and meat products	3593	281	7,8	78	1317
3. Potatoes and root crops	1028	17	1,6	93	819
4. Mushrooms (fresh)	610	24	3,9	156	19000
5. Mushrooms (dried)	431	25	5,8	48	31000
6. Wood berries	189	8,0	4,2	150	9760

RUSSIA

FOODSTUFFS	No. of. samples	Above temporary acceptable level		Activity, Bq/l, kg min	max
1. Milk and milk products	2431	59	2,4	29	1431
2. Meat and meat products	1305	18	1,4	47	985
3. Potatoes and root crops	486	5	1,0	84	724
4. Mushrooms (fresh)	81	7	8,6	92	97000
5. Mushrooms (dried)	62	5	8,1	63	159000
6. Wood berries	213	3	1,4	100	10816

UKRAINE

FOODSTUFFS	No. of. samples	Above temporary acceptable level		Activity, Bq/l, kg min	max
1. Milk and milk products	801	186	23,2	36	3402
2. Meat and meat products	53	13	24,5	41	1707
3. Potatoes and root crops	387	18	4,6	86	753
4. Mushrooms (fresh)	17	5	29,4	69	40000
5. Mushrooms (dried)	75	73	97,3	127	65000
6. Wood berries	129	76	58,9	275	8517