

FINAL NARRATIVE REPORT FOR ECHO/TPS/215/1998/02002

Medical assistance to populations living in the areas most affected by the Chernobyl accident in Belarus, Ukraine and Russian Federation

I. GENERAL INFORMATION

1. Humanitarian organisation's partner

International Federation of the Red Cross and Red Crescent Societies

2. Operation contract number

ECHO/TPS/215/1998/02002

3. Title of operation

Medical assistance to populations living in the areas most affected by the Chernobyl accident (annually approx. 90,000 persons) in Belarus, Ukraine and Russian Federation. In addition psycho social support and medicaments/multivitamins are provided.

4. Location of operation

Radioactivity contaminated areas in Belarus, Ukraine and Russian Federation following the accident of 26th April 1986 at the Chernobyl Nuclear Power Plant.

II. NARRATIVE REPORT

5. Objectives of operation

ECHO approved a budget of ECU 338,000 to the Chernobyl Humanitarian Assistance and Rehabilitation Programme to provide health screening, material aid and psychological support to the people affected by the disaster. The programme focuses on high risk groups such as children and those who were children at the period of the accident as well as those who are still living in highly contaminated areas. The contract covered the period from the 26 June 1998 to 25 December 1998.

The approved budget lines included material assistance in the form of salary costs for personnel, staff training and running costs, supply of multivitamins and levothyroxine drugs.

6. Implementation of operation

6.1. General explanation

6.1a. Chernobyl disaster

In April 1986 the forth reactor of the Chernobyl Nuclear Power Plant (CNPP) in Ukraine exploded producing a disaster which is so far the largest one of this kind in the history of mankind. The radionuclides were spread around the world, while radioactivity contamination in Belarus, Ukraine and Russian Federation occupies the area three times bigger the territory of Denmark. It is estimated that over 4 million people were affected. About 400,000 people have been resettled since then. The rest, including 1,000,000 children, continue living on radiation polluted land.

As a result of the explosion a significant amount of different radioactive substances were released. However, the following two of them account for most environmental contamination and exposure doses in the population:

Iodine¹³¹ A short lived isotope (half life is eight days) which accumulates in the thyroid gland. It was produced by the exploded reactor and released into atmosphere for about ten days. Being eventually inhaled by the exposed populations, the Iodine¹³¹ caused a dramatic increase in the number of cancers

of the thyroid gland. It had a particularly harmful effect among children exposed at the time of the accident.

Caesium¹³⁷ With a half life of 30 years Caesium¹³⁷ will take up to 300 years to disappear from the environment through natural decay. It enters the food chain (milk, mushrooms, berries, wild animals, etc.) and when consumed by humans competes with potassium, an important ion. Caesium is proved to be related to internal irradiation but so far the effects of the irradiation have not yet revealed themselves through a notable increase of a certain pathology.

The other radio nuclides **Stroncium⁹⁰** and **Plutonium²³⁹** are mostly concentrated around the nuclear plant itself within the so called "30 km forbidden zone" which actually occupies larger areas. The radiotoxicity in this area is very high and the zone was quickly evacuated after the disaster. Therefore, this exclusion zone is strictly forbidden. However, thousands of people enter the zone daily (farmers, plant workers, visitors...). This zone will be contaminated for the next one hundred thousand years.

For more information see also materials of the First International Seminar "Radiation and Thyroid Cancer", held in Cambridge University, UK, on 19-23 July 1998.

Nearly thirteen years later, hundreds of thousands civilian population over three countries are still affected by the consequences of the Chernobyl disaster. A thorough review of health impact of the disaster is yet to be established.

6.1b. Red Cross Action 1990-1998

The Red Cross assistance to the affected and vulnerable population started since the beginning through the National Societies (NSs) of the three affected republics Belarus, Ukraine, Russia.

In 1990 the International Federation launched the Chernobyl Humanitarian Assistance and Rehabilitation Programme (CHARP) of the Red Cross, first concentrating on screening of foodstuff and the environment through radiometric testing. From 1992 six Mobile Diagnostic Laboratories (MDL's), based in six mostly affected regions, screened background radiation and in addition gave medical examinations to adults and children living in remote areas, distributed health information to the population on security measures in radioactive contamination.

In 1996, a new Plan of Action was drafted following two successful evaluations (by European Community Humanitarian Office (ECHO) and the International Federation) and following this the International Chernobyl Workshop was held in the contaminated town of Gomel, Belarus. As a result, the CHARP underwent certain modifications to adapt to the realities in polluted areas. In connection with the fact that the radiation situation in the contaminated areas became stable and studied, the dosimetrical part was minimised. (The tests of gamma ray measurement, monitoring of foodstuff and surface contamination are performed upon request of population).

Furthermore, the programme was adjusted to meet emerging needs of expanding the medical screening of the thyroid gland cancer and other pathologies. The target number of assisted population increased from 60,000 to 90,000 focusing particularly on children and people who were children at the moment of the accident.

A discovery during the early stages of the pathologies and particularly of thyroid cancer is extremely important because it allows to provide appropriate treatment in good time and save lives.

The above mentioned evaluations identified high level of diffuse anxiety that may be the cause for a high number of affected cases. Therefore, a new element of the revised CHARP was introduced -

psycho-social support programme (PSS) and initiated in Belarus in 1997. The PSS aims at assisting the population living in contaminated territories to overcome stress and anxiety related to radiation. Psycho-social support tools including simple, reliable and easily understandable information should help the community to cope with disastrous situations.

In addition to medical screening and psycho-social support the Red Cross Chernobyl Programme distributes milk powder and vitamins among children living in the area contaminated by radiation.

The supplies of vitamins and milk powder are of particular importance since they have a considerable influence on the immune system, organs connected with blood formation and other systems weakened by radiation. At the same time restrictions in consumption of local milk, berries and mushrooms have resulted in reducing the intake of traditional nutrition as well as prompting vitamin deficiency, especially in children.

In 1998, vitamins complemented with stable iodine and vitally important micro-elements such as calcium, zinc, copper and potassium were distributed to the same target groups. Primary attention is paid to children suffering from diseases of blood and blood forming organs involving the immune mechanisms, diseases of the endocrine system, digestive and respiratory organs.

During 1990 - 1998, CHARP provided humanitarian assistance to more than 2,000,000 beneficiaries (Annex 1).

For eight years, CHARP specialists have accumulated significant practical expertise on the health consequences of Chernobyl. They obtained wide experience in providing qualitative, efficient and cost-effective services to the most vulnerable populations in the affected areas.

6.1c. ECHO and CHARP

Since 1994 CHARP has been supported by ECHO, which is the main donor of the programme. ECHO's funding for the six MDLs running costs, milk powder, multivitamins, medicaments etc. is the basement of the programme. The financial support, regularly provided from ECHO during the last five years formed the contents of the programme and stabilised the administrative structure, diminished the fluctuation in the supply of trained personnel and improved their professional skill. This, along with regular provisions of all necessary reagents and sophisticated equipment, provided high quality of services when medical examinations were conducted.

With ECHO's funding during the last years Red Cross distributed 150 tons milk powder and 110 million multivitamin tablets to children, living in the contaminated areas. In 1998 CHARP supplied 14,471,000 tabs of levothyroxine for the people with the thyroid gland cancer and other pathologies. This medication was highly appreciated by the medical authorities and patients as it is not produced by local pharmaceutical industry.

With the assistance from ECHO the MDLs in 1994 started medical screening of the population, affected by the Chernobyl disaster. Since then the MDLs personnel have screened more than 320,000 people.

6.1d. Management structure

The programme is supervised and co-ordinated by the International Chernobyl Co-ordination Committee (ICCC), composed of the Presidents of the three Red Cross National Societies (Belarus, Ukraine and Russia) and the Head of the International Federation's Delegation in Minsk.

Each NS has a CHARP counterpart at the National Head Office. Together with three local managers of the International Federation's Delegation they form the Working Group (WG), chaired by the Head of the International Federation's Delegation. The WG provides current evaluation of the implementation of the programme and elaborates documents for the ICCC.

The day to day management of the programme at regional level is carried out by the Chairpersons of Regional Red Cross Committees where the MDL's are based in conjunction with local authorities and specialised medical dispensaries.

In accordance with the Plan of Action in June 1997 six new Mobile Diagnostic Laboratories (MDLs) were delivered to replace the old ones functioning since 1992 and to facilitate the increase in examinations. Three new MDLs operate now in Belarus (Brest, Gomel, Mogilev Oblasts), two in Ukraine (Rovno and Zhitomir Oblasts) and one in Russian Federation (Bryansk Oblast).

In the PSS, the visiting nurses and RC staff are the basic messengers. The MDL doctors partially provide the population with psychological support. Trained at workshops, volunteers mostly from pedagogical and medical institutions, are involved in psychological support activity.

6.2. Implementation timetable

This contract covered the period of six months from the 26 June 1998 to 25 December 1998. During this period the MDLs worked in the field providing each month about 15,000 medical examinations with the exception of periods during summer time when the personnel take vacation. It was also planned to supply within the operation contract multivitamins to be distributed to 32,000 children and Levothyroxine drugs for about 12,000 people with thyroid gland pathologies.

6.3. Difficulties encountered in implementation

In the course of implementation of the present contract not many difficulties have been encountered. However some were noted. One of the problems was providing customs clearance, especially in Russian Federation. For instance Levothyroxine is a drug which is extremely needed by the people with the thyroid gland pathologies. Patients who underwent a surgery operation for the thyroid cancer need to take this hormone a lifetime. However as this medicament is not registered in Russia it took a lot of time and efforts to collect required documents to clear the goods of customs.

The consignment of multivitamins for Ukraine did not come to Kiev safely. It was damaged during transportation and the gross weight was 106 kg less than indicated in the shipment documents (1,677 kg gross). The short-landed quantity of multivitamins was 448 pieces.

6.4. Changes to contract of an operational nature

There were no changes to the contract of an operational nature.

6.5. Objectives achieved compared with initial objectives.

6.5a. Medical Screening

The medical screening includes ultrasound screening, therapy and endocrinology check-ups, blood and urine analysis. This screening is provided by the team of an MDL, composed of seven people:

- Head of the team/Ultrasound Doctor (or other Doctor)
- Doctor-Endocrinologist
- Doctor-Therapy
- 2 Technicians
- PC operator
- Driver

The team uses medical equipment such as ultrasound scanner, blood and urine analysers, which is carried during trips to the field in a minibus in special cases. The technical composition of the MDL is described in the Section 12 of this report. When an MDL arrives to a settlement, the team installs the equipment in an appropriate premises such as schools, kindergartens, village dispensaries etc.

The medical examination begins from registration by the PC operator, who enters the patient's personal data into the computer notebook and into the medical card. The Endocrinologist completes the examination and prescribes if necessary a referral for further examination or treatment (see Annex 2).

The target figure for each MDL is to screen 1,250 people per month. That is 15,000 examinations for six MDLs per month, or 45,000 examinations for six months.

During the period under consideration 42,055 persons, including 16,418 adults and 25,637 children were examined by means of ultrasound screening, provided by personnel of RC MDLs. The total number of examinations for the second half of 1998 is higher than for the same period of the year 1997, when the MDLs staff had checked only 26,405 people. However, it less than the target figure for six months (45,000 patients) which can be explained taking into account vacation periods taken during the summer months of July and August.

The results of the screening in aspects of each Region involved in CHARP, the number and the percentage of sick people, detected by MDLs specialists, can be seen in the following table No. 1:

Table No. 1

MDI	Number of examined	Including			Including		
		Adults	Sick	%	Children	Sick	%
BREST	6,881	4,101	2,132	52	2,780	1,974	71
GOMEL	7,229	2,358	1,333	56.5	4,871	3,075	63.1
MOGILEV	7,614	4,065	3,569	87.8	3,549	3,111	87.6
BRYANSK	5,368	2,059	1,891	91.8	3,309	2,948	89.1
ZHITOMIR	7,721	2,304	2,050	88.9	5,417	3,130	57.8
ROVNO	7,242	1,531	1,036	67.6	5,711	3,146	55.1
TOTAL	42,055	16,418	12,011	73.2	25,637	18,183	70.9

The above table reflects a total number of examined people and detected sick persons (adults and children) for the period under consideration.

The percentage of detected persons among adults is ranges from 52.0% (Brest) to 91.8% (Zhitomir).

The percentage of detected sick persons among children ranges from 55.1% (Zhitomor) to 89.1% (Bryansk).

In the aspects of the RC MDLs the detected general somatic pathology is broken down in absolute figures and per 1,000 examined in the following way:

Brest RC MDL

	<u>adults</u>	<u>children</u>
1. Diseases of endocrine system	1,345 (327.9)	972 (349.6)
2. Diseases of digestive system	-	839 (301,8)
3. Diseases of blood circulation system	-	672(241,7)

Gomel RC MDL

1. Diseases of endocrine system	454 (192.5)	691(141.8)
2. Diseases of blood circulation organs	327 (138.6)	-
3. Diseases of digestive organs	-	806 (165.6)
4. Diseases of respiratory organs	-	670 (137.5)

Mogilev RC MDL

1. Diseases of blood circulation system	2,180 (536.3)	-
2. Diseases of digestive system	2,147 (528.2)	1,598 (450.3)
3. Diseases of endocrine system	1,583 (389.4)	-
4. Diseases of respiratory system	1,165 (328.3)	-

Bryansk RC MDL

1. Diseases of endocrine system	912 (442.9)	1,875 (566.6)
2. Diseases of digestive organs	-	868 (262.3)
3. Diseases of respiratory system	-	751 (226.9)

Zhitomir RC MDL

1. Diseases of endocrine system	903 (391.9)	2392 (441.6)
2. Diseases of blood circulation organs	471 (204.2)	-
3. Diseases of respiratory organs	-	1,080 (199.4)
4. Disease of musculo-skeletal system	-	1,316 (242.9)

Rovno RC MDL

1. Diseases of digestive organs	392 (256.0)	-
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The ultrasound screening conducted by RC MDLs reveals that there is still high incidence of different kinds of the thyroid gland pathologies. Table No.2 (below) indicates the number of the detected pathologies during the second half year and for the whole year of 1998.

Table no. 2

	Diseases	Adults		Children	
		1.07 -31.12.98	1998	1.07 -31.12.98	1998
1	Developmental anomalies	58	119	78	136
2	Hypothyrosis	145	193	13	13
3	Thyrotoxicosis	131	154	6	7
4	Thyroiditis	458	1,222	96	158
5	Nontoxic diffuse goitre	2,513	4,742	7,671	13,500
6	Nontoxic diffuse & nodular goitre	429	943	64	208
7	Nontoxic nodular goitre	1,005	2,627	97	270
8	Thyroid gland cancer	31	47	9	17

It can be seen from this table that during the period under consideration the percentage of the detected pathologies to the total number for the whole year is 37.5% (thyroiditis) and 85.1% (thyrotoxicosis) among adults. Among children the rate is 30.8% (nontoxic diffuse-nodular goitre) and 60.6% (thyroiditis).

The percentage of newly detected cases of thyroid gland cancer for the period under consideration is 65.9% among adults and 52.9% among children.

It is also relevant to note that at the present time there is a decrease in the number of cases of the thyroid gland cancer among children. The peak of the incidence of this disease among children was remarked in 1996. However, this can be explained by the fact that as the time passes the population from the children group has transferred to the group of adults. Subsequently, there is an increase of the thyroid gland cases among young "adults".

6.5b. Psycho-social support (PSS)

The aim of psycho social support is to alleviate psychological suffering resulting from the Chernobyl catastrophe and aggravated by the local socio-economic deterioration. The main objectives of the project are to disseminate information on radioactivity and its health consequences via Red Cross personnel in order to provide the population, affected by the disaster, with psychological support.

Training RC staff and volunteers

In the most cases direct psychological assistance materialises during contacts between a client and a helper. In order to get a positive effect the helper must be able to use special psychological tools.

Therefore, it is extremely important to raise skills of RC staff and volunteers who are involved in the programme of psychological support. With that purpose during the period concerned different kinds of training workshops were held. The strategy was to train a group of core trainers at the Training of Trainers workshops, which was called the first wave of PSS dissemination. Then the trainers would train their colleagues and volunteers at the second wave = one-day workshops. This provided the start

of psychological support service to the affected people. The follow-up-workshops were intended to improve and develop skills on psychological support and teaching of the trainers. At these workshops professional psychologists, experts in PSS delivered lectures and gave RC trainers advice in education and counselling. The training also took the form of case studies and exercises. Normally, the participants were provided with handouts for further learning. In total 37 second wave workshops on PSS were held by the RC trainers from July to December 1998.

The PSS trainers were also trained at the follow-up-workshops. The main subject of the 5 days follow-up-workshop in Minsk oblast was stress management. The Belarus RC trainers had already received extensive practice on self-stress management and tried personal one-day training courses on the subject. The follow up workshop in Brest was devoted to psychological counselling of RC medico-social centres visitors.

In November 1998 the PSS programme was extended to Ukraine with a ToT workshop in Zhitomir. At that first PSS workshop, 16 Ukrainian RC staff were trained on psycho social support. The purpose of the workshop was to give information and to provide the participants with some practical training course education in order to strengthen the Red Cross staff's ability in problem solving and crisis intervention, using simple and reliable psychological tools. The newly trained trainers drafted their plans for 1999 to transfer the obtained skills to their colleagues and volunteers, working in the radiation contaminated areas. Dissemination of PSS in Ukrainian Regions was planned to be started from the beginning of 1999. The number of Red Cross staff and volunteers, who were trained on psychological support at different level workshops, is shown in the following table no 3.

Table no. 3

Type of workshop	Brest Region	Gomel Region	Mogilev Region	Minsk	Chernigov Region	Kiev Region	Rovno Region	Volyn Region	Zhitomir Region	Total
Training of Trainers	0	0	0	0	2	2		2	6	16
Follow up	11	9	12	3	0	0	4	0	0	35
One-day Second wave	122	129	171	75	0	0	0	0	0	496
Total	133	138	183	78	2	2	4	2	6	548

Psychological assistance to the affected people

a) Informing population

The information, given to the population, covered the following areas. The affected people should know the risk factors and how this or that degree and character of the symptoms correlate with the level of radiation and stress. It is expected that the information should reduce anxiety, caused by the lack of the knowledge, and prevent or reduce manifestation of psychosomatic symptoms or/and psychological suffering.

The trained at PSS workshops RC staff provided the affected population with information on the consequences of the Chernobyl catastrophe, methods of coping with stress and how to reduce the risk of radiation. Mainly it was done by reading lectures. Newspapers articles, radio and TV broadcasts were also used.

Table no. 4

PSS educational/informational activity

	Brest Region	Gomel Region	Mogilev Region	Minsk Region	Total
Lectures	12	7	28	4	51
Interview on TV	0	3	2	0	4
Radio Interview	0	0	1	0	2
Newspaper articles	0	0	1	0	1

b) Direct psychological support

Direct psychological support was provided by RC local staff and volunteers at medico-social centres, sites, where the MDLs are working, and at people's homes. It was aimed to restore inner resources in persons to rehabilitate their ability to control their own lives. During meetings with people RC staff and volunteers encourage clients to express their emotions, share with thoughts, and make decisions in order to solve their problems. Such a counselling process includes cognitive reinterpretation, "stress ventilation" and correction of inadequate coping mechanism. Psychological support leads to lowering of the stress level and radiation related anxiety. This support was given firstly to the people with severe emotional disturbances caused by a crisis situation (heavy disease, like thyroid gland cancer etc.).

Acting in such a way the trained RC staff assuaged psychological suffering and prevented psychosomatic symptoms in the affected people. In total 2,978 persons received got direct psychological support in three contaminated oblasts of Belarus and in Minsk city, where resettled people live. The number of people, who received psychological assistance in July - December 1999, is shown in the following table.

Table No. 5

RC-sff	Brest Region	Gomel Region	Mogilev Region	Minsk Region	Total
Group support	313	298	720	79	1,410
Individual support	263	370	528	407	1,568
	576	668	1,248	486	2,978

Besides, relief workers the MDL staff members, most of whom are also vulnerable to stress, were counselled to coping with stress and prevent professional burnout. These counselling sessions were held in form of psychological debriefing in the field.

6.5c. Supply of multivitamins and levothyroxin

The present contract included the needed (see 6.3.) supply of multivitamins and levothyroxin. The quotes and orders for these goods were placed by the Logistics Service in the Federation Headquarters. As in previous years to avoid customs problems in transporting humanitarian goods across the borders the whole consignment was divided into separate portions to be delivered by air through Kiev, Minsk and Moscow. The goods arrived in the following quantities:

	Minsk	Kiev	Moscow
Levothyroxine sodium, 0.1mg, 1000 tabs	5,994	3,596	-
Multivitamins 100 tabs	17,301	9,932*	6,921

* The consignment of multitabs for Ukraine arrived short-landed (see 6.3)

Levothyroxine to Bryansk (2,398 pieces x 1,000 tabs) was delivered in transit through Minsk.

The receipt and customs clearance of the above goods were undertaken by the Federation Delegation in Minsk, by the Ukrainian Red Cross in Kiev and by the Russian RC in Moscow and Bryansk. The distribution/delivery of the goods to destinations was arranged by the CHARP team. This work was completed in January-February 1999.

7. Recipients: characteristics, number of recipients reached and participation in the operation.

As it was mentioned above, during the period from 26.06.98 to 25.12.98 the Red Cross MDL's personnel have examined 42,055 people, mainly in remote areas. Special attention was paid to ultrasound examinations of children and persons, who were children at the moment of the disaster. This group of people is most vulnerable in terms of the thyroid gland pathology. Iodine accumulated in the thyroid gland of children just after the disaster in 1986 destroyed cells, gradually continued growing in their bodies and developed easily into thyroid cancer or other pathologies.

According to the data, collected by the MDLs, mostly people in remote and radiation polluted areas were checked for the first time since the Chernobyl accident because the capacities of governmental services are critically limited nowadays. For instance in Ukraine and Russia, the Red Cross MDLs are the only mobile laboratories which are operating in the rural areas.

The distribution of multivitamins to 35,000 children in the areas, affected by the Chernobyl disaster, was provided by the Regional and local Red Cross Committees mainly through children institutions. The actual consumption of the multivitamins is provided during February-April 1999, the months of the highest vitamin deficiency (rich foodstuff is very expensive at such time).

Levothyroxin was delivered mainly to the Regional Red Cross Committees which forwarded it to the Health Care System Institutions. On request of Academician E.P.Demidchik in Belarus 200 pieces of these drugs were handed over to the Republican Centre of the Thyroid Oncopathologies.

It is expected that about 12,000 people will be provided with the Levothyroxine.

In total in order to summarise the assistance provided, including psycho-social support, approx.. 90,000 beneficiaries were covered with humanitarian aid during the period of this contract.

8. Monitoring

Monitoring was provided by the CHARP team and RC workers on the places. The MDL's activity was constantly checked in the field by the Medical Co-ordinator of the Programme. While visiting MDLs

and Regional RC Committees he also checked usage of reagents and consumables. The PSS Co-ordinator undertook counselling of MDL's staff.

The distribution of multivitamins and drugs is always under control of the CHARP team and local RC workers.

9. Link with rehabilitation and development activities

The rehabilitation and development activities occupy an important place in the implementation of the Programme. For this purpose the International Federation Delegation in Minsk maintains close connections with the Ministries of Health and Ministries of Emergencies (or corresponding ministries) in each country. The Ministries of Health co-ordinate the work of the dispensaries with whom the staff and work of MDLs have been organised.

In 1997-1998 Memorandums of Understanding were established between National Societies (Belarus, Ukraine, Russia), the Ministries of Health and Minsk Delegation of the Federation providing an appropriate legal base and clearly defining roles of all parties involved into the programme. In addition, agreements regulating patients care exist between Red Cross Regional Committees, Regional medical institutions (partners) and the Minsk Delegation.

Medical screening allowed to detect early and concealed forms of somatic and thyroid pathology. In case a disease is detected one is referred for further examination and treatment is available in health care system. The characteristics of referrals are indicated in the below shown table.

Table No. 6

Refferals	Brest		Gomel		Mogilev		Bryansk		Zhitomir		Rovno	
	Adult	Child.	Adult	Ch.	Ad.	Ch.	Ad.	Ch.	Ad.	Ch.	Ad.	Ch.
Consultations by District Specialists	1,223	936	151	674	1,012	812	172	185	122	210	350	1,187
Consultations by Region Specialists	9	55	0	0	402	241	94	162	190	79	138	85
Ambulatory Treatment	727	858	244	1,050	1,335	724	245	210	225	274	509	1,694
Treatment in District Hospitals	8	7	4	15	55	22	58	0	45	116	19	19
Treatment in Region Hospitals	2	3	0	0	6	1	0	0	31	35	20	12
Specialised Dispensaries	111	24	42	31	61	14	0	0	4	5	4	396
Referred for hormone exam-ns	250	36	92	19	174	18	95	227	26	57	0	0
Thyroid Cancer Confirmed	15	12	6	0	16	0	3	0	0	0	7	5

The CHARP personnel has worked out a feedback system. It means that all persons referred for further examination or treatment to the specialised institutions of Regional or Republican Centres (for hormone analysing, cytology etc.) are entered into special registers and final diagnosis results are sent back to the Regional RC Committees, oncology and endocrinology dispensaries.

This system functions well in Belarus where all data for the thyroid gland pathology is concentrated in the Republican Centre of the Thyroid Gland Oncopathology (Academician E.P.Demidchik). In this centre, there is a possibility to keep track of all patients referred for further examination.

10. Where appropriate, evaluation (state measures taken pursuant to Article 29 of the General Conditions).

The Evaluation is expected to be carried out together with ECHO in April 1999.

11. State of measures taken under Article 30 of the General Conditions concerning visibility

The International Federation undertook appropriate measures concerning visibility of the project. The important role of European Union and its long-term support was always emphasised as an invaluable, which greatly contributed to achieve high quality services, rendered by the programme. Numerous interviews were given about CHARP and the involvement of ECHO to different media: TV, radio, local newspapers. The International Federation's Minsk Delegation also produced two quarterly issues of a newsletter, distributed to the International missions, local governments and non-governmental organisations. The role of ECHO in the implementation of the Programme is duly described in both issues.

All consignments carried the emblem of the main programme donor ECHO. The workshops, held for of psycho-social support programme in Gomel, Brest and Zhitomir, were covered by the Belarus and Ukrainian local TV Programme, radio as well as local regional media. The names and emblems of the Red Cross and ECHO were present in the TV/radio programmes. In press-releases and interviews to newspapers and radio journalists the contribution from ECHO was publicised.

An Internet site construction, started recently, also contains information on CHARP services, and reflects upon the ECHO's contribution in coping with the nuclear disaster consequences.

12. Stocks of equipment (state actual destination of stock and equipment pursuant to Article 20(6) of the General Conditions).

CHARP is well provided with adequate and sufficiently sophisticated equipment. In accordance with the Plan of Action in June 1997 six new Mobile Diagnostic Laboratories (MDLs) were delivered to replace the old ones, functioning in the area since 1992, and to facilitate the increase in examinations. Three new MDLs operate now in Belarus (Brest, Gomel, Mogilev Oblasts), two in Ukraine (Rovno and Zhitomir Oblasts) and one in Russian Federation (Bryansk Oblast).

The technical composition of one MDL is as follows:

- Minibus "Volkswagen"
- Ultrasound scanner Aloka SSD-500 & Video printer Mitsubissi P90E
- Transducer UST 5512U - 7.5 Mhz (for thyroid gland examination)
- Transducer UST-586-5 - 5.0 Mhz (for abdominal cavity examination)
- Blood analyser QBC Autoreader
- Urine analyser Clinitec 100
- Computer Note-Book & Printer
- Dosimeter Mira 661

Besides, in order to improve communication means during last two years the Regional Red Cross Committees, involved into CHARP, were supplied with fax-machines, photocopiers, computers and printers.

The stock of reagents and consumables for the MDLs, supplied within the previous ECHO contract, is sufficient to provide examinations till October 1999. Every month the Regional RC Committees report to Minsk Delegation on using the reagents.

III. FINANCIAL ASPECTS

13. State of execution of budget

According to the article 1.2 of the contract the financing was for a maximum ECU 338,000. The expenditures are indicated in the final financial report as attached (Annex II D).

13.1. There were no changes, made compared with initial and/or modified budget.

14. Other donors that participated in the financing of the operation

CHARP maintains close contacts with various agencies like WHO, UNICEF, USAID, Sasakawa Foundation, Children of Chernobyl as well as with radiological centres, clinics, dispensaries, research-scientific institutes and many leading specialists and experts from Belarus, Russia and Ukraine. These contacts enable the team to co-ordinate their work with the others avoiding inadmissible duplications of screening at the same area for most effective usage of available resources.

The Psycho-Social Support component maintains close co-operation with the International Federation Reference Centre for Psychological Support, hosted by the Danish Red Cross, which supervises and advises on training and psychological aid. The "UNESCO-Chernobyl" Programme provides lectures on stress, grief and coping at training sessions. Other bodies lending support include the State Pedagogical University (Belarus), the Belarus Health Psychology Association and the Belarus - Dutch Centre for Information and Health.

ECHO remains so far the main donor to CHARP. Other important donors are Red Cross Societies from United Kingdom, Denmark, the Netherlands, France and Japan.

During the period under consideration the Japanese Red Cross donated JPY 11,200,000 to CHARP. There was also a donation from the Dutch Red Cross in amount of USD 273,184. The Danish Red Cross transferred funds in amount CHF 90,000, earmarked for purchase of milk powder.

IV. CONCLUSION

Even almost thirteen years after the Chernobyl disaster, the situation in the three principally affected countries - Belarus, Russia, Ukraine - remains to be alarming. In the field of humanitarian aid, concerns about cancer, attributable to the accident, still exist. Important questions remain open with regard to human health effects of radiation. The psycho social impact of the accident for the population is obvious and it was underlined at numerous international Chernobyl conferences. Therefore the necessity to provide comprehensive humanitarian assistance to the people, affected by the disaster, calls for a concerted efforts of all concerned.

During the period under consideration, CHARP gradually increased the number of medical check-ups, focusing on the thyroid gland examinations, improving and expanding the psycho-social assistance to the population. In November 1998, the PSS Programme was started in Ukraine.

An important part of CHARP's activity is the additional provision of multivitamins enriched with microelements and L-thyroxine which is extremely needed by the people with thyroid gland pathologies.

The financial support from the European Community Humanitarian Office (ECHO) is crucial for the development of the Chernobyl Humanitarian Assistance and Rehabilitation Programme. With appreciation to this support, CHARP is able to help hundreds thousands of people, living on radiation polluted areas, saving many human lives. People appreciate it very much.

CHARP, a well organised and co-ordinated programme, provides the population with vital medical and psychological assistance on the spot. It is especially important for the people, living in remote and radiation polluted areas. For many the visits made by the MDLs, is the first medical examination since the Chernobyl accident because the capacities of governmental services are critically limited at the present time. In Ukraine and Bryansk Region (Russia) the Red Cross MDLs are the only mobile laboratories which are operating in the rural areas. In all regions the activity of the MDLs are co-ordinated with health authorities.

The data, collected by the MDLs, confirms a rather poor state of health of the population from the affected areas. There is still high incidence of thyroid gland pathologies and cancer, especially in children and persons who were children at the time of the disaster. The experts from research and scientific centres in Belarus, Ukraine and Russia as well as scientists from other countries indicated that this illness would peak in the years 2005-2010. This, along with a deterioration in living conditions and a drastic reduction in health and social welfare services throughout the former Soviet Union, points out to a clear and compelling need for the programme to continue. Given the fact that in the difficult economic situation this kind of services of such level and quality can hardly be provided in the near future by the local Governments in the three countries, for numerous beneficiaries, living in the areas, affected by the Chernobyl disaster, CHARP remains to be the only possibility to get a necessary medical and psychological assistance.

CHARP BENEFICIARIES

(from 1990 to 1998)

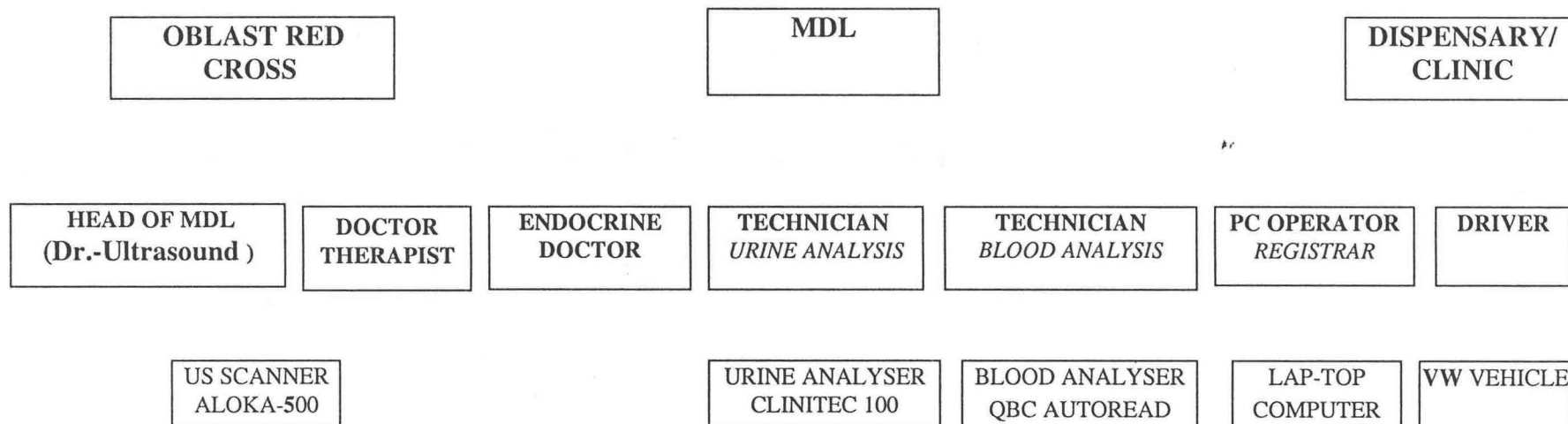
N	Kind of Service	Number of Assisted
1.	Measurements of background radiation	430,936
2.	Measurements of surface contamination of objects of the environment	131,466
3.	Measurements of locally produced foodstuff for radiation contamination	139,350
4.	Examination of people: internal irradiation, blood and urine analysis	272,495
5.	Medical screening, provided by MDL RC, in 1994-1998	328,703
6.	Distribution of 150 ton milk powder to children	228,000
7.	Distribution of 110 million multivitamins to children	480,000
8.	Levothyroxine and other medicaments	30,000
9.	Distribution of brochures "Radiation and Nutrition"	150,000
10.	People, received psycho-social support	6,800
	TOTAL	2,197,750

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03/17/99



MOBILE DIAGNOSTIC LABORATORY OF RED CROSS (MDL RC)

MDL STRUCTURE



MDL SCHEME OF EXAMINATION

